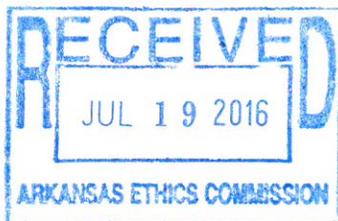


BALLOT QUESTION COMMITTEE FINANCIAL REPORT

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) <i>Restore Term Limits</i> | |
| ADDRESS <i>P.O. Box 38</i> | 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) |
| CITY, STATE AND ZIP CODE <i>Mayflower, AR 72106</i> | *NOTE: Preelection report must be received by the Ethics Commission on or before due date. |
| TELEPHONE NUMBER | |

This report covers period: *(06-01-16)* through *(06-30-16)*

| SUMMARY | FOR REPORTING PERIOD | CUMULATIVE TOTALS |
|--|----------------------|-------------------|
| 3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD | \$30,646.96 | |
| 4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD | 0 | \$82,587.58 |
| 5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD | \$30,232.77 | \$82,173.41 |
| 6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD | \$414.17 | |

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]
Signature of Ballot Question Committee Officer

State of Arkansas

County of Pulaski) ss

Subscribed and sworn before me this 19th day of July, 2016.

(Legible Notary Seal)

My Commission Expires 1-2-23

[Signature]
 TAMMY PERCIPOLI
 PULASKI COUNTY
 NOTARY PUBLIC -- ARKANSAS
 My Commission Expires January 2, 2023
 Commission No. 12391333

14. NONMONEY CONTRIBUTIONS RECEIVED BY COMMITTEE

(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 |
|---|---------------------|-------------------------------|--|--|
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| 15. TOTAL NONMONEY CONTRIBUTIONS THIS REPORT | | | 0 | |

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.

