STATEMENT OF FINANCIAL INTEREST

For assistance in completing

(name of research park authority board)

State/District officials file with: Calendar year covered this form contact: John Thurston, Secretary of State (Note: Filing covers the previous calendar year) Arkansas Ethics Commission 500 Woodlane Street Phone (501) 324-9600 Little Rock, AR 72201 Toll Free (800) 422-7773 Phone (501) 682-5070 Is this an amendment? ☐ Yes Fax (501) 682-3548 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. **SECTION 1- NAME AND ADDRESS** Name (State) Spouse's name All names under which you and/or your spouse do business: **SECTION 2- REASON FOR FILING** Justice Public Official Candidate ____ (office sought) District Judge _____ (name of district) City Attorney _____ (name of city) State Government: Agency Head/Department Director/Division Director _____ (name of agency/department/division) Chief of Staff or Chief Deputy (name of Constitutional Officer, Senate, or House of Representatives) Public appointee to State Board or Commission ____ (name of board/commission) School Board member _____ (name of school district) Candidate for school board ____ (name of school district) Public or Charter School Superintendent (name of school district/school) Executive Director of Education Service Cooperative (name of cooperative) Advertising and Promotion Commission member ____ (name of advertising and promotion commission) Research Park Authority Board member under A.C.A. § 14-144-201 et seq.____

	Appointee to one of the following municipal, county or regional boards or commissions (list name of board or commission): Airport board or commission
	☐ Airport board or commission ☐ Water or Sewer board or commission
	☐ Water or Sewer board or commission
	☐ Utility board or commission ☐ Civil Service commission
	☐ Civil Service commission
<u>SECTI</u>	ON 3- SOURCE OF INCOME
account \$1,000 f	th employer and/or each other source of income from which you, your spouse, or any other person for the use or benefit of you spouse receives gross income amounting to more than \$1,000. (You are not required to disclose the individual items of income ants, attorneys, farmers, contractors, etc. do not have to list their individual clients.) If you receive gross income exceeding eck appropriate box: More than \$1,000
<u>u)</u> Ch	More than \$1,000 Family Council More than \$12,500
	(name of employer or source of income)
	(address) Street, St Z LR 72201
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co-owner/provide gymastics
instructions to kids Impact Gymnastics 5900 Wadley Rd 72170

Ark. Code Ann. § 21-8-403 provides that, upon conviction, any person who violates any provision of subchapter 4, 6, 7, or 8 of chapter 8, Title 21 of the Arkansas Code is guilty of a Class A misdemeanor. The culpable mental state required shall be a purposeful violation.

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 \	ee	More than \$12,500			
-		July Stricing of Fronting					
_		name of cor	poration, firm or enterprise		7 -		
		J. Luke	(address)	Shrwood	72121		
		(name und	er which investment held)				
b)	Check appropriate box:	☐ More than \$1,000		More than \$12,500			
		5900 vadley	poration, firm or enterprise)	d 72120			
		Lindsey	(address) MC(-04 1212U			
		(name under which investment held)					
c)	Check appropriate box:	☐ More than \$1,000	[☐ More than \$12,500			
		(name of corpo	oration, firm or enterprise)				
			(address)				
		(name under	which investment held)				
d)	Check appropriate box:	☐ More than \$1,000		More than \$12,500			
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(Check appropriate box:	☐ More than \$1,000		More than \$12,500			
		(name of corpora	ation, firm or enterprise)				
	(address)						
		(name under w	which investment held)				

SECTION 5- OFFICE OR DIRECTORSHIP

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	name of business, corporation, firm, or enterprise)
	(address)
	(office or directorship held)
	(name of office holder)
b)	
(na	ame 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 tho outstanding. (This does not include debts owed financial institution or a person who regularly as	usand dollars (\$5,000) or more was personally owed or personally obligated and is still to members of your family or loans made in the ordinary course of business by either and customarily extends credit.)
a)	
	(name of creditor)
b)	(address of creditor)
	(name of creditor)
c)	(address of creditor)
	(name of creditor)
	(address of creditor)
SECTION 7- PAST-DUE AMOUNTS OWEI	
	body to which you are legally obligated to pay a past-due amount and a description of
a)	
(name of governmental body)	(address of governmental body)
(amount owed)	(nature of the obligation)
(name of governmental body)	(address of governmental body)
(amount owed)	(nature of the obligation)

SECTION 8- GUARANTOR OR CO-MAKER

extended and remained after Jan. 1, 1969. Memor	ers of your family who are your guarantors are not required to be disclosed.)
a)	(name)
b)	(address)
b)	(name)
	(address)
SECTION 9- GIFTS	
your spouse and of each gift of more than \$250 rece entertainment, advance, services, or anything of valuare a number of exceptions to the definition of "gift Interest prepared for use with this form. (Note: The reimburses the person from whom the item was rece from the date the item was received.)	estimate of the fair market value of each gift of more than \$100 received by you sived by your dependent children. The term "gift" is defined as "any payment, ue unless consideration of equal or greater value has been given therefor." There." Those exceptions are set forth in the Instructions for Statement of Financial evalue of an item shall be considered to be less than \$100 if the public servant eived any amount over \$100 and the reimbursement occurs within ten (10) days
a)	(description of gift)
(date)	(fair market value)
	(source of gift)
b)	(description of view)
	(description of gift)
(date)	(fair market value)
	(source of gift)
c)	(description of gift)
(date)	(fair market value)
	(source of gift)
d)	
	(description of gift)
(date)	(fair market value)
	(source of gift)
2)	(description of gift)
(date)	(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)
CD CTION 11 NOVO CONTROL CONTR	
SECTION 11- NONGOVERNMENTAL SOURCES OF	
List each nongovernmental source of payment of your expe when you appear in your official capacity when the expense	enses for food, lodging, or travel which bears a relationship to your offices incurred exceed \$150.
a)	
(name of person	n or organization paying expense)
	(business address)
(date of expense)	(amount of expense)
(n	ature of expenditure)
b)	
(name of person	n or organization paying expense)
	(business address)
(date of expense)	\$(amount of expense)
(n	ature of expenditure)

SECTION 12- DIRECT REGULATION OF BUSINESS
List any business which employs you and is under direct regulation or subject to direct control by the governmental body 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)
(name of business)
(governmental body which regulates or controls)
SECTION 13- SALES TO GOVERNMENTAL BODY
List the goods or services sold to the governmental body for which you serve which have a total annual value in excess of \$1,000. List the compensation paid for each category of goods or services sold by you or any business in which you or your spouse is an officer, director, or stockholder owning more than 10% of the stock of the company.

SECTION 14- SIGNATURE

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

Signature Signature

STATE OF ARKANSAS

COUNTY OF PRAINING SS

Subscribed and sworn before me this

__ day of

_, 20_____

TAMMY MCWHORTER
PRAIRIE COUNTY
NOTARY RUBLIC - ARKANSA

Commission No. 12398281

Johns

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 <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.