

STATEMENT OF FINANCIAL INTEREST

State/District officials file with:
John Thurston, Secretary of State
State Capitol, Room 026
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 Bibb Kimberly Boling
(Last) (First) (Middle)
Address P.O. Box 724 Paragould AR 72451
(Street or P.O. Box Number) (City) (State) (Zip Code)
Phone 870-761-2159

Spouse's name Bibb John Glenn
(Last) (First) (Middle)

All names under which you and/or your spouse do business: Bibb Chiropractic Center; BCH Properties, Dr. John Bibb Rental Income

SECTION 2- REASON FOR FILING

FILED

- Public Official Circuit Judge – Second Judicial District, Division 8 JAN 22 2025
(office held)
- Candidate Arkansas
(office sought) Secretary of State
- District Judge _____
(name of municipality)
- 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 Ark. Supreme Court Commission on Children, Youth and Families
(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 3- SOURCE OF INCOME (continued)

d) Check appropriate box: More than \$1,000 More than \$12,500
Dr. John Bibb / Rental Income
(name of employer or source of income)
1400 W. Court Street, Suite 1, Paragould, AR 72450
(address)
Dr. John G. Bibb
(name under which income received)

Provide a brief description of the nature of the services for which the compensation was received rental income from real property

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
Bibb Chiropractic Center
(name of corporation, firm or enterprise)
1400 West Court Street, Suite 1, Paragould, AR 72450
(address)
Dr. John Bibb
(name under which investment held)

b) Check appropriate box: More than \$1,000 More than \$12,500
BCH Properties
(name of corporation, firm or enterprise)
1400 West Court Street, Suite 1, Paragould, AR 72450
(address)
BCH/Dr. John Bibb
(name under which investment held)

c) Check appropriate box: More than \$1,000 More than \$12,500
APERS
(name of corporation, firm or enterprise)
124 West Capitol, Suite 400, Little Rock, AR 72201
(address)
Kimberly Boling Bibb
(name under which investment held)

d) Check appropriate box: More than \$1,000 More than \$12,500
Regions Bank
(name of corporation, firm or enterprise)
1512 West Court Street, Paragould, AR 72450
(address)
Kimberly Boling Bibb
(name under which investment held)

e) Check appropriate box: More than \$1,000 More than \$12,500
Success Federal Credit Union
(name of corporation, firm or enterprise)
2704 Fair Park Blvd., Jonesboro, AR 72401
(address)
Kimberly Boling Bibb
(name under which investment held)

SECTION 4- BUSINESS OR HOLDINGS (continued)

- f) Check appropriate box: More than \$1,000 More than \$12,500
Bancorp South
(name of corporation, firm or enterprise)
1833 Linwood Drive, Paragould, AR 72450
(address)
Dr. John Bibb
(name under which investment held)
- g) Check appropriate box: More than \$1,000 More than \$12,500
TIAA-CREF
(name of corporation, firm or enterprise)
730 Third Ave., New York, NY 10017
(address)
Kimberly Boling Bibb
(name under which investment held)
- h) Check appropriate box: More than \$1,000 More than \$12,500
Centennial Bank
(name of corporation, firm or enterprise)
300 West Emerson, Paragould, AR 72450
(address)
Dr. John Bibb
(name under which investment held)
- i) Check appropriate box: More than \$1,000 More than \$12,500
Home Depot, Inc.
(name of corporation, firm or enterprise)
2455 Paces Ferry Rd., NW; Atlanta, GA 30339-4024
(address)
John G. Bibb
(name under which investment held)
- j) Check appropriate box: More than \$1,000 More than \$12,500
T. Rowe Price
(name of corporation, firm or enterprise)
P.O. Box 17300, Baltimore, MD 21297-1300
(address)
Dr. John Bibb
(name under which investment held)
- k) Check appropriate box: More than \$1,000 More than \$12,500
Dodge and Cox Funds
(name of corporation, firm or enterprise)
P.O. Box 219502, Kansas City, MO 64232-9503
(address)
Dr. John G. Bibb
(name under which investment held)
- l) Check appropriate box: More than \$1,000 More than \$12,500
Vanguard
(name of corporation, firm or enterprise)
P.O. Box 1110, Valley Forge, PA 19482-1110
(address)
Dr. John G. Bibb
(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) Bibb Chiropractic Center
(name of business, corporation, firm, or enterprise)
1400 West Court Street, Suite 1, Paragould, AR 72450
(address)
Member/Manager
(office or directorship held)
Dr. John G. Bibb
(name of office holder)

- b) BCH
(name of business, corporation, firm, or enterprise)
1400 West Court Street, Suite 1, Paragould, AR 72450
(address)
Member/Manager
(office or directorship held)
Dr. John G. Bibb
(name of office holder)

- c) Arkansas Makers Preparatory Studio, Inc.
(name of business, corporation, firm, or enterprise)
1400 West Court Street, Suite 1, Paragould, AR 72450
(address)
President/Board Member
(office or directorship held)
Dr. John G. Bibb
(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) N/A
(name of creditor)

(address of creditor)

- b)
(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) N/A
(name of governmental body) (address of governmental body)

(amount owed) (nature of obligation)

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

(amount owed) (nature of obligation)

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) State of Arkansas - Judiciary
(name of business)
Judicial Discipline & Disability Commission
(governmental body which regulates or controls)

b) _____
(name of business)
_____ (governmental body which regulates or controls)

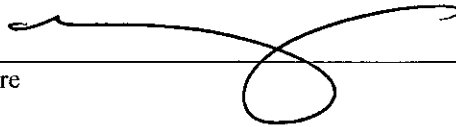
SECTION 13 - SALES TO GOVERNMENTAL BODY

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) N/A
(goods or services)
_____ (governmental body to whom sold)
_____ (compensation paid)

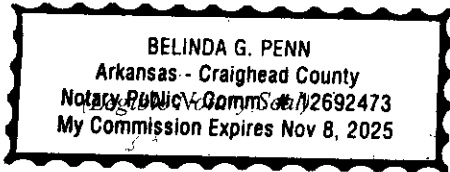
SECTION 14- SIGNATURE

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


Signature

STATE OF ARKANSAS
} ss
COUNTY OF CRAIGHEAD

Subscribed and sworn before me this 22nd day of January, 2025.



Belinda G. Penn
Notary Public

My commission expires: 11-8-25

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).