

CAMPAIGN CONTRIBUTION AND EXPENDITURE REPORT

State and District Candidates Only

To be filed with:
Mark Martin, Secretary of State
 State Capitol, Room 026
 Little Rock, AR 72201
 Phone (501) 682-5070
 Fax (501) 682-3408

Check if this report is an amendment

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

THIS FORM CANNOT BE USED FOR THE FINAL REPORT - ALL INFORMATION MUST BE COMPLETE
 THIS REPORT MUST BE FILED WITH THE SECRETARY OF STATE

1. Name of Candidate

GORDON WRBB

Address

P.O. Box 2447

City, State and Zip

HARRISON, AR 72602

Phone Number:

(870) 741-4343

Office Sought

FOURTEENTH JUDICIAL CIRCUIT JUDGE, DIV. 4

District Number:

Does the candidate have a campaign committee? () Yes (X) No
 If yes, complete the following:

Name of Chairperson/Treasurer:

FILED (Secretary of State File Stamp)

MAY 15 2014

Arkansas
Secretary of State

Mailing Address:

Phone Number:

NON-PARTISAN JUDICIAL ELECTION

2. Type of Election: (check one only)

Year of Election: _____

Primary Primary Runoff General General Runoff Special

3. Type of Report: (check one only)

This report covers what period? (/ /) through (/ /)

10 Day Preelection

First Quarter (due April 15)

Second Quarter (due July 15)

Third Quarter (due October 15)

Fourth Quarter (due January 15)

January Monthly

February Monthly

March Monthly

April Monthly

June Monthly

July Monthly

August Monthly

September Monthly

October Monthly

Special Elections Only:

May Monthly

November Monthly

December Monthly

SUMMARY

FOR REPORTING PERIOD

CUMULATIVE TOTAL

4. Balance of campaign funds at beginning of reporting period

0

5. Interest (if any) earned on campaign account

0

6. Total Loans (enter total from line 12)

0

7. Total Monetary Contributions (enter total from line 18)

0

8. Total Expenditures (enter total from line 27)

0

9. Balance of campaign funds at close of reporting period

0

10. (X) NO ACTIVITY (check if you have not received contributions, loans, or made expenditures during this reporting period)

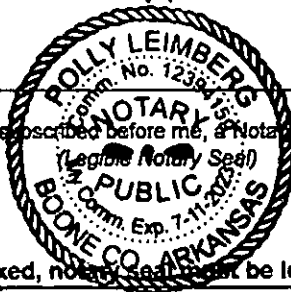
I certify to the best of my knowledge and belief that the information disclosed in this report is a complete, true, and accurate financial statement of my (the candidate's) campaign contributions and expenditures.

Gordon Webb
 Signature of Candidate or Candidate's Representative

Sworn to and subscribed before me, a Notary Public, in and for Boone County, Arkansas, on this 15 day of May, 2014

Polly Leimberg
 Notary Signature

My Commission Expires: 7-11-2013



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.

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. § 7-6-201 through § 7-6-227. This report constitutes a public record. This form has been approved by the Arkansas Ethics Commission.