

BALLOT QUESTION COMMITTEE FINANCIAL REPORT

To be filed with:
Arkansas Ethics Commission
Post Office Box 1917
Little Rock, AR 72203
Phone (501) 324-9600
Fax (501) 324-9606



(Arkansas Ethics Commission File Stamp)

Check if this report is an amendment to a previously filed report

1. NAME OF COMMITTEE (IN FULL) Marijuana Policy Project Steve Fox, Treasurer	2. TYPE OF REPORT <input checked="" type="checkbox"/> Monthly Report (due 15 days after end of month) <input type="checkbox"/> Preelection Report (due 7 days before election)* <input type="checkbox"/> Final Report (due 30 days after election)
ADDRESS 236 Massachusetts Ave NE, Suite 400	*NOTE: Preelection report must be received by the Ethics Commission on or before due date.
CITY, STATE AND ZIP CODE Washington, DC 20002	
TELEPHONE NUMBER	

This report covers period: (9 - 1 - 12) through (9 - 30 - 12)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	-0-	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	-0-	\$ 246,500
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	-0-	\$ 246,500
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	-0-	

7. (X) **NO ACTIVITY** Check if you have not received or made any contributions during this reporting period. If you have no activity, file the first page of this report only.

I certify under oath that I have examined this report and to the best of my knowledge and belief the information so disclosed is a complete, true, and accurate financial statement.

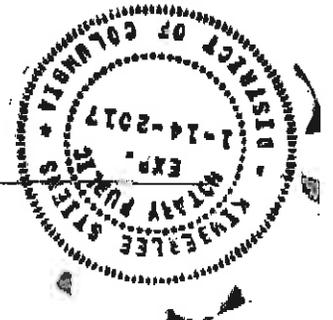
State of DC
~~Arkansas~~
 County of DC) ss

Signature of Ballot Question Committee Officer

Subscribed and sworn before me this 12 day of October, 2012

KIMBERLEE STIENS
 NOTARY PUBLIC DISTRICT OF COLUMBIA
 My Commission Expires January 14, 2017
 (Legible Notary Seal)

Signature of Notary Public



My Commission Expires _____