

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 2024

(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

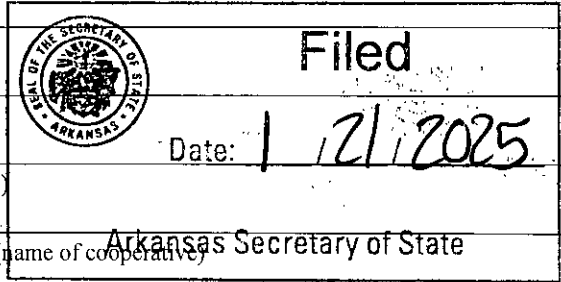
Name Scott Jamie Aleshia
Address P O Box 630 NLR AR 72115
(Last) (First) (Middle)
(Street or P.O. Box Number) (City) (State) (Zip Code)
Phone 501-398-2961

Spouse's name _____

All names under which you and/or your spouse do business: Incredibly Gifted Farm Collection
(Last) (First) (Middle)

SECTION 2- REASON FOR FILING

- Public Official State Senate - District 12
(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 _____
(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 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

Pulaski County Government
(name of employer or source of income)
201 South Broadway, Ste 220, Little Rock, AR 72201
(address)

(name under which income received)

Provide a brief description of the nature of the services for which the compensation was received _____

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

Philander Smith College
(name of employer or source of income)
900 W Daisy Bates Drive, Little Rock, AR 72202
(address)

(name under which income received)

Provide a brief description of the nature of the services for which the compensation was received _____

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

(name of employer or source of income)

(address)

(name under which income received)

Provide a brief description of the nature of the services for which the compensation was received _____

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

(name of corporation, firm or enterprise)

(address)

(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 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 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) _____
 _____ (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)

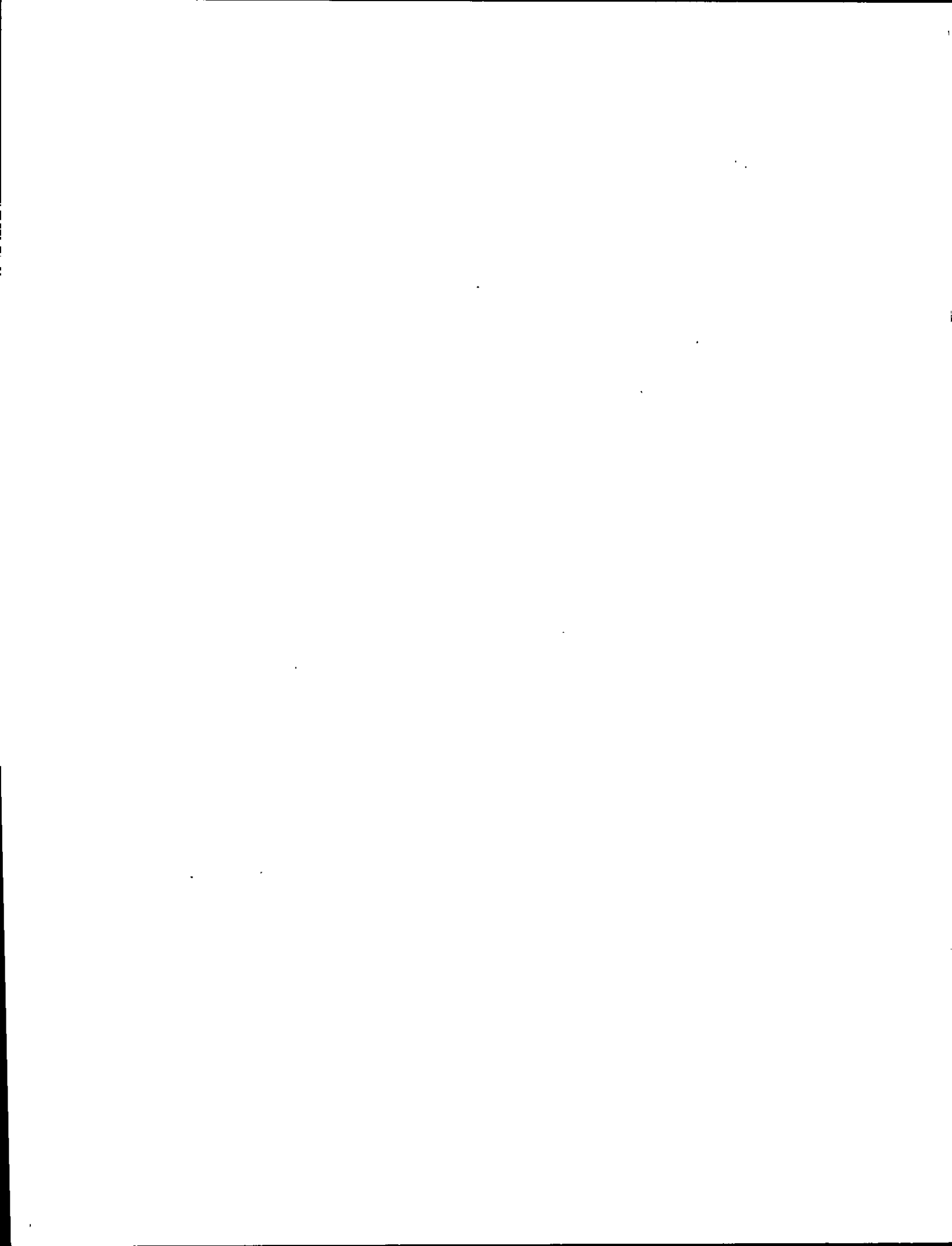
d) _____
 _____ (description of award)
 _____ (date) _____ (fair market value)
 _____ (source of award)

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) _____ *Human Services*
 _____ *National Conferences of State Legislatures - Fellows*
(name of person or organization paying expense)
 _____ *7700 East First Place Denver, CO 80230*
(business address)
 _____ *8/30/24 - 8/4/24* \$ _____ *551.30*
(date of expense) (amount of expense)
 _____ *Intersections + Innovations - Health + Human Services*
(nature of expenditure)

b) _____
 _____ (name of person or organization paying expense)
 _____ (business address)
 _____ \$ _____
 _____ (date of expense) _____ (amount of expense)
 _____ (nature of expenditure)



National Conference of State Legislatures
 7700 East First Place
 Denver, CO 80230

00042734
 09 05 2024

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INVOICE DATE	VOUCHER NUMBER	INVOICE NUMBER	DESCRIPTION	AMOUNT
Aug 28, 2024	202152	08/03/24-08/04/24	SCOTT, JAMIE - INTERSECTIONS & INNOVATIONS/KY	551.30

1

RECEIVED
 9/10/2024

TOTAL: \$551.30

National Conference of State Legislatures
 7700 East First Place
 Denver, CO 80230

KeyBank
 1675 Broadway
 Denver, CO 80202

00042734
 82-7026-3070

DATE AMOUNT
 09 05 2024 \$551.30

Five Hundred Fifty-one DOLLARS and Thirty CENTS

Pay to the Order of: SCOTT, JAMIE
 500 WOODLANE STREET
 SUITE 350
 LITTLE ROCK, AR 72201

Jim Storey

Second signature required if over \$2,000.00

⑈00042734⑈ ⑆307070267⑆ 769681077772⑈



Prather, Amber D.

From: Prather, Amber D.
Sent: Tuesday, September 10, 2024 3:15 PM
To: 'Jamie Scott'
Subject: NCSL Check
Attachments: 4089_001.pdf

Rep. Scott –

Your check from the NCSL Louisville meeting has arrived. Please let me know if you'd like to pick it up or if you'd prefer that I mail it to you.

FYI, you will need to report the attached on your 2024 Statement of Financial Interest.

Amber Prather
Travel Coordinator
Arkansas House of Representatives
State Capitol
500 Woodlane Street, Suite 350
Little Rock, AR 72201
(501) 682-7771

SECTION 14- SIGNATURE

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

[Handwritten Signature]

Signature

STATE OF ARKANSAS

COUNTY OF Pulaski } ss

Subscribed and sworn before me this 21 day of January, 20 25

KAITLYN WHITLOW
PULASKI COUNTY
NOTARY PUBLIC - ARKANSAS
My Commission Expires April 28, 2033
Commission No. 12723532

[Handwritten Signature]

Notary Public

My commission expires: 4/28/2033

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.