

LOCAL-OPTION BALLOT QUESTION COMMITTEE (L-OBQC) FINANCIAL REPORT OF PERSON MEETING THE DEFINITION OF L-OBQC SET FORTH IN § 3-8-702(7)(A)*

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)	
ADDRESS	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 type="checkbox"/> Final Report (due 30 days after election)
CITY, STATE AND ZIP CODE	*NOTE: Preelection report must be <i>received</i> by the Ethics Commission on or before due date.
TELEPHONE NUMBER	

This report covers period: (- -) through (- -)

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

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 Local-Option Ballot Question Committee Officer

State of Arkansas } ss
County of _____

Subscribed and sworn before me this _____ day of _____, 20_____.

(Legible Notary Seal)
My Commission Expires _____

Signature of Notary Public

* Ark. Code Ann. § 3-8-702(7)(A) provides as follows: "local-option ballot question committee" means any person, located within or outside Arkansas, that receives contributions for the purpose of expressly advocating the qualification, disqualification, passage, or defeat of a local-option ballot question or any person, other than an elected official expending public funds, or an individual, located within or outside Arkansas, that makes expenditures for the purpose of expressly advocating the qualification, disqualification, passage, or defeat of a local-option ballot question.

8. LOAN INFORMATION
 Please Type or Print
 Do Not List Loans Previously Reported

Date	Name and Address of Lender	Amount
9. TOTAL LOANS THIS REPORT		

10. ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE RECEIVED BY COMMITTEE

Please Type or Print
Use Additional Copies of this Page if Necessary

Date of Receipt	Name of Contributor	Street Address of Contributor	Place of Business Employer/Occupation	Amount of Contribution	Cumulative Total from this Contributor

ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE RECEIVED BY COMMITTEE

Please Type or Print

Date of Receipt	Name of Contributor	Street Address of Contributor	Place of Business Employer/Occupation	Amount of Contribution	Cumulative Total from this Contributor
11. TOTAL ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE					
12. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS					
13. TOTAL MONETARY CONTRIBUTIONS THIS REPORT (includes totals from lines 9, 11, and 12)					

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
15. TOTAL NONMONEY CONTRIBUTIONS THIS REPORT				

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.

**16. ITEMIZED EXPENDITURES OF \$100 OR MORE MADE BY COMMITTEE
OR ON BEHALF OF COMMITTEE BY ADVERTISING AGENCY, PUBLIC
RELATIONS FIRM, OR POLITICAL CONSULTANT**

Please Type or Print

Use Additional Copies of this Page if Necessary

Date	Name of Person to Whom Expenditure was Made	Street Address	Amount of Expenditure	Purpose of Expenditure

**ITEMIZED EXPENDITURES OF \$100 OR MORE MADE BY COMMITTEE
OR ON BEHALF OF COMMITTEE BY ADVERTISING AGENCY, PUBLIC
RELATIONS FIRM, OR POLITICAL CONSULTANT**

Please Type or Print

Date	Name of Person to Whom Expenditure was Made	Street Address	Amount of Expenditure	Purpose of Expenditure
17. TOTAL ITEMIZED EXPENDITURES OF \$100 OR MORE				
18. TOTAL UNITEMIZED EXPENDITURES				
19. TOTAL EXPENDITURES THIS REPORT (includes totals from lines 17 and 18)				

20. EXPENDITURES BY CATEGORY

Please Type or Print

CATEGORY	TOTAL AMOUNT
Advertising	
Direct Mail	
Office Supplies	
Travel	
Telephone	
Other Expenses (list)	
21. TOTAL EXPENDITURES BY CATEGORY	