STATEMENT OF FINANCIAL INTEREST

State/District officials file with:

Cole Jester, Secretary of State 500 Woodlane Street Little Rock, AR 72201 Phone (501) 682-5070 Fax (501) 682-3548

Calendar year covered <u>2024</u>
(Note: Filing covers the previous calendar year)

For assistance in completing this form contact: Arkansas Ethics Commission Phone (501) 324-9600 Toll Free (800) 422-7773

Please provide complete information. If the information requested in a particular section does not apply to you, indicate such by noting "Not Applicable" in that section. Do not leave any part of this form blank. If additional space is needed, you may attach the information to this document. Do not file this form with the Arkansas Ethics Commission.

<u>SECTI</u>	ON 1- NAME AND ADDRESS		
Name	Blackwood Julie		ANNS
Addres	(Street or P.O. Box Number) (Kirst) (First) (First) (City)	K AR	(Middle) ファンのい
Phone	501-425-2321	(State)	(Zip Code)
Spouse	's name Blackwood Boud (Rust)		C
All nan	's name Blackwood Boud (Rist) nes under which you and/or your spouse do business: Julie Bl	ackwood, 1	Middle) Bookyshapepeo
	Blackwood + Company		
<u>SECTI</u>	ON 2- REASON FOR FILING		
V	Public Official THE DISTRICT (office held) Candidate	<u> </u>	v/25-16+13+08
	Candidate	Terri Holl	ingsworth rcuit County Clerk
	Oistrict Judge	i orașei cr	rearc obanco ofc. n
	(name of district)		
	City Attorney (name of city)		
	State Government: Agency Head/Department Director/Division Director _		
	Chief of Staff or Chief Deputy	(name of agency/de	
	(name of Constitutional Officer, S Public appointee to State Board or Commission	enate, or House of Represe	ntatives)
	(name of bo	ard/commission)	
	School Board member		
	Candidate for school board		
	(name of school district)		
	Public or Charter School Superintendent		
	(name of school district/school) Executive Director of Education Service Cooperative		
	_	me of cooperative)	
	Advertising and Promotion Commission member	me or cooperative)	
		vertising and promotion cor	nmission)
	201 et sec	•	h park authority board)

SECT	TION 2- REASON FOR I	FILING (continued)		
	Appointee to one of the following municipal, county or regional boards or commissions (list name of board or commission): □ Planning board or commission			n):
		ission		
SECT	ION 3- SOURCE OF IN	<u>ICOME</u>		
or you income examp exceed	r spouse receives gross ince that constitute a portion ele: accountants, attorneys ling \$1,000 from at least of	come amounting to more than \$1,000. (Yof the gross income of the business or pros, farmers, contractors, etc. do not have to one source, the answer N/A is <u>not correct</u> .	your spouse, or any other person for the use or benefit of you are not required to disclose the individual items of offession from which you or you spouse derives income. I list their individual clients.) If you receive gross income	For
a) (Check appropriate box:	☐ More than \$1,000	More than \$12,500	
			ource of income)	
		(address	Little ROCK, AR 72205	
		Julie Blacku	ood	
		(name under which m	come received)	
Provid	e a brief description of the	e nature of the services for which the com	pensation was receivedpersonal *rain;	ing
b) Ch	eck appropriate box:	More than \$1,000	☐ More than \$12,500	
		(name of employer or so	ource of income)	
	·	4619 No LOOKOUT	Little ROCK AR TAZAS	
		Black wood (name under which in	Company	
Provid	e a brief description of the	e nature of the services for which the com		
c) C	Check appropriate box:	☐ More than \$1,000	More than \$12,500	
		(name of employer or so	ource of income)	
		201 S. BROO (address	d won Suite # 440, L. R., AR 72	201
		Julie Steels	Blackwood	
		(name under which in	,	
Provide	e a brief description of the	nature of the services for which the com-	pensation was received J. P 4 Dist.	

SECTION 4- BUSINESS OR HOLDINGS

List the name of every business in which you, your spouse or any other person for the use or benefit of you or your spouse have an investment or holding. Individual stock holdings should be disclosed. Figures should be based on fair market value at the end of the reporting period.

a)	Check appropriate box:	☐ More than \$1,000	More than \$12,500		
		(name of corporation	Lynch on, firm or enterprise)		
		2200 N. Rode	ven Parnam Rd Suite 300		
		Little Rock, A	R 72212-		
		(name under which	en investment neta)		
b)	Check appropriate box:	☐ More than \$1,000	☐ More than \$12,500		
		(name of corporation	n, firm or enterprise)		
		(add	dress)		
		(name under which	ch investment held)		
c)	Check appropriate box:	☐ More than \$1,000	☐ More than \$12,500		
	(name of corporation, firm or enterprise)				
	(address)				
		(name under which investment held)			
d)	Check appropriate box:	☐ More than \$1,000	☐ More than \$12,500		
	(name of corporation, firm or enterprise)				
		(add	lress)		
	(name under which investment held)				
e)	Check appropriate box:	☐ More than \$1,000	☐ More than \$12,500		
	(name of corporation, firm or enterprise)				
	(address)				
	(name under which investment held)				
f)	Check appropriate box:	☐ More than \$1,000	☐ More than \$12,500		
		· · · · · · · · · · · · · · · · · · ·			
		(name of corporation, firm or enterprise)			
		(ado	dress)		
		(name under whice	ch investment held)		

SECTION 5-	OFFICE	OR DIREC	TORSHIP

(amount owed)

List every office or directorship held by you or your spouse in any business, corporation, firm, or enterprise subject to jurisdiction of a regulatory agency of this State, or of any of its political subdivisions. (name of business, corporation, firm, or enterprise) (address) (office or directorship held) (name of office holder) (name of business, corporation, firm, or enterprise) (address) (office or directorship held) (name of office holder) **SECTION 6- CREDITORS** List each creditor to whom the value of five thousand dollars (\$5,000) or more was personally owed or personally obligated and is still outstanding. (This does not include debts owed to members of your family or loans made in the ordinary course of business by either a financial institution or a person who regularly and customarily extends credit.) a) Chase (name of creditor) P.O. Box 15123, Willington, DF 19850
(address of creditor) (name of creditor)

Toyota Financial Services, P.O. Box 22171, Tamps, AZ 85285
(address of creditor) (name of creditor) (address of creditor) **SECTION 7- PAST-DUE AMOUNTS OWED TO GOVERNMENT** List the name and address of each governmental body to which you are legally obligated to pay a past-due amount and a description of the nature of the amount of the obligation. (name of governmental body) (address of governmental body) (amount owed) (nature of the obligation) (name of governmental body)

(address of governmental body)

(nature of the obligation)

SECTION 8- GUARANTOR OR CO-MAKER

a)	
	(name)
b)	(address)
0)	(name)
	(address)
SECTION 9- GIFTS	
your spouse and of each gift of more than entertainment, advance, services, or anythere a number of exceptions to the definition interest prepared for use with this form.	sonable estimate of the fair market value of each gift of more than \$100 received by you \$250 received by your dependent children. The term "gift" is defined as "any payment, ing of value unless consideration of equal or greater value has been given therefor." The n of "gift." Those exceptions are set forth in the Instructions for Statement of Financial Note: The value of an item shall be considered to be less than \$100 if the public servant in was received any amount over \$100 and the reimbursement occurs within ten (10) days
)	(description 6 : 6)
	(description of gift)
(date)	(fair market value)
	(source of gift)
0)	
	(description of gift)
(date)	(fair market value)
	(source of gift)
)	
	(description of gift)
(date)	(fair market value)
	(source of gift)
)	
)	(description of gift)
)(date)	(description of gift) (fair market value)
(date)	(fair market value)
,	(fair market value)

(source of gift)

SECTION 10- AWARDS

If you are an employee of a public school district, the Arkansas School for the Blind, the Arkansas School for the Deaf, the Arkansas School for Mathematics, Sciences, and the Arts, a university, a college, a technical college, a technical institute, a comprehensive lifelong learning center, or a community college, the law requires you to disclose each monetary or other award over one hundred dollars (\$100) which you have received in recognition of your contributions to education. The information disclosed with respect to each such award should include the source, date, description, and a reasonable estimate of the fair market value.

a)	
	(description of award)
(date)	(fair market value)
	(source of award)
b)	
	(description of award)
(date)	(fair market value)
	(source of award)
c)	
	(description of award)
(date)	(fair market value)
	(source of award)
d)	
	(description of award)
(date)	(fair market value)
	(source of award)
SECTION 11- NONGOVERNMENTAL SOURCE	S OF PAYMENT
List each nongovernmental source of payment of your when you appear in your official capacity when the exp	expenses for food, lodging, or travel which bears a relationship to your offic penses incurred exceed \$150.
a)	person or organization paying expense)
(name of p	
	(business address)
(date of expense)	\$(amount of expense)
	(nature of expenditure)
b)	
(name of p	person or organization paying expense)
	(business address)
(date of expense)	(amount of expense)
	(nature of expenditure)

SECTION 12- DIRECT REGU	ATION OF BUSINESS	
List any business which employs you	and is under direct regulation or subject to direct control by the governmental bod	ly which you serve.
a)		
	(name of business)	
	(governmental body which regulates or controls)	
b)		
	(name of business)	
	(governmental body which regulates or controls)	
c)		
-/	(name of business)	
	(governmental body which regulates or controls)	
d)		
<u>u)</u>	(name of business)	
	(governmental body which regulates or controls)	
compensation paid for each category stockholder owning more than 10% of	overnmental body for which you serve which have a total annual value in excess of goods or services sold by you or any business in which you or your spouse is are the stock of the company.	officer, director, or
a)	(goods or services)	
	(governmental body to whom sold)	
	·	
b)	(compensation paid)	
	(goods or services)	
	(governmental body to whom sold)	
	(compensation paid)	
c)	(goods or services)	
	(governmental body to whom sold)	
	(compensation paid)	
d)		
	(goods or services)	<u>-</u>

(governmental body to whom sold)

(compensation paid)

SECTION 14- SIGNATURE

I certify under penalty of false swearing that the above information is true and correct.

Signature Blackward

STATE OF ARKANSAS

COUNTY OF PULASIC } ss

Subscribed and sworn before me this

TAMMY MOWNERITER
PRAIRIE COUNTY
NOTARY PUBLIC - ARKANSAS

4_<u>30</u>_day of _

Notary Pu

(Me Settle Mon Expire Mean) 11, 2034 Commission No. 12396281

My commission expires:

New ICC of the state of the sta

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 pursuant to Ark. Code Ann. § 21-8-703(b)(3).

IMPORTANT

Where to file:

State or district candidates/public servants file with the Secretary of State.

Appointees to state boards/commissions file with the Secretary of State.

County, township, and school district candidates/public servants file with the county clerk.

Municipal candidates/public servants file with the city clerk or recorder, as the case may be.

City attorneys file with the city clerk of the municipality in which they serve.

District judges file with the Secretary of State.

Members of regional boards or commissions file with the county clerk of the county in which they reside.

General Information:

- * The Statement of Financial Interest should be filed by January 31 of each year.
- * The filing covers the <u>previous</u> calendar year.
- * Candidates for elective office shall file the Statement of Financial Interest for the previous calendar year on the first Monday following the close of the period to file as a candidate for elective office unless already filed by January 31. In addition, if the party filing period ends before January 1 of the year of the general election, candidates for elective office shall file a Statement of Financial Interest for the previous calendar year by no later than January 31 of the year of the general election.
- * Agency heads, department directors, and division directors of state government shall file the Statement of Financial Interest within thirty (30) days of appointment or employment unless already filed by January 31.
- * Appointees to state boards or commissions shall file the Statement of Financial Interest within thirty (30) days after appointment unless already filed by January 31.
- * If a person is included in any category listed above for any part of a calendar year, that person shall file a Statement of Financial Interest covering that period of time regardless of whether they have left their office or position as of the date the statement is due.