## LEGISLATIVE QUESTION COMMITTEE (LQC)\* STATEMENT OF ORGANIZATION

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)



 $\hfill \square$  Check if this is an amendment to a previously filed statement of organization

Section One: LQC Name									
Name of LQC (in full) Protect AR Rights									
Section Two: LQC Address & Phone Number  If LQC has no office address, use the address of the LC	QC officer authorized to re	eceive notices on behalf of the LQC.							
Address: 1308 W. 2nd. St.									
City: Little Rock State AR	State AR Zip72201 Telephone Number 501-374-3935								
Section Three: LQC Officers and Directors Provide the name, title, address, and telephone number	er of the treasurer and oth	er principal officers and directors of the LQ							
Name: James Bruce McMath		Title: <u>Treasurer</u>							
Address: 822 Beechwood St;.	City:Little Rock	State:AR Zip72205:							
Telephone Number: <u>501-681-5403</u>									
Name: Kristin Foster		Title:Chair							
Address: 1308 W. 2nd St.	City:Little Rock	State: AR Zip:72201							
Telephone Number:479-567-0042									
Name:Sarai Portilllo		Title: Vice Chair							
Address: 8619 Chicot Rd.	City: Little Rock	State: <u>AR</u> Zip: <u>72209</u>							
Telephone Number: <u>501-529-4617</u>									
Name:		_Title:							
Address:	City:	_State:Zip:							
Telephone Number:									

<sup>\*</sup> The term "legislative question committee is defined in Ark. Code Ann. § 7-9-402(10(A) and (B) and § 600(i)(1) and (2) of the Ethics Commission's Rules on Ballot and Legislative Question Committees.

Section Four: Financial Information  Provide the name and address of each financial installer.  value.	titution in w	hich the LQC de	posits mor	ney or a	anything	else of monetary
Name of Financial Institution: Arvest Bank			in the second second			
Address: 500 Broadway St.	City:_	Little Rock	State:	AR	_Zip:	72201
Name of Financial Institution:						
Address:	City:_		State:		_Zip:	
Section Five: Members Provide the name of each person who is a member name without also listing its own members, if any.	of the com	mittee. A person	that is no	t an ind	lividual ı	may be listed by its
Arkansas Advocates for Children and Far	milies, AR	NAACP, Arkar	nsas Unit	ed, Al	R Educa	ation Asso.,
Citizen's First Congress, For AR People	e, AR Pub	lic Policy Pane	l, League	of W	omen \	Voters of AR.
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Section Six: Brief Statement Provide a brief statement identifying the substance of passage or defeat, and, if known, the date each legion.  The committee is in oppostion to issue 3 constitution in order to restrict the right	islative que	stion will be pres	ented to a	popula	ould ar	t an election.  mend the Arkansas
9/25/2020 Date		G		Signati	J/J	QC Officer