

# LOBBYIST ACTIVITY REPORT

If registered to lobby only public servants of state government\* file with:  
John Thurston, Secretary of State  
State Capitol, Room 026  
Little Rock, AR 72201-1094  
Phone (501) 682-5070  
Fax (501) 682-3408

Filing for 2020  
(year)

Check here if this report is an amendment

For assistance in completing this form contact:  
Arkansas Ethics Commission  
Post Office Box 1917  
Little Rock, AR 72203  
Phone (501) 324-9600  
Toll Free (800) 422-7773

\*Lobbyists who lobby public servants of (i) municipal government, (ii) county government, (iii) a governmental body covering a district which includes all or part of more than one county, or (iv) more than one type of governmental body should review Ark. Code Ann. § 21-8-602 to determine where to make their filings.

## INDIVIDUAL LOBBYIST OR FIRM INFORMATION Print or Type

Name Capitol Advisors Group

Address 1301 West Capitol Avenue

City Little Rock State AR Zip 72201 Phone (501) 353-0250

### TYPE OF REPORT

- First Quarter (due April 15)
- Second Quarter (due July 15)
- Third Quarter (due October 15)
- Fourth Quarter (due January 15)
- Monthly Report for \_\_\_\_\_
- NO ACTIVITY** (Check if you are reporting no activity for **all** clients; file this page only)

Secretary of State File Stamp

Filed online with the Secretary of State on 04/02/2020 01:50 PM

### SIGNATURE

(If registered as a firm, each lobbyist listed on the firm registration must sign this report. Attach additional sheets if necessary)

Name MR. Bill Vickery Signature Signature on file

Name MR. Mitchell Lowe Signature Signature on file

Name MR. John Burris Signature Signature on file

Name MS. Nicole Gillum Signature Signature on file

**AFFIDAVIT**

I swear that I shall preserve and maintain for a period of four (4) years all documentation necessary to substantiate this report and that the information contained herein is true and correct to the best of my knowledge, information, and belief.

Signature on file  
Signature of Individual Lobbyist or Contact Person for Firm

State of Arkansas  
County of \_\_\_\_\_ )ss  
Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(Legible Notary Seal)  
Notary Signature \_\_\_\_\_  
My Commission Expires \_\_\_\_\_

**Note: If faxed, raised notary seal must be inked and the original must follow within ten (10) days.**

## EXPENDITURES PER EMPLOYER OR CLIENT

### Itemized and Non Itemized

Use additional copies of this page if necessary

Employer/Client: Capitol Advisors Group  
Address: 1301 West Capitol Avenue  
Little Rock, AR, 72201  
Phone: (501) 353-0250

Item	Amount
Advertising	
Entertainment	
Food, Lodging or Travel	\$789.44
Living Accommodations	
Postage	
Printing	
Special Events	
Telephone	
Other (list)	
<b>Total</b>	<b>\$789.44</b>

## GIFTS

List each gift with a value exceeding \$100

Use additional copies of this page if necessary

DATE	
COST/VALUE OF GIFT	
PUBLIC SERVANT BENEFITED	First MI Last Governmental Body of Public Servant
DESCRIPTION OF GIFT	
AMOUNT PAID	
NAME OF EMPLOYER/CLIENT	
NAMES OF OTHER LOBBYISTS SHARING COST	

## FOOD, LODGING OR TRAVEL

List expenditures exceeding \$40 per person per day for food (including beverages), lodging or travel

DATE OF EXPENDITURE	AMOUNT PAID TOWARD EXPENDITURE
PUBLIC SERVANT BENEFITED	First                      MI                      Last                                      Governmental Body Represented
DESCRIPTION OF ITEM	
NAME OF CONFERENCE, SEMINAR OR EVENT	
PURPOSE OF TRAVEL OR LODGING	
LODGING INFORMATION	Name of lodging establishment
	Address                      City                      State                      Zip
	Cost/Fair Market Value of Lodging (List Greater Value)
TRAVEL INFORMATION	Name of Entity Receiving Payment
	Cost/Fair Market Value of Travel (List Greater Value)
EMPLOYER/CLIENT	
NAMES OF OTHER LOBBYISTS SHARING COST	

## OTHER ITEMS

List any item with a value exceeding \$40

DATE ITEM GIVEN	
COST/VALUE OF ITEM	
PUBLIC SERVANT BENEFITED	First MI Last Governmental Body of Public Servant
AMOUNT PAID	
DESCRIPTION OF ITEM	
NAME OF EMPLOYER/CLIENT	
NAMES OF OTHER LOBBYISTS SHARING COST	

## SPECIAL EVENTS

**(Includes Hospitality Rooms)**

Use additional copies of this page if necessary

DATE(S) OF EVENT	1/13/2020
NAME OF EVENT	College Football National Championship Watch Party
LOCATION OF EVENT	1301 W. Capitol Avenue, Little Rock, AR 72201
GOVERNMENTAL BODY OR GROUP(S) OF PUBLIC SERVANTS INVITED	Members of the General Assembly
AMOUNT PAID TOWARD TOTAL EXPENDITURE	\$256.33
NAME OF EMPLOYER/CLIENT	Capitol Advisors Group
OTHER LOBBYISTS SHARING COST	Bill Vickery

## OTHER EXPENDITURES

Have you loaned or promised money or established a line of credit for or on behalf of a public servant over \$25 per individual? Yes No

If yes, complete the following information:

Date	Public Servant Benefited/Governmental Body Represented				Amount
	First	MI	Last	Governmental Body of Public Servant	

Do you have a direct business association or partnership with any public servant whom you may lobby?  
Yes No

If yes, state the name of each such public servant and describe the business association or partnership in detail.

Name of public servant: \_\_\_\_\_

Business relationship: \_\_\_\_\_