## STATEMENT OF FINANCIAL INTEREST

State/District officials file with: John Thurston, Secretary of State 500 Woodlane Street Little Rock, AR 72201 Phone (501) 682-5070

Fax (501) 682-3548

Calendar year covered 2024 (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

	"Not Applicable" in that section. Do not leave any parties to this document. Do not file this form with the A			s needed, you may attach the
SECTI	ON 1- NAME AND ADDRESS			* 4* * * * * * * * * * * * * * * * * *
Name	Hughes, Kandi N.			
Addres	s7 Manor View Court, Little Rock,	AR 72211		(Middle)
Phone	(Street or P.O. Box Number) 501.291.3324	(City)	(State)	(Zip Code)
Spouse	's name	_		
	(Last) nes under which you and/or your spouse do business:			(Middle)
SECTI	ON 2- REASON FOR FILING		R	ECEIVED
	Public Official			A O. 8005
	Candidate	(office held)		JAN 28 2025
	Candidate		Ţ	ERRI HOLLINGSWORTH CIRCUIT COUNTY CIERK
	(n	name of district)		
	City Attorney	(name of city)		
	State Government: Agency Head/Department Direct	•		
	Chief of Staff or Chief Deputy		(name of agen	cy/department/division)
	Chief of Staff or Chief Deputy(name of	Constitutional officer,	Senate, or House of Rep	presentatives)
	Public appointee to State Board or Commission			
	(name of board/commission) School Board member			
	Candidate for school board	e of school district)		
	(name	e of school district)		· · · · · · · · · · · · · · · · · · ·
	Public or Charter School Superintendent (name of			
	(name of Executive Director of Education Service Cooperative			
		(n	name of cooperative)	
	Advertising and Promotion Commission member			
	Research Park Authority Board member under A.C.			commission)
	2000 1100	3	(name of res	earch park authority board)

SECTION 2- REASON FOR FILING (continued) Appointee to one of the following municipal, county or regional boards or commissions (list name of board or commission): X ☐ Planning board or commission \_\_\_ ☐ Airport board or commission \_\_\_\_ ☑ Water or Sewer board or commission Central Arkansas Water Board of Commissioners Utility board or commission ☐ Civil Service commission **SECTION 3- SOURCE OF INCOME** List each employer and/or each other source of income from which you, your spouse, or any other person for the use or benefit of you or your spouse receives gross income amounting to more than \$1,000. (You are not required to disclose the individual items of income that constitute a portion of the gross income of the business or profession from which you or you spouse derives income. For example: accountants, attorneys, farmers, contractors, etc. do not have to list their individual clients.) If you receive gross income exceeding \$1,000 from at least one source, the answer N/A is not correct. More than \$12,500 ☐ More than \$1,000 a) Check appropriate box: MISO (Midcontinent Independent System Operator) (name of employer or source of income) 1700 Centerview Drive, Little Rock, AR 72211 (address) Kandi Hughes (name under which income received) Provide a brief description of the nature of the services for which the compensation was received \_\_\_\_\_ Senior Corporate Counsel ☐ More than \$12,500 ☐ More than \$1,000 b) Check appropriate box: (name of employer or source of income) (address) (name under which income received) Provide a brief description of the nature of the services for which the compensation was received \_\_\_\_\_ ☐ More than \$12,500 ☐ More than \$1,000 c) Check appropriate box: (name of employer or source of income)

Provide a brief description of the nature of the services for which the compensation was received \_\_\_\_\_

(address)

(name under which income received)

### **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: N/A	☐ More than \$1,000	☐ More than \$12,500			
		(name of corporation, fi	rm or enterprise)			
		(address	)			
		(name under which in	vestment held)			
b)	Check appropriate box:	☐ More than \$1,000	☐ More than \$12,500			
		(name of corporation, fi	rm or enterprise)			
		(address	9)			
		(name under which in	vestment held)			
:)	Check appropriate box:	☐ More than \$1,000	☐ More than \$12,500			
		(name of corporation, fir	rm or enterprise)			
		(address	s)			
<del></del>		(name under which in	vestment held)			
d)	Check appropriate box:	☐ More than \$1,000	☐ More than \$12,500			
		(name of corporation, fi	rm or enterprise)			
		(address	s)			
		(name under which in	vestment 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, fi	rm or enterprise)			
		(address	s)			
		(name under which in	vestment held)			

# 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. a) N/A (name of business, corporation, firm, or enterprise) (address)

(address)
(office or directorship held)
(name of office holder)
b) (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) N/A
(name of creditor)

# a) N/A (name of creditor) (address of creditor) (name of creditor) (address of creditor) c) (name of creditor) (address of creditor)

# SECTION 7- PAST-DUE AMOUNTS OWED TO GOVERNMENT

**SECTION 5- OFFICE OR DIRECTORSHIP** 

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.

a)	N/A	(address of governmental body)	
	(name of governmental body)	(addiese of Berenmann 1-2)	
	(amount owed)	(nature of the obligation)	
b)	(name of governmental body)	(address of governmental body)	
	(amount owed)	(nature of the obligation)	

# **SECTION 8- GUARANTOR OR CO-MAKER** List each guarantor or co-maker who has guaranteed a debt of yours that is still outstanding. (This includes debt guarantors arising or extended and refinanced after Jan. 1, 1989. Members of your family who are your guarantors are not required to be disclosed.) a) N/A (name) (address) (name) (address) **SECTION 9- GIFTS** List the source, date, description, and a reasonable estimate of the fair market value of each gift of more than \$100 received by you or your spouse and of each gift of more than \$250 received by your dependent children. The term "gift" is defined as "any payment, entertainment, advance, services, or anything of value unless consideration of equal or greater value has been given therefor." There are a number of exceptions to the definition of "gift." Those exceptions are set forth in the Instructions for Statement of Financial Interest prepared for use with this form. (Note: The value of an item shall be considered to be less than \$100 if the public servant reimburses the person from whom the item was received any amount over \$100 and the reimbursement occurs within ten (10) days from the date the item was received.) a) N/A (description of gift) (date) (fair market value) (source of gift) (description of gift) (date) (fair market value) (source of gift) (description of gift) (fair market value) (date) (source of gift) (description of gift) (fair market value) (date)

(date)

(source of gift)

(description of gift)

(source of gift)

(fair market value)

### **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) N/A	
	(description of award)
(date)	(fair market value)
	(source of award)
b)	
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)
CONTRACTOR OF THE CONTRACTOR O	C OF BAVIMENT
SECTION 11- NONGOVERNMENTAL SOURCE	
when you appear in your official capacity when the exp	expenses for food, lodging, or travel which bears a relationship to your office penses incurred exceed \$150.
a) N/A (name of	person or organization paying expense)
	(business address)
(date of expense)	(amount of expense)
	(nature of expenditure)
b)	
(name of	person or organization paying expense)
	(business address)
(date of expense)	(amount of expense)
	(nature of expenditure)

SECTION 12- DIRECT F	REGULATION OF BUSINESS
List any business which emplo	bys you and is under direct regulation or subject to direct control by the governmental body which you serve.
a) N/A	
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)
<i>1</i> \	
a)	(name of business)
	(governmental body which regulates or controls)
	1 10% of the stock of the company.
	(goods or services)
	(governmental body to whom sold)
1.	(compensation paid)
b)	(goods or services)
	(governmental body to whom sold)
2)	(compensation paid)
c)	(goods or services)
	(governmental body to whom sold)
A)	(compensation paid)
d)	(goods or services)
	(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.

Kaudy n. Hugy Signature

STATE OF ARKANSAS

Subscribed and sworn before one this Subscribed and sworn subscribed and subscribed and sworn subscribed and sub

day of January

<sub>20</sub> 25

Notary Public

My commission expires

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 previous 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.