

STATEMENT OF FINANCIAL INTEREST

State/District officials file with: Calendar year covered 2024
Cole Jester, Secretary of State (Note: Filing covers the previous calendar year)
500 Woodlane Street
Little Rock, AR 72201
Phone (501) 682-5070
Fax (501) 682-3548

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

Is this an amendment? Yes No

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 Nations Graham Huland
(Last) (First) (Middle)
Address PO Box 979 Prairie Grove AR 72753
(Street or P.O. Box Number) (City) (State) (Zip Code)
Phone 479-846-5551
Spouse's name Nations Melanie Louise
(Last) (First) (Middle)
All names under which you and/or your spouse do business: _____

SECTION 2- REASON FOR FILING

FILED

Public Official _____
(office held) **JAN 22 2025**

Candidate _____
(office sought) **Arkansas Secretary of State**

X District Judge DISTRICT 2, DIVISION 2
(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)

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

Research Park Authority Board member under A.C.A. § 14-144-201 et seq. _____
(name of research park authority board)

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
 Con Agra Brands

(name of corporation, firm or enterprise)
 222 W. Merchandise Mart Plaza, Chicago, IL 60654
 (address)

Graham and Melanie Nations

b) Check appropriate box: More than \$1,000 More than \$12,500
 American Funds Growth Fund of America

(name of corporation, firm or enterprise)
 One Market Steuart Tower, Ste. 1800, San Francisco, CA 94105-1800
 (address)

Graham and Melanie Nations

(name under which investment held)

c) Check appropriate box: More than \$1,000 More than \$12,500
 The Hartford Capital Appreciation Fund

(name of corporation, firm or enterprise)
 ITT Hartford Group NC, PO Bos 2999, Hartford, CT 06115
 (address)

Graham and Melanie Nations

(name under which investment held)

d) Check appropriate box: More than \$1,000 More than \$12,500
 Invesco American Franchise Fund

(name of corporation, firm or enterprise)
 AIM Counselor Series Trust, 1 Greenway Plaza, Ste 100, Houston, TX 47014
 (address)

Graham and Melanie Nations

(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)

(address)

(name under which investment held)

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.

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

- a) Check appropriate box: More than \$1,000 More than \$12,500
 American Funds Investment Company of America (name of corporation, firm or enterprise)
 333 S. Hope St., Los Angeles, CA 90071-1406 (address)
 Graham Nations (name under which investment held)
- b) Check appropriate box: More than \$1,000 More than \$12,500
 American Funds New Economy Fund (name of corporation, firm or enterprise)
 333 S. Hope St., Los Angeles, CA 90071-1406 (address)
 Graham Nations (name under which investment held)
- c) Check appropriate box: More than \$1,000 More than \$12,500
 American Funds AMCAP Fund (name of corporation, firm or enterprise)
 333 S. Hope St., Los Angeles, CA 90071 (address)
 Graham Nations (name under which investment held)
- d) Check appropriate box: More than \$1,000 More than \$12,500
 American Funds New Perspective Fund (name of corporation, firm or enterprise)
 333 S. Hope St., Los Angeles, CA 90071 (address)
 Graham and Melanie Nations; Graham Nations (name under which investment held)
- e) Check appropriate box: More than \$1,000 More than \$12,500
 American Funds Washington Mutual Investors Fund, Inc. (name of corporation, firm or enterprise)
 333 S. Hope St., Los Angeles, CA 90071 (address)
 Melanie Nations F/B/O Eleanor Nations; Melanie Nations F/B/O Maggie Nations (name under which investment held)
- f) Check appropriate box: More than \$1,000 More than \$12,500
 American Funds Income Fund of America (name of corporation, firm or enterprise)
 One Market Steuart Tower Ste. 1800, San Francisco, CA 94105-1800 (address)
 Melanie Nations F/B/O Eleanor Nations; Melanie Nations F/B/O Maggie Nations (name under which investment held)

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)Melanie Nations

(name)

PO Box 979, Prairie Grove, AR 72753

(address)

b) _____

(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) _____

(description of gift)

(date)

(fair market value)

(source of gift)

b) _____

(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)

e) _____

(description of gift)

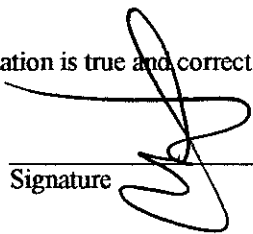
(date)

(fair market value)

(source of gift)

SECTION 14- SIGNATURE

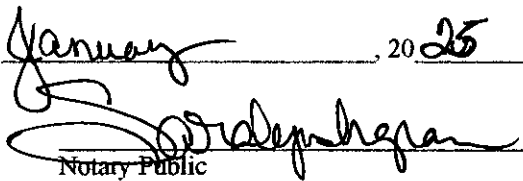
I certify under penalty of false swearing that the above information is true and correct.

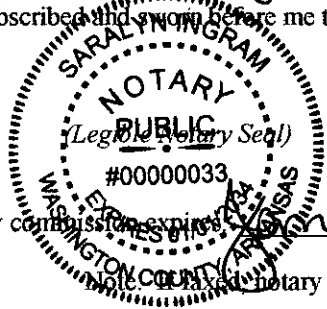
Signature 

STATE OF ARKANSAS

COUNTY OF Washington } ss

Subscribed and sworn before me this 17th day of January, 2025.


Notary Public



My commission expires January 1, 2034

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.