

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 2023
(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

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 McCAIN Garday William JR
(Last) (First) (Middle)
Address PO Box 1242 Ark 72949
(Street or P.O. Box Number) (City) (State) (Zip Code)
Phone 479-968-2280

Spouse's name McCaig Lenora Christine
(Last) (First) (Middle)

All names under which you and/or your spouse do business: White Rock Ranch LLC, Compens w Educational Services LLC, Sage Meadow Farm DBA, Mack McCaig, Chris McCaig

SECTION 2- REASON FOR FILING

- Public Official Circuit Judge 5th Judicial District DUNSM II
(office held)
- 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 Sentencing 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. _____
(name of research park authority board)

FILED

JAN 25 2024

Arkansas
Secretary of State
State of Arkansas

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):
- Planning board or commission _____
 - Airport board or commission _____
 - Water or Sewer board or commission _____
 - 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.

a) Check appropriate box: More than \$1,000 More than \$12,500

SAGE MEADOW FARMS DBA
 (name of employer or source of income)
 PO Box 1242 Ozark AR 72549
 (address)
 Gordon "Mack" McCAIN Lenora Christine "Chris" McCAIN
 (name under which income received)

Provide a brief description of the nature of the services for which the compensation was received Cattle/Hay Feeding

b) Check appropriate box: More than \$1,000 More than \$12,500

Whitlock Ranch LLC (in partnership with Sage Meadow Farms DBA)
 (name of employer or source of income)
 PO Box 1242 Ozark AR 72549
 (address)
 Gordon W. Mack McCAIN JR
 (name under which income received)

Provide a brief description of the nature of the services for which the compensation was received Cattle/Hay Feeding

c) Check appropriate box: More than \$1,000 More than \$12,500

Compassion Equestrian Services LLC
 (name of employer or source of income)
 PO Box 1242 Ozark AR
 (address)
 Lenora Christine McCAIN
 (name under which income received)

Provide a brief description of the nature of the services for which the compensation was received Testify for exceptional children

① State of Arkansas more than 12,500
 Judge Gordon W. McCAIN JR
 Circuit Judge

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
Bank OZK

(name of corporation, firm or enterprise)
Orlando AR West Commercial

(address)
Lenore Christine McCain

(name under which investment held)

b) Check appropriate box: More than \$1,000 More than \$12,500

(name of corporation, firm or enterprise)

(address)

(name under which 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)

(address)

(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 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) White Rock Realty LLC
(name of business, corporation, firm, or enterprise)
P.O. Box 1242 Opok AR 72949
(address)
Owner/director
(office or directorship held)
Carly W. McLean Jr
(name of office holder)

b) Compassio Educational Services LLC
(name of business, corporation, firm, or enterprise)
P.O. Box 1242 Opok AR 72949
(address)
Lehan C. McLean Owner/Director
(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) _____
(name of creditor)

(address of creditor)

b) _____
(name of creditor)

(address of creditor)

c) _____
(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.

a) _____
(name of governmental body) _____
(address of governmental body)

(amount owed) _____
(nature of the obligation)

b) _____
(name of governmental body) _____
(address of governmental body)

(amount owed) _____
(nature of the obligation)

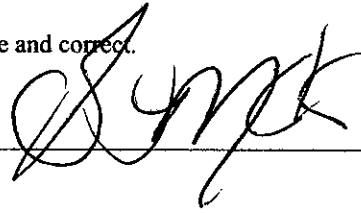
Ark. Code Ann. § 21-8-403 provides that, upon conviction, any person who violates any provision of subchapter 4, 6, 7, or 8 of chapter 8, Title 21 of the Arkansas Code is guilty of a Class A misdemeanor. The culpable mental state required shall be a purposeful violation.
Revised 12/2017

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Revised 12/2017

SECTION 14- SIGNATURE

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

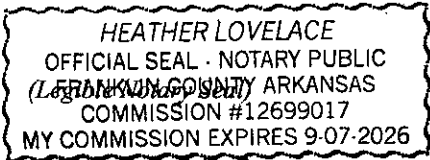
Signature



STATE OF ARKANSAS

COUNTY OF Franklin } ss

Subscribed and sworn before me this 25 day of January, 20 24.



Heather Lovelace
Notary Public

My commission expires: 9-7-2026

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.