STATEMENT OF FINANCIAL INTEREST

For assistance in completing

Charlie Daniels, Secretary of State (Note: Filing covers the previous calendar year) Arkansasas Section 2: Pauli (Agency Head/Department Director/Division Director) City Attorney Coandidate City Attorney Coandidate for school Board member Charle Spouls appointee to State Board or Commission Charles of School Board or commission (name of School district/School) Candidate for school Superintendent (name of School district/School) Candidate for school Superintendent (name of School district/School) Appointee to one of the following municipal, county or regional boards or commissions (Water or Sewer board or commission) Chief or Sewer board or commission Clulity board or commission Chief or Sewer board or commission	State/District officials file with: Calendar year cover	ed 2010		this form contact:
State Capitol, Room 026 Either Rock, AN 72201 Phone (501) 682-5070 Is this an amendment?	Charlie Daniels, Secretary of State (Note: Filing covers	the previous calendar year	,	
Pione (50) 62-3070 Is this as amendment?	- BONG NOTE NOTE - BONG NOTE			
Is this an amendment?				
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. SECTION 1- NAME AND ADDRESS Name Purcell Gast Address I OR Gast (Griss) Condes F. Griss) Condes F. Griss) Address I OR Gast (Griss) Condes Condidate (Last) Clast) All names under which you and/or your spouse do business: SECTION 2- REASON FOR FILING Public Official Candidate (office sought) District Judge (name of municipality) State Government: Agency Head/Department Director/Division Director Chief of Staff or Chief Deputy (name of Constitutional Officer, Senate, or House of Representatives) Public appointee to State Board or Commission (name of school district) Candidate for school board (name of school district) Public or Charter School Superintendent (name of school district) Public or Charter School Superintendent (name of school district) Public or Charter School Superintendent (name of school district) Public or Charter School Superintendent (name of school district) Public or Charter School Superintendent (name of school district) Public or Charter School Superintendent (name of school district) Appointce to one of the following municipal, county or regional boards or commissions (list name of board or commission) Appointce to one of the following municipal, county or regional boards or commissions (list name of board or commission) Water or Sever board or commission	Is this an amendment? Yes No		Toll Free (800) 422	-7773
Address Candidate Candida	Please provide complete information. If the information request noting "Not Applicable" in that section. Do not leave any part information to this document.	ed in a particular section	n does not apply to y Iditional space is nec	ou, indicate such by eded, you may attach the
Address		James		Edward
Address (Street or P.O. Box Number) (City) (State) (Zip Code) Spouse's name Purce!! (Last) All names under which you and/or your spouse do business: SECTION 2- REASON FOR FILING Public Official (office held) Candidate (office sought) District Judge (name of municipality) State Government: Agency Head/Department Director/Division Director (name of city) State Government: Agency Head/Department Director/Division Director (name of Staff or Chief Deputy (name of Constitutional Officer, Senate, or House of Representatives) Public appointee to State Board or Commission (name of School district) Candidate for school board (name of school district) (name of school district) Executive Director of Education Service Cooperative (name of school district) Appointee to one of the following municipal, county or regional boards or commissions (list name of board or commission) Airport board or commission Water or Sewer board or commission	(Last)	(First)	0.0	
City Comment City Commission City City City Commission City	Address 1109 Sunset Gardens E.	bryant		
Spouse's name Clast Clast (First) (Middle)		(Cify)	(State)	(Zip Code)
All names under which you and/or your spouse do business: SECTION 2- REASON FOR FILING		0 .		7
All names under which you and/or your spouse do business: SECTION 2- REASON FOR FILING	Spouse's name Purcell	Sandra		<u> </u>
SECTION 2- REASON FOR FILING Public Official	(Last)			(Middle)
Public Official	All names under which you and/or your spouse do business:			
Public Official				
Candidate	SECTION 2- REASON FOR FILING			
Candidate			191 T T	477 479
Candidate	Public Official	ffice held)	P. I. L.	
District Judge		mice noidy		
City Attorney		fice sought)	JAN 2	8 2011
City Attorney	District Judge			
City Attorney	(name o	of municipality)		
State Government: Agency Head/Department Director/Division Director Higher Education (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) Appointee to one of the following municipal, county or regional boards or commissions (list name of board or commission): Airport board or commission Water or Sewer board or commission	City Attorney		Secretary	Orstate
Chief of Staff or Chief Deputy	(na	ame of city)	ober T.L.	1:
Chief of Staff or Chief Deputy	State Government: Agency Head/Department Director/	Division Director	(name of agency/o	CARDI)
Public appointee to State Board or Commission	Chief a State on Chief Domina		(mano or agone)	,
Public appointee to State Board or Commission	(name of Co	onstitutional Officer, Senat	e, or House of Repres	entatives)
School Board member				
Candidate for school board		(name of board/o	commission)	
Candidate for school board	School Board member			
Public or Charter School Superintendent	·		. Mind a large and the contraction	
Public or Charter School Superintendent	Candidate for school board	.CL. al district\	, <u>, , , , , , , , , , , , , , , , , , </u>	
(name of school district/school) Executive Director of Education Service Cooperative				
Executive Director of Education Service Cooperative	Public or Charter School Superintendent	chool district/school)		
Common of cooperative			ALL ALLEY TELL I	
☐ Planning board or commission Airport board or commission Water or Sewer board or commission		(name	of cooperative)	
☐ Water or Sewer board or commission				
	☐ Airport board or commission			
	☐ Water or Sewer board or commission			
☐ Civil Service commission				

The law provides for a maximum penalty of \$2,000 per violation and/or imprisonment for not more than one year for any person who knowingly or willfully fails to comply with the provisions of A.C.A.§ 21-8-401 through § 21-8-804. This report constitutes a public record. This form has been approved by the Arkansas Ethics 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.

Check appropriate box:	More than \$12,500
State of Arkansas (name of employer or source of LI4 E. Capital Ave.	f income)
(address)	
James E. Purcell (name under which income re	eceived)
Provide a brief description of the nature of the services for which the compen-	sation was received Director
Check appropriate box: More than \$1,000 Western Interstate Commission of (name of employer or source of 3035 Center Green Drive, Boulder	More than \$12,500 Higher Education of income) CO 80301
(address)	with the state of
Sim Purce U (name under which income re	eceived)
Check appropriate box:	More than \$12,500 EMPCOYER of income)
21 CORPORATE HILL DZ	2
LITTLE ROCK, AR 72205	(SANDRA)
(name under which income	
Provide a brief description of the nature of the services for which the comp	pensation was received
) Check appropriate box:	☐ 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 com-	pensation was received

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