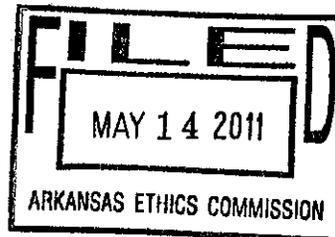


BALLOT QUESTION COMMITTEE FINANCIAL REPORT

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) MPP Arkansas Fund 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 2002	
TELEPHONE NUMBER 202-462-5747	

This report covers period: (4 - 1 - 11) through (4 - 30 - 11)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	\$1,204	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	\$229	\$1,433
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	- 0 -	- 0 -
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	\$1,433	

7. () **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.

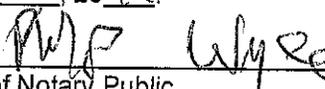


 Signature of Ballot Question Committee Officer

State of Arkansas ^{DW}
~~DISTRICT OF COLUMBIA~~ ^{SSA}
 County of _____

Subscribed and sworn before me this 13th day of MAY, 2011.

(Legible Notary Seal)



 Signature of Notary Public

My Commission Expires 04-14-2015

