## POLITICAL ACTION COMMITTEE (PAC) QUARTERLY REPORTING FORM

To be filed with: Mark Martin, Secretary of State State Capitol, Room 026 Little Rock, AR 72201 Phone (501) 682-5070 Fax (501) 682-3408

### FILED

OCT 15 2013

For assistance in completing this form contact: Arkansas Ethics Commission Post Office Box 1917 Little Rock, AR 72203 Phone (501) 324-9600 Toll Free (800) 422-7773

1. NAME OF COMMITTEE (IN FULL) Secretary of State  2. TYPE OF  □ April 15 Quar	
D.B.H. 2 PAC	
ADDRESS P.O. Box 311  Duly 15 Quart covers April 1 through Covers July 1 through January 15 Quart covers October 15 Quart covers July 1 through January 15 Quart covers October 1 the Little Rock, AR 72203	hrough March 31 terly ugh June 30 Quarterly ugh September 30 Quarterly hrough December 31

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS		
4. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	0			
5. INTEREST EARNED ON COMMITTEE FUNDS (IF ANY)	0			
6. TOTAL MONETARY CONTRIBUTIONS RECEIVED	\$8,000.00	\$8,000.00		
7. TOTAL CONTRIBUTIONS MADE TO CANDIDATES/COMMITTEES	\$4,000.00	\$4,000.00		
8. ADMINISTRATIVE EXPENSES	\$ 500.00	\$ 500.00		
BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	\$3,500.00	<b>4</b> 000.00		
10. ( ) NO ACTIVITY (check if you have not received or made any contributions during this reporting period)				

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 PAC Officer

State of Arkansas
County of Pulaski ss
Subscribed and sworn before me this day of, 20_13, 20_13
announced Tell R
ROSHELLE BROWN Signature of Notary Public
(Legible Notary Seafikansas NO. 12384893
Ny Continho no Expires 9-14-2018
My Commission Expires:
Note: If faxed, notary seal must be legible (i.e., either stamped or raised and inted) and the original must falled within the stamped or raised and inted).

Note: If faxed, notary seal must be legible (i.e., either stamped or raised and inked) and the original must follow within ten (10) days.

## 11. ITEMIZED MONETARY CONTRIBUTIONS RECEIVED BY COMMITTEE OVER \$500

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

Date	Name of Contributor	Address of Contributor	Employer/ Place Of Business	Amount Of	Cumulative
<u> </u>				Contribution	Total for Year
7/8/13	Central Arkansas Nursing Centers, Inc.	415 Rogers Ave. Fort Smith, AR 72901	Central Arkansas Nursing Centers, Inc.	\$3,000.00	\$3,000.00
9/19/13	Conway County Legal Beverage Association	3 Carl Hoelzeman Lane Morrilton, AR 72110	Conway County Legal Beverage Association	\$5,000.00	\$8,000.00
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### ITEMIZED MONETARY CONTRIBUTIONS RECEIVED BY COMMITTEE OVER \$500

Please Type or Print

Date	Name of Contributor	Address of Contributor	Employer/ Place Of Business	Amount Of Contribution	Cumulative Total for Year
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	12. TOTAL ITEMIZED MONI RECEIVED DURING RE	PORTING PERIOD		\$8,000.00	
	13. TOTAL UNITEMIZED MO RECEIVED DURING RE	ONETARY CONTRIBUTION PORTING PERIOD	)NS		

14.	TOTAL MONETARY CONTRIBU	JTIONS RECEIVED
	<b>DURING REPORTING PERIOD</b>	(to be entered on line #6)

\$8,000.00



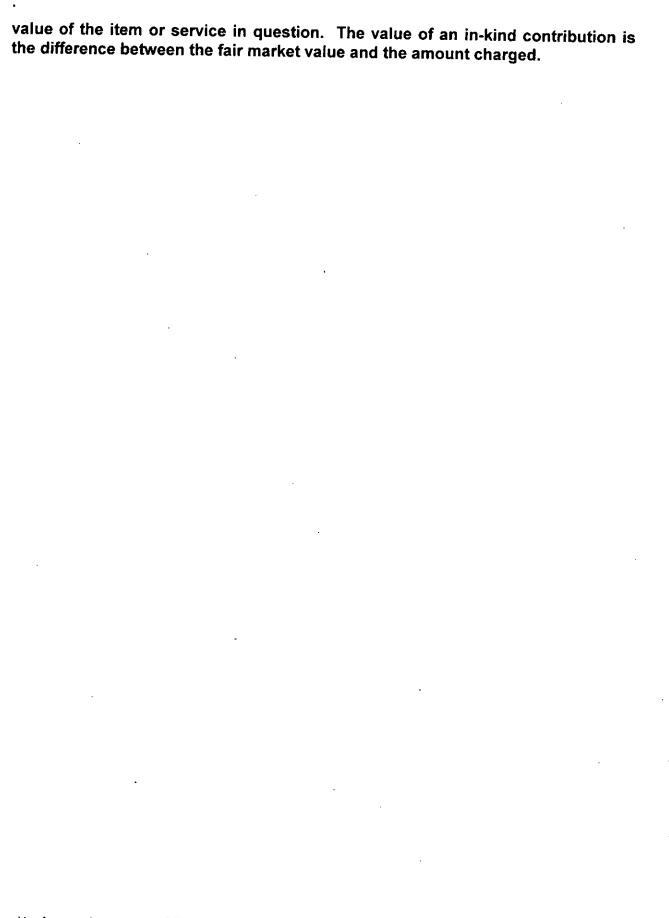
### 15. ITEMIZED NONMONEY CONTRIBUTIONS RECEIVED BY COMMITTEE OVER \$500

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

Date of Receipt	Full Name and Address of Contributor	Description of Nonmoney Item	Value of Nonmoney Item	Cumulative Total From This Contributor
	16. TOTAL ITEMIZED NONMONEY ( RECEIVED DURING REPORTING	CONTRIBUTIONS G PERIOD		
	17. TOTAL NONITEMIZED NONMONEY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD			
i	18. TOTAL NONMONEY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD			

#### <u>IMPORTANT</u>

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



### 19. ITEMIZED MONETARY CONTRIBUTIONS MADE TO CANDIDATES AND COMMITTEES OVER \$50

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

Date	Name of	Address	Election for Which	Amount Of
	Candidate/Committee To Whom Contribution Made	of Candidate/Committee	Contribution was Made	Contribution
8/29/13	Asa for Governor	P.O. Box 22467 Little Rock, AR 72221	Arkansas Gubernatorial 2014	\$2,000.00
9/25/13	David Sanders for State Senate	P.O. Box 25847 Little Rock, AR 72221	David Sanders for State Senate	\$500.00
9/26/13	Andrea Lea for Auditor	P.O. Box 1821 Russelville, AR 72811	Andrea Lea for Auditor	\$250.00
9/26/13	Bryan King for State Senate	871 CR 814 Green Forest, AR 72638	Bryan King for State Senate	\$250.00
9/26/13	David Sanders for State Senate	P.O. Box 25847 Little Rock, AR 72221	David Sanders for State Senate	\$1,000.00
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### ITEMIZED MONETARY CONTRIBUTIONS MADE TO CANDIDATES **AND COMMITTEES OVER \$50**

Please Type or Print

Date	Name of Candidate/Committee	Address Of Candidate/Committee	Election for Which Contribution was Made	Amount Of Contribution
	To Whom Contribution Made			
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 20. TOTAL ITEMIZED MONETARY CONTRIBUTIONS MADE TO CANDIDATES AND COMMITTEES DURING REPORTING PERIOD	\$4,000.00
21. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS MADE TO CANDIDATES AND COMMITTEES DURING REPORTING PERIOD	
22. TOTAL MONETARY CONTRIBUTIONS MADE TO CANDIDATES AND COMMITTEES DURING REPORTING PERIOD (to be entered on line #7)	\$4,000.00

# 23. ITEMIZED NONMONEY CONTRIBUTIONS MADE TO CANDIDATES AND COMMITTEES OVER \$50

Please Type or Print

Date	Name and Address of Candidate/Committee To Whom Contribution Made	Election (if applicable) for which Contribution was Made	Description of Nonmoney Item	Value of Nonmoney Item
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	24. TOTAL ITEMIZED NONMO	ONEY CONTRIBUTIONS N	ADE TO	
-	24. TOTAL ITEMIZED NONMONEY CONTRIBUTIONS MADE TO CANDIDATES AND COMMITTEES DURING REPORTING PERIOD  25. TOTAL UNITEMIZED NONMONEY CONTRIBUTIONS MADE TO CANDIDATES AND COMMITTEES DURING REPORTING PERIOD			
	26. TOTAL NONMONEY CON AND COMMITTEES DURI	TRIBUTIONS MADE TO C	ANDIDATES	

### 27. ITEMIZED ADMINISTRATIVE EXPENSES OVER \$100

Please Type or Print

Date	Name and Address of	Description	Amount of
	Supplier/Payee	of Expenditure	Expenditure
0/0/42	Stewart Law Firm	A simple to A == 11 co. Ph	
8/8/13	904 Garland Street	Administrative Expenses	\$500.00
	Little Rock, AR 72201		
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28. TOTAL ITEMIZED ADMINISTRATIVE EXPENSES INCURRED			<b>\$500.00</b>
DURING REPORTING PERIOD			\$500.00
29. TOTAL NONITEMIZED ADMINISTRATIVE EXPENSES INCURRED			
DURING REPORTING PERIOD			
30. TOTAL ADMINISTRATIVE EXPENSES INCURRED DURING			<b>6500.00</b>
REPORTING PERIOD (to be entered on line #8)			\$500.00
1721 OLYTHAD I ELYIOD (to be entered on line #6)			