

# STATEMENT OF FINANCIAL INTEREST

State/District officials file with:  
 Cole Jester, Secretary of State  
 500 Woodlane Street  
 Little Rock, AR 72201  
 Phone (501) 682-5070  
 Fax (501) 682-3548

Calendar year covered 2025  
 (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 Zeiser Jared R  
 (Last) (First) (Middle)  
 Address 2463 Hwy 290 Hot Springs AR  
 (Street or P.O. Box Number) (City) (State) (Zip Code)  
 Phone 501-545-7822

Spouse's name Zeiser Courtney C  
 (Last) (First) (Middle)

All names under which you and/or your spouse do business: Jared R. and Courtney Benson Carter Zeiser,  
Zeiser Wealth Management, LLC, B. Carter Land, LLC, Quadruple C's Properties, Zeiser Family Trust, Carter Bottoms, LLC

## SECTION 2- REASON FOR FILING

FILED  
 JAN 30 2026  
 Arkansas Secretary of State

- Public Official \_\_\_\_\_  
 (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 LOPFI  
 (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)



**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.

\* stock and ETF holdings owned by Zeiser Family Trust, SIMPLE IRA, or IRA.

a) Check appropriate box:  More than \$1,000  More than \$12,500  
 Greasy Slough Sporting Club Stock  
 (name of corporation, firm or enterprise)  
 Cash, AR  
 (address)  
 Jared R. Zeiser  
 (name under which investment held)

b) Check appropriate box:  More than \$1,000  More than \$12,500  
 Jackson Point Hunting Club  
 (name of corporation, firm or enterprise)  
 Phillips County AR + Cohoma County MS  
 (address)  
 Zeiser Family Trust  
 (name under which investment held)

c) Check appropriate box:  More than \$1,000  More than \$12,500  
 Alphabet INC  
 (name of corporation, firm or enterprise)  
 \*  
 (address)  
 \*  
 (name under which investment held)

d) Check appropriate box:  More than \$1,000  More than \$12,500  
 Amazon, INC  
 (name of corporation, firm or enterprise)  
 \*  
 (address)  
 \*  
 (name under which investment held)

e) Check appropriate box:  More than \$1,000  More than \$12,500  
 Amphenol corp  
 (name of corporation, firm or enterprise)  
 \*  
 (address)  
 \*  
 (name under which investment held)

f) Check appropriate box:  More than \$1,000  More than \$12,500  
 Apple, INC  
 (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.

a) Check appropriate box:  More than \$1,000  More than \$12,500  
Ball Corp  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

b) Check appropriate box:  More than \$1,000  More than \$12,500  
Corning Inc  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

c) Check appropriate box:  More than \$1,000  More than \$12,500  
Short Dick's Sporting Goods, NC  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

d) Check appropriate box:  More than \$1,000  More than \$12,500  
Dollar Gen Corp  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

e) Check appropriate box:  More than \$1,000  More than \$12,500  
Fedex Corp  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

f) Check appropriate box:  More than \$1,000  More than \$12,500  
Hunt JB Trans SVCS INC  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

**SECTION 4- BUSINESS OR HOLDINGS**

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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  
Huntington Inga IS INDS  
(name of corporation, firm or enterprise)  
\_\_\_\_\_  
(address)  
\*  
(name under which investment held)

b) Check appropriate box:  More than \$1,000  More than \$12,500  
INTEL CORP  
(name of corporation, firm or enterprise)  
\_\_\_\_\_  
(address)  
\*  
(name under which investment held)

c) Check appropriate box:  More than \$1,000  More than \$12,500  
Meta Platforms INC  
(name of corporation, firm or enterprise)  
\_\_\_\_\_  
(address)  
\*  
(name under which investment held)

d) Check appropriate box:  More than \$1,000  More than \$12,500  
Monolithic Pwr Sys INC  
(name of corporation, firm or enterprise)  
\_\_\_\_\_  
(address)  
\*  
(name under which investment held)

e) Check appropriate box:  More than \$1,000  More than \$12,500  
MP Mat's Corp  
(name of corporation, firm or enterprise)  
\_\_\_\_\_  
(address)  
\*  
(name under which investment held)

f) Check appropriate box:  More than \$1,000  More than \$12,500  
Newmont Corp  
(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.

a) Check appropriate box:  More than \$1,000  More than \$12,500  
 ONTO INNOVATION INC  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 \* (address)  
 \_\_\_\_\_  
 \* (name under which investment held)

b) Check appropriate box:  More than \$1,000  More than \$12,500  
 Palantir Technologies INC  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 \* (address)  
 \_\_\_\_\_  
 \* (name under which investment held)

c) Check appropriate box:  More than \$1,000  More than \$12,500  
 Poet Technologies INC  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 \* (address)  
 \_\_\_\_\_  
 \* (name under which investment held)

d) Check appropriate box:  More than \$1,000  More than \$12,500  
 Purecycle Technologies  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 \* (address)  
 \_\_\_\_\_  
 \* (name under which investment held)

e) Check appropriate box:  More than \$1,000  More than \$12,500  
 R# Restoration Hardware  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 \* (address)  
 \_\_\_\_\_  
 \* (name under which investment held)

f) Check appropriate box:  More than \$1,000  More than \$12,500  
 Rockwell Automation Inc  
 (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.

a) Check appropriate box:  More than \$1,000  More than \$12,500  
Roku INC  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

b) Check appropriate box:  More than \$1,000  More than \$12,500  
Sharkninja INC  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

c) Check appropriate box:  More than \$1,000  More than \$12,500  
Starbucks Corp  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

d) Check appropriate box:  More than \$1,000  More than \$12,500  
Take-Two Interactive Software Inc  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

e) Check appropriate box:  More than \$1,000  More than \$12,500  
Tapestry Inc  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

f) Check appropriate box:  More than \$1,000  More than \$12,500  
T1 Energy INC  
 (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.

a) Check appropriate box:  More than \$1,000  More than \$12,500  
UL Solutions INC  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

b) Check appropriate box:  More than \$1,000  More than \$12,500  
Wal Mart INC  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

c) Check appropriate box:  More than \$1,000  More than \$12,500  
Warby Parker INC  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

d) Check appropriate box:  More than \$1,000  More than \$12,500  
Xylem INC  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

e) Check appropriate box:  More than \$1,000  More than \$12,500  
10X Genomics INC  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

f) Check appropriate box:  More than \$1,000  More than \$12,500  
Invesco Nasdaq 100 ETF  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

**SECTION 4- BUSINESS OR HOLDINGS**

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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  
Ishares Gold ETF  
(name of corporation, firm or enterprise)  
\*  
(address)  
(name under which investment held)

b) Check appropriate box:  More than \$1,000  More than \$12,500  
Ishares Latin America ETF  
(name of corporation, firm or enterprise)  
\*  
(address)  
(name under which investment held)

c) Check appropriate box:  More than \$1,000  More than \$12,500  
Ishares Silver Trust ETF  
(name of corporation, firm or enterprise)  
\*  
(address)  
(name under which investment held)

d) Check appropriate box:  More than \$1,000  More than \$12,500  
Proshares Ultra S&P 500 ETF  
(name of corporation, firm or enterprise)  
\*  
(address)  
(name under which investment held)

e) Check appropriate box:  More than \$1,000  More than \$12,500  
Schwab International ETF  
(name of corporation, firm or enterprise)  
\*  
(address)  
(name under which investment held)

f) Check appropriate box:  More than \$1,000  More than \$12,500  
Schwab US Large Cap ETF  
(name of corporation, firm or enterprise)  
\*  
(address)  
(name under which investment held)

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**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  
 Simplify Health Care ETF  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

b) Check appropriate box:  More than \$1,000  More than \$12,500  
 SPDR INDEX Emerging ETF  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

c) Check appropriate box:  More than \$1,000  More than \$12,500  
 State Street Spdr S&P Metals + Mining ETF  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

d) Check appropriate box:  More than \$1,000  More than \$12,500  
 State Street SPDR Bloomberg 1-3 Treasury ETF  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

e) Check appropriate box:  More than \$1,000  More than \$12,500  
 State Street SPDR Blmbrg Convert Bond ETF  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

f) Check appropriate box:  More than \$1,000  More than \$12,500  
 State Street Technology Select ETF  
 (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.

a) Check appropriate box:  More than \$1,000  More than \$12,500  
State Street Communications SR Select ETF  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

b) Check appropriate box:  More than \$1,000  More than \$12,500  
Vanguard Int'l High Yield ETF  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

c) Check appropriate box:  More than \$1,000  More than \$12,500  
Vanguard Total Bond ETF  
 (name of corporation, firm or enterprise)  
 \_\_\_\_\_  
 (address)  
 \*  
 \_\_\_\_\_  
 (name under which investment held)

d) Check appropriate box:  More than \$1,000  More than \$12,500  
Vanguard Total World ETF  
 (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) Zeiser Wealth Management, LLC  
\_\_\_\_\_  
(name of business, corporation, firm, or enterprise)  
1702 Malvern Avenue, Suite A, Hot Springs, AR 71901  
\_\_\_\_\_  
(address)  
Jared R. Zeiser, CEO/President  
\_\_\_\_\_  
(office or directorship held)  
\_\_\_\_\_  
(name of office holder)

b) B. Carter Land, LLC  
\_\_\_\_\_  
(name of business, corporation, firm, or enterprise)  
2463 Hwy 290, Hot Springs, AR 71913  
\_\_\_\_\_  
(address)  
Trustee  
\_\_\_\_\_  
(office or directorship held)  
Courtney Benson Carter Zeiser  
\_\_\_\_\_  
(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) Farm Credit - Rural 1st  
\_\_\_\_\_  
(name of creditor)  
12501 Lakefront Place, Louisville, KY 40299  
\_\_\_\_\_  
(address of creditor)  
b) \_\_\_\_\_  
\_\_\_\_\_  
(name of creditor)  
Audi Financial Services  
\_\_\_\_\_  
(address of creditor)  
c) Chase Credit Card - JPM Chase  
\_\_\_\_\_  
(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) not applicable  
\_\_\_\_\_  
(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)



**SECTION 10- AWARDS**

If you are an employee of a public school district, the Arkansas School for the Deaf and Blind, the Arkansas School for Mathematics, Sciences, and the Arts, a university, a college, a technical college, a technical institute, a comprehensive life-long 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) not applicable

_____		
(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)		

**SECTION 11- NONGOVERNMENTAL SOURCES OF PAYMENT**

List each nongovernmental source of payment of your expenses for food, lodging, or travel which bears a relationship to your office when you appear in your official capacity when the expenses incurred exceed \$150.

a) not applicable

_____		
(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 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) **not applicable**

\_\_\_\_\_  
(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.

a) **not applicable**

\_\_\_\_\_  
(goods or services)

\_\_\_\_\_  
(governmental body to whom sold)

\_\_\_\_\_  
(compensation paid)

b)

\_\_\_\_\_  
(goods or services)

\_\_\_\_\_  
(governmental body to whom sold)

\_\_\_\_\_  
(compensation paid)

c)

\_\_\_\_\_  
(goods or services)

\_\_\_\_\_  
(governmental body to whom sold)

\_\_\_\_\_  
(compensation paid)

d)

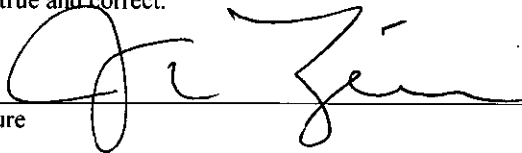
\_\_\_\_\_  
(goods or services)

\_\_\_\_\_  
(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.

  
Signature

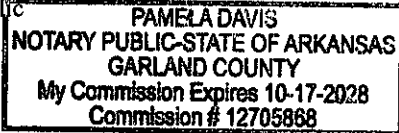
STATE OF ARKANSAS

COUNTY OF GARLAND } ss

Subscribed and sworn before me this 30<sup>th</sup> day of January, 2026.

(Legible Notary Seal)

  
Notary Public



My commission expires: 10-17-2028

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.
- Executive directors of education service cooperatives file with the county clerk.

**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.

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.