

**FILED DISCLOSURE BY MEMBER (OR MEMBER-ELECT)
OF THE ARKANSAS GENERAL ASSEMBLY
PURSUANT TO ARK. CODE ANN. § 21-8-901**

JAN 30 2025

Please print or type

Arkansas
Secretary of State
WHERE TO FILE:

Mark Martin, Secretary of State
State Capitol, Room 026
Little Rock, AR 72201
Phone (501) 682-5070
Fax (501) 682-3408

CALENDAR YEAR COVERED 2024
(NOTE: filing covers previous calendar year)

For assistance in completing
this form contact:

Arkansas Ethics Commission
Post Office Box 1917
Little Rock, AR 72203
Phone (501) 324-9600
Toll Free (800) 422-7773

NAME OF MEMBER (or MEMBER-ELECT)
OF ARKANSAS GENERAL ASSEMBLY:

Shepherd
(Last)

Matthew
(First)

Joseph
(Middle)

ADDRESS: 209 Archer Ave.
(Street or P.O. Box Number)

El Dorado
(City)

AR
(State)

71730
(Zip Code)

1. DESCRIPTION OF GOODS OR SERVICES: List any goods or services sold by the Member (or Member-elect) of the Arkansas General Assembly, his or her spouse, or any business in which such person or his or her spouse is an officer, director, or stockholder owning more than ten percent (10%) of the stock, during the previous calendar year having a total annual value in excess of one thousand (\$1,000) dollars to an office, department, commission, council, board, bureau, committee, legislative body, agency, or other establishment of the State of Arkansas.

Legal Services

2. GOVERNMENTAL ENTITY TO WHICH GOODS OR SERVICES WERE SOLD: List the name of the office, department, commission, council, board, bureau, committee, legislative body, agency, or other establishment of the State of Arkansas to which goods or services were sold.

El Dorado School District

3. NAME OF SELLER: List the name of the seller (i.e., Member (or Member-elect) of the Arkansas General Assembly, his or her spouse, or any business in which such person or his or her spouse is an officer, director, or stockholder owning more than ten percent (10%) of the stock).

Law Offices Shepherd & Shepherd, P.A.

4. RELATIONSHIP OF SELLER TO MEMBER (OR MEMBER-ELECT):

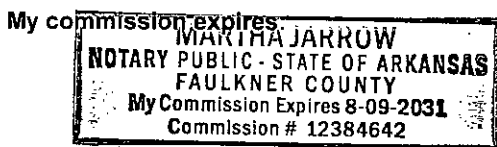
Member is stockholder/officer

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

MyA
Signature of Member (or Member-Elect)

State of Arkansas } ss
County of Faulkner

SUBSCRIBED and SWORN to before me this 30th day of January, 2025.



Revised 12/2013