

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)

FILED

NOV 13 2012

ARKANSAS ETHICS
COMMISSION

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

BY _____

RE: Arkansas Medical
Marijuana Act

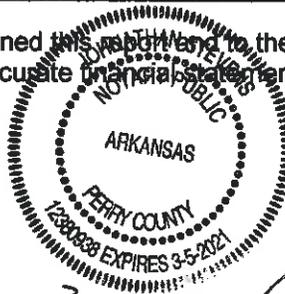
1. NAME OF COMMITTEE (IN FULL) Coalition to Preserve Arkansas Values (CPAV)	2. TYPE OF REPORT <input type="checkbox"/> Monthly Report (due 15 days after end of month) <input type="checkbox"/> Preelection Report (due 7 days before election)* <input checked="" type="checkbox"/> Final Report (due 30 days after election)
ADDRESS 35209 Sample Road	<p><small>*NOTE: Preelection report must be received by the Ethics Commission on or before due date.</small></p>
CITY, STATE AND ZIP CODE Roland, AR 72135	
TELEPHONE NUMBER _____	

This report covers period: (11 - 1 - 12) through (Filing date)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	\$ 200.00	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	0	\$ 4,200.00
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	\$ 200.00	\$ 4,200.00
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	0	

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.



Jan L. Page

Signature of Ballot Question Committee Officer

State of Arkansas
 County of Perry } ss

Subscribed and sworn before me this 13 day of November, 2012

[Signature]

Signature of Notary Public

(Legible Notary Seal)

My Commission Expires 3-5-21

14. NONMONEY CONTRIBUTIONS RECEIVED BY COMMITTEE

Estimated Fair Market Value If Over \$50
 (Does not include volunteer services by individuals)

Date of Receipt	Name of Contributor	Street Address of Contributor	Description and Value of Nonmoney Item	Cumulative Total from this Contributor
15. TOTAL ITEMIZED NONMONEY CONTRIBUTIONS OF \$50 OR MORE			Ø	
16. TOTAL NONITEMIZED NONMONEY CONTRIBUTIONS			Ø	
17. TOTAL NONMONEY CONTRIBUTIONS THIS REPORT (includes totals from lines 15 and 16)			Ø	

IMPORTANT

In addition to monetary contributions, committees should report the receipt of any nonmoney ("in-kind") contributions. A committee receives an in-kind contribution whenever a person provides the committee with an item or service without charge or for a charge that is less than the fair market value of the item or service in question.

