

Ref No: CF202330347  
Date Filed: 6/9/2023

Candidate  
REPORT OF RECEIPTS AND DISBURSEMENTS  
2023 Election

**RECEIVED**  
Michael Watson  
Secretary of State  
By Secretary of State Elections Division at 4:47 pm, Jun 09, 2023

Name of Candidate Brandon Presley  
Address PO Box 208 City/State/Zip Nettleton, MS 38858  
Telephone (Work) \_\_\_\_\_ (Home) (202) 552-0221 (Fax) \_\_\_\_\_  
Contact Name Rachel Headley Email Address info@brandonpresley.com  
Office Sought \_\_\_\_\_ Political Party Democratic Party

Check here if above is different from previous report

TYPE OF REPORT

- May Periodic Report ..... Mandatory
- June Periodic Report (May 1, 2023 through May 31, 2023) ..... Mandatory
- July Periodic Report ..... Mandatory
- Primary Pre-Election Report ( \_\_\_\_\_ through \_\_\_\_\_ ) ..... Mandatory
- Primary Pre-Runoff Report ( \_\_\_\_\_ through \_\_\_\_\_ ) ..... Runoff Candidates Only
- October Periodic Report ..... Mandatory
- Pre-Election Report ( \_\_\_\_\_ through \_\_\_\_\_ ) ..... Mandatory
- Pre-Runoff Report ( \_\_\_\_\_ through \_\_\_\_\_ ) ..... Runoff Candidates Only
- January Periodic Report ..... Mandatory
- Termination Report (Candidate will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation and zero cash on hand balance) ..... **Required to terminate reporting obligations**

IMPORTANT

- (1) All candidates for office shall file periodic reports in the year in which they are to be elected.
- (2) Periodic Reports are mandatory, even if no expenditures were made during the period. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and/or expenditures during this period. Pre-Election Reports are mandatory if the candidate is opposed.
- (3) Until a candidate files a Termination Report, annual reports must be filed in accordance with Miss. Code Ann. § 23-15-807(b) (ii) and (iii)
- (4) Beginning on Jan. 1, 2018, candidates and officeholders may not "personally use" campaign contributions. Section 23-15-821, Miss. Code Ann., sets forth these "personal use" expenditures which are specifically prohibited from campaign contributions and those disbursements which are not defined as "personal use" and therefore permissible from campaign contributions. Campaign contributions accepted and held prior to Jan. 1, 2018 ARE NOT subject to the "personal use" restrictions of section 23-15-821, Miss. Code Ann. Beginning on Jan. 1, 2018, campaign contributions accepted and accumulated therefrom ARE subject to the "personal use" restrictions of Section 2-15-821, Miss. Code Ann. Separate record keeping and reporting is required for candidates and officeholders for any campaign contributions held prior to Jan. 1, 2018, disbursements made therefrom and contributions earned thereon in the form of interest or dividends.

(5) The receiving office must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline.

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**REPORTED CONTRIBUTIONS AND DISBURSEMENTS FROM CAMPAIGN CONTRIBUTIONS AC  
JANUARY 1, 2018**

JAN 1, 2023 CASH ON HAND BALANCE				
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-To-Date
TOTAL AMT OF CONTRIBUTIONS		+		
TOTAL AMT OF DISBURSEMENTS		+		
CASH ON HAND BALANCE				

**REPORTED CONTRIBUTIONS AND DISBURSEMENTS FROM CAMPAIGN CONTRIBUTIONS ACCUMULATED AFTER  
JANUARY 1, 2018**

JAN 1, 2023 CASH ON HAND BALANCE					\$727,532.54
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-To-Date	
TOTAL AMT OF CONTRIBUTIONS	\$293,455.75	+	\$61,813.55	\$355,269.30	\$1,760,057.29
TOTAL AMT OF DISBURSEMENTS	\$250,746.60	+	\$2,655.20	\$253,401.80	\$773,134.42
CASH ON HAND BALANCE					\$1,714,455.41

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate and complete.

*Brandon Presley*  
\_\_\_\_\_  
Signature of Candidate

06/09/2023  
\_\_\_\_\_  
Date

Authority: Refer to Miss. Code Ann. §23-15-801 et. seq.

Penalties: A candidate who fails to file, or fails to timely file, required reports in accordance with the statutory deadlines cannot be certified as elected to office unless and until he files all reports due as of the date of certification. No candidate who is elected to office shall receive any salary or other remuneration for the office unless and until he files all reports required by statute. Failure to submit required reports in accordance with applicable statutes may result in the imposition of civil penalties of \$50 per day for a maximum of ten (10) calendar days and/or prosecution. Miss. Code Ann. §§23-15-811 and 813 (1972)

Candidates for Statewide, State District, or Legislative Offices file this Report with the Secretary of State to 401 Mississippi Street, Jackson, MS; P.O. Box 136, Jackson, MS 39205; fax 601-576-2545; or email [CampaignFinance@sos.ms.gov](mailto:CampaignFinance@sos.ms.gov)

Candidates for county and/or county district office file this Report with their respective Circuit Clerk's Office.

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Richard Ballard <hr/> <b>Mailing Address</b> 142 Road 598 <hr/> <b>City, State, Zip Code</b> Plantersville, MS 38862-4901 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/21/2023	\$5.00
<b>Aggregate year-to-date</b>		\$215.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Meredith Rosenthal <hr/> <b>Mailing Address</b> 23 Regent Cir <hr/> <b>City, State, Zip Code</b> Brookline, MA 02445-3355 <hr/> <b>Name of Employer (Required)</b> Harvard University <hr/> <b>Occupation (Required)</b> Professor	05/04/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Johnny D. Jones <hr/> <b>Mailing Address</b> 611 S Pear Orchard Rd <hr/> <b>City, State, Zip Code</b> Ridgeland, MS 39157-4836 <hr/> <b>Name of Employer (Required)</b> The DELTA Project <hr/> <b>Occupation (Required)</b> CEO	05/24/2023	\$250.00
<b>Aggregate year-to-date</b>		\$803.50
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Dennis Truax <hr/> <b>Mailing Address</b> 913 Southgate Dr <hr/> <b>City, State, Zip Code</b> Starkville, MS 39759-9434 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Engineer	05/28/2023	\$25.00
<b>Aggregate year-to-date</b>		\$850.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Francis Springer <b>Mailing Address</b> 136 Wildwood Dr <b>City, State, Zip Code</b> Madison, MS 39110-7044 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Attorney	05/30/2023	\$500.00
<b>Aggregate year-to-date</b>		\$600.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Richard Ballard <b>Mailing Address</b> 142 Road 598 <b>City, State, Zip Code</b> Plantersville, MS 38862-4901 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/11/2023	\$10.00
<b>Aggregate year-to-date</b>		\$215.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Cynthia Yap <b>Mailing Address</b> 1955 Popps Ferry Rd <b>City, State, Zip Code</b> Biloxi, MS 39532-2029 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/12/2023	\$35.00
<b>Aggregate year-to-date</b>		\$285.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Heath Randall <b>Mailing Address</b> 2248 Summit Dr <b>City, State, Zip Code</b> Arnold, MO 63010-2254 <b>Name of Employer (Required)</b> Frontline Managed Services <b>Occupation (Required)</b> IT Professional	05/24/2023	\$25.00
<b>Aggregate year-to-date</b>		\$575.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Eugene Bramlett <hr/> <b>Mailing Address</b> 1123 College St <hr/> <b>City, State, Zip Code</b> Columbus, MS 39701-5810 <hr/> <b>Name of Employer (Required)</b> Covenant United Methodist Church <hr/> <b>Occupation (Required)</b> Minister	05/05/2023	\$250.00
<b>Aggregate year-to-date</b>		\$325.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Cynthia Yap <hr/> <b>Mailing Address</b> 1955 Popp's Ferry Rd <hr/> <b>City, State, Zip Code</b> Biloxi, MS 39532-2029 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/18/2023	\$50.00
<b>Aggregate year-to-date</b>		\$285.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Wilson Golden <hr/> <b>Mailing Address</b> 3136 White Magnolia Chase SW <hr/> <b>City, State, Zip Code</b> Gainesville, GA 30504-5587 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/28/2023	\$100.00
<b>Aggregate year-to-date</b>		\$685.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Marian Barksdale <hr/> <b>Mailing Address</b> 917 Old Taylor Rd <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4637 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/29/2023	\$100.00
<b>Aggregate year-to-date</b>		\$600.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Crymes M. Pittman <hr/> <b>Mailing Address</b> 2213 Heritage Hill Dr <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-5822 <hr/> <b>Name of Employer (Required)</b> Pittman, Roberts & Welsh, PLLC <hr/> <b>Occupation (Required)</b> Attorney	05/30/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Joyce Aboussie <hr/> <b>Mailing Address</b> 76 Overhills Dr <hr/> <b>City, State, Zip Code</b> Saint Louis, MO 63124-1532 <hr/> <b>Name of Employer (Required)</b> Aboussie Associates <hr/> <b>Occupation (Required)</b> CEO	05/11/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Vonda Reeves-Darby <hr/> <b>Mailing Address</b> 3866 Forest Hill Rd <hr/> <b>City, State, Zip Code</b> Jackson, MS 39212-5301 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Physician	05/31/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Paula Temperilli <hr/> <b>Mailing Address</b> 15231 Rainhollow Dr <hr/> <b>City, State, Zip Code</b> Houston, TX 77070-1328 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/25/2023	\$10.00
<b>Aggregate year-to-date</b>		\$510.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Lee Carroll <hr/> <b>Mailing Address</b> 4445 Sears Rd <hr/> <b>City, State, Zip Code</b> Pegram, TN 37143-5007 <hr/> <b>Name of Employer (Required)</b> Nashville Opera <hr/> <b>Occupation (Required)</b> Fundraiser	05/11/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Patrina R. Dace <hr/> <b>Mailing Address</b> 105 Sutter Dr <hr/> <b>City, State, Zip Code</b> Terry, MS 39170-5032 <hr/> <b>Name of Employer (Required)</b> Kaleidoscope of Learning <hr/> <b>Occupation (Required)</b> Business Owner	05/11/2023	\$50.00
<b>Aggregate year-to-date</b>		\$400.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Brad Morris <hr/> <b>Mailing Address</b> PO Box 2136 <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-7136 <hr/> <b>Name of Employer (Required)</b> Brad Morris Law Firm PLLC <hr/> <b>Occupation (Required)</b> Attorney	05/02/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Brenda Roberts <hr/> <b>Mailing Address</b> 709 Northdale Pl <hr/> <b>City, State, Zip Code</b> Brandon, MS 39047-5110 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/05/2023	\$100.00
<b>Aggregate year-to-date</b>		\$300.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Victor Fleitas <hr/> <b>Mailing Address</b> 148 Midway Dr <hr/> <b>City, State, Zip Code</b> Tupelo, MS 38804-2800 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/16/2023	\$100.00
<b>Aggregate year-to-date</b>		\$600.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Eric Shangle <hr/> <b>Mailing Address</b> 84 Malvern Walk <hr/> <b>City, State, Zip Code</b> Asheville, NC 28806-0183 <hr/> <b>Name of Employer (Required)</b> Pine Gate Renewables <hr/> <b>Occupation (Required)</b> Human Resources	05/20/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Partnership</u>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Ballard Spahr LLP <hr/> <b>Mailing Address</b> 1735 Market St <hr/> <b>City, State, Zip Code</b> Philadelphia, PA 19103-7507 <hr/> <b>Name of Employer (Required)</b> _____	05/30/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Bernell McGehee <hr/> <b>Mailing Address</b> PO Box 410 <hr/> <b>City, State, Zip Code</b> Liberty, MS 39645-0410 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Accountant	05/30/2023	\$100.00
<b>Aggregate year-to-date</b>		\$300.00



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Robert M. Pugh <hr/> <b>Mailing Address</b> 5924 Whitestone Rd <hr/> <b>City, State, Zip Code</b> Jackson, MS 39206-2515 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/11/2023	\$25.00
<b>Aggregate year-to-date</b>		\$350.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> William L. Chadwick <hr/> <b>Mailing Address</b> 449 Highway 334 <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-6339 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Dennis J. Erby <hr/> <b>Mailing Address</b> PO Box 2811 <hr/> <b>City, State, Zip Code</b> Columbus, MS 39704-2811 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/26/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,650.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Charles Parrott <hr/> <b>Mailing Address</b> 9 Abbey Nord Pl <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-3743 <hr/> <b>Name of Employer (Required)</b> Adams and Reese <hr/> <b>Occupation (Required)</b> Attorney	05/08/2023	\$250.00
<b>Aggregate year-to-date</b>		\$350.00

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<b>Full Name</b> Carolyn Goren	05/08/2023	\$25.00
<b>Mailing Address</b> PO Box 7189		
<b>City, State, Zip Code</b> Missoula, MT 59807-7189		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed		
<b>Aggregate year-to-date</b>		\$280.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Dunbar	05/02/2023	\$1,000.00
<b>Mailing Address</b> 621 N Lamar Blvd		
<b>City, State, Zip Code</b> Oxford, MS 38655-3207		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed		
<b>Aggregate year-to-date</b>		\$2,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> VJ3 Holdings LLC	05/23/2023	\$1,000.00
<b>Mailing Address</b> 4206 Dauphine St		
<b>City, State, Zip Code</b> New Orleans, LA 70117-5317		
<b>Name of Employer (Required)</b> _____		
<b>Occupation (Required)</b> _____		
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Elizabeth Smithson	05/23/2023	\$250.00
<b>Mailing Address</b> 155 Castle Cir		
<b>City, State, Zip Code</b> Madison, MS 39110-9403		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Retired		
<b>Aggregate year-to-date</b>		\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Jill Herring	05/31/2023	\$100.00
<b>Mailing Address</b> 6644 Barrett Rd		
<b>City, State, Zip Code</b> Falls Church, VA 22042-4228		
<b>Name of Employer (Required)</b> US Navy		
<b>Occupation (Required)</b> Sailor		
<b>Aggregate year-to-date</b>		\$787.30
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Johnny Newson	05/03/2023	\$500.00
<b>Mailing Address</b> 433 Andrews Ave		
<b>City, State, Zip Code</b> Clarksdale, MS 38614-6109		
<b>Name of Employer (Required)</b> Newson & Newson		
<b>Occupation (Required)</b> Attorney		
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> David Maddox	05/15/2023	\$250.00
<b>Mailing Address</b> 6285 Darren Dr		
<b>City, State, Zip Code</b> Olive Branch, MS 38654-7151		
<b>Name of Employer (Required)</b> Alliance Retail Group		
<b>Occupation (Required)</b> Senior Vice President		
<b>Aggregate year-to-date</b>		\$1,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Charles Buchanan	05/25/2023	\$30.00
<b>Mailing Address</b> 155 Bryant St		
<b>City, State, Zip Code</b> Palo Alto, CA 94301-1104		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed		
<b>Aggregate year-to-date</b>		\$331.50

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Suzanne Robinson <hr/> <b>Mailing Address</b> 206 Wood St <hr/> <b>City, State, Zip Code</b> Water Valley, MS 38965-2603 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/25/2023	\$15.00
		<b>Aggregate year-to-date</b> \$425.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Stephen Baylot <hr/> <b>Mailing Address</b> 9269 Highway 18 <hr/> <b>City, State, Zip Code</b> Raymond, MS 39154-8914 <hr/> <b>Name of Employer (Required)</b> Mardi Gras Motors <hr/> <b>Occupation (Required)</b> Business Owner	05/26/2023	\$500.00
		<b>Aggregate year-to-date</b> \$600.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kathy Olsen <hr/> <b>Mailing Address</b> 4416 Sunnybrook Dr <hr/> <b>City, State, Zip Code</b> Nashville, TN 37205-3860 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/17/2023	\$5,000.00
		<b>Aggregate year-to-date</b> \$40,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Marsha M. Pimperl <hr/> <b>Mailing Address</b> 28 Bernis Hill Rd <hr/> <b>City, State, Zip Code</b> Taylorsville, MS 39168-4449 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Writer	05/10/2023	\$1,000.00
		<b>Aggregate year-to-date</b> \$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Graham Slakie <hr/> <b>Mailing Address</b> 4706 Buckingham Dr <hr/> <b>City, State, Zip Code</b> Chattanooga, TN 37421-1108 <hr/> <b>Name of Employer (Required)</b> Regal Cinemas <hr/> <b>Occupation (Required)</b> Usher	05/01/2023	\$11.60
<b>Aggregate year-to-date</b>		\$200.60
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Graham Slakie <hr/> <b>Mailing Address</b> 4706 Buckingham Dr <hr/> <b>City, State, Zip Code</b> Chattanooga, TN 37421-1108 <hr/> <b>Name of Employer (Required)</b> Regal Cinemas <hr/> <b>Occupation (Required)</b> Usher	05/31/2023	\$30.00
<b>Aggregate year-to-date</b>		\$200.60
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Patrick J. O'Connor <hr/> <b>Mailing Address</b> 541 E Scenic Dr <hr/> <b>City, State, Zip Code</b> Pass Christian, MS 39571-4510 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Filmmaker	05/22/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$2,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Marcella Strong <hr/> <b>Mailing Address</b> 100 Fairlane Dr <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39402-2309 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/13/2023	\$200.00
<b>Aggregate year-to-date</b>		\$300.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Marc Doyle <hr/> <b>Mailing Address</b> 704 State St <hr/> <b>City, State, Zip Code</b> Natchez, MS 39120-3543 <hr/> <b>Name of Employer (Required)</b> Echo Pictures, Inc. <hr/> <b>Occupation (Required)</b> Documentary Film Maker	05/25/2023	\$25.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> John B. Spencer III <hr/> <b>Mailing Address</b> PO Box 26 <hr/> <b>City, State, Zip Code</b> Charleston, MS 38921-0026 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/26/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Juanita Boutin <hr/> <b>Mailing Address</b> PO Box 400 <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-0400 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/07/2023	\$50.00
<b>Aggregate year-to-date</b>		\$425.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Stephen Suitts <hr/> <b>Mailing Address</b> 737 Myrtle St NE <hr/> <b>City, State, Zip Code</b> Atlanta, GA 30308-1402 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/31/2023	\$500.00
<b>Aggregate year-to-date</b>		\$3,550.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Thomas Reardon <hr/> <b>Mailing Address</b> PO Box 68 <hr/> <b>City, State, Zip Code</b> Taylor, MS 38673-0068 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/02/2023	\$150.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Carolyn Goren <hr/> <b>Mailing Address</b> PO Box 7189 <hr/> <b>City, State, Zip Code</b> Missoula, MT 59807-7189 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/12/2023	\$25.00
<b>Aggregate year-to-date</b>		\$280.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Dempsey M. Levi <hr/> <b>Mailing Address</b> 401 E Beach Dr <hr/> <b>City, State, Zip Code</b> Ocean Springs, MS 39564-5132 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/22/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> David Williams <hr/> <b>Mailing Address</b> 122 Madison Pl <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39402-8339 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/22/2023	\$25.00
<b>Aggregate year-to-date</b>		\$525.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Richard Braida <hr/> <b>Mailing Address</b> 111 Brandywine Dr <hr/> <b>City, State, Zip Code</b> South Bethany, DE 19930-9737 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/06/2023	\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Claudia Hauberg <hr/> <b>Mailing Address</b> 234 Eastbrooke St <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-4716 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/26/2023	\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Robert O'Brien <hr/> <b>Mailing Address</b> 6007 SW 240th St <hr/> <b>City, State, Zip Code</b> Vashon, WA 98070-7247 <hr/> <b>Name of Employer (Required)</b> Health Net <hr/> <b>Occupation (Required)</b> COO	05/13/2023	\$100.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Hackett Cummins <hr/> <b>Mailing Address</b> 9 Nelson Ln <hr/> <b>City, State, Zip Code</b> Pass Christian, MS 39571-4716 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/23/2023	\$125.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
	<b>Aggregate year-to-date</b>	<b>\$250.00</b>



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Mary Ann O'Gorman <hr/> <b>Mailing Address</b> 1411 Calhoun Ave <hr/> <b>City, State, Zip Code</b> Ocean Springs, MS 39564-4919 <hr/> <b>Name of Employer (Required)</b> Studio 2Point46, LLC <hr/> <b>Occupation (Required)</b> Business Owner	05/07/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Leonard A. Blackwell II <hr/> <b>Mailing Address</b> 11857 Lorraine Rd <hr/> <b>City, State, Zip Code</b> Gulfport, MS 39503-3951 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$250.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Richard Ballard <hr/> <b>Mailing Address</b> 142 Road 598 <hr/> <b>City, State, Zip Code</b> Plantersville, MS 38862-4901 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/31/2023	\$5.00
<b>Aggregate year-to-date</b>		\$215.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Frank W. Trapp <hr/> <b>Mailing Address</b> 742 Turkey Oak Cv <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-1267 <hr/> <b>Name of Employer (Required)</b> Phelps Dunbar LLP <hr/> <b>Occupation (Required)</b> Attorney	05/31/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> George H. Williams <hr/> <b>Mailing Address</b> 100 Martins Ky <hr/> <b>City, State, Zip Code</b> Ridgeland, MS 39157-3419 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/22/2023	\$10.00
<b>Aggregate year-to-date</b>		\$460.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Stefan Massong <hr/> <b>Mailing Address</b> 307 Wisteria St <hr/> <b>City, State, Zip Code</b> Ocean Springs, MS 39564-2840 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Psychologist	05/14/2023	\$100.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Lance L. Stevens <hr/> <b>Mailing Address</b> 104 Keystone Pl <hr/> <b>City, State, Zip Code</b> Brandon, MS 39042-2332 <hr/> <b>Name of Employer (Required)</b> Stevens Law Group <hr/> <b>Occupation (Required)</b> Attorney	05/24/2023	\$250.00
<b>Aggregate year-to-date</b>		\$451.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Barbara Jakobson <hr/> <b>Mailing Address</b> 167 E 74th St <hr/> <b>City, State, Zip Code</b> New York, NY 10021-3226 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/05/2023	\$250.00
<b>Aggregate year-to-date</b>		\$500.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Dennis J. Erby <hr/> <b>Mailing Address</b> PO Box 2811 <hr/> <b>City, State, Zip Code</b> Columbus, MS 39704-2811 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/16/2023	\$50.00
<b>Aggregate year-to-date</b>		\$1,650.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> George Higginbotham <hr/> <b>Mailing Address</b> 27 Fox Hollow Ln <hr/> <b>City, State, Zip Code</b> Laurel, MS 39443-4946 <hr/> <b>Name of Employer (Required)</b> South Central Regional Medical Center <hr/> <b>Occupation (Required)</b> Hospital Administrator	05/07/2023	\$250.00
<b>Aggregate year-to-date</b>		\$1,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Gaudet <hr/> <b>Mailing Address</b> 99 Midtown Sq <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39402-7513 <hr/> <b>Name of Employer (Required)</b> William Carey University <hr/> <b>Occupation (Required)</b> Associate Professor	05/29/2023	\$100.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Lele W. Gillespie <hr/> <b>Mailing Address</b> 1013 S Lamar Blvd <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4739 <hr/> <b>Name of Employer (Required)</b> University of Mississippi <hr/> <b>Occupation (Required)</b> Project Coordinator	05/30/2023	\$250.00
<b>Aggregate year-to-date</b>		\$1,100.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Watkins Wild	05/11/2023	\$250.00
<b>Mailing Address</b> 188 Cedar Ridge Rd		
<b>City, State, Zip Code</b> Mccomb, MS 39648-2100		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Retired	<b>Aggregate year-to-date</b>	\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Sheila Skemp	05/02/2023	\$250.00
<b>Mailing Address</b> 209 Cullen Rd		
<b>City, State, Zip Code</b> Oxford, MS 38655-2203		
<b>Name of Employer (Required)</b> University of Mississippi		
<b>Occupation (Required)</b> Professor	<b>Aggregate year-to-date</b>	\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Helen Boone	05/25/2023	\$100.00
<b>Mailing Address</b> 3726 Crane Blvd		
<b>City, State, Zip Code</b> Jackson, MS 39216-3605		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$647.45
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Harold Fiore	05/09/2023	\$100.00
<b>Mailing Address</b> 118 W Jefferson Ave		
<b>City, State, Zip Code</b> Greenwood, MS 38930-3536		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$350.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Inez Kelleher <b>Mailing Address</b> 914 N Country Club Ln <b>City, State, Zip Code</b> Biloxi, MS 39532-3204 <b>Name of Employer (Required)</b> Memorial Hospital Gulfport <b>Occupation (Required)</b> Physician	05/19/2023	\$50.00
<b>Aggregate year-to-date</b>		\$1,150.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Cynthia Yap <b>Mailing Address</b> 1955 Popp's Ferry Rd <b>City, State, Zip Code</b> Biloxi, MS 39532-2029 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/10/2023	\$25.00
<b>Aggregate year-to-date</b>		\$285.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Melissa Scholes <b>Mailing Address</b> 2501 Lake Cir <b>City, State, Zip Code</b> Jackson, MS 39211-6625 <b>Name of Employer (Required)</b> University of Mississippi Medical Center <b>Occupation (Required)</b> Physician	05/30/2023	\$100.00
<b>Aggregate year-to-date</b>		\$350.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Judi Leake <b>Mailing Address</b> 5645 Traceside Dr <b>City, State, Zip Code</b> Nashville, TN 37221-4093 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/11/2023	\$200.00
<b>Aggregate year-to-date</b>		\$225.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Joanna Shows	05/31/2023	\$50.00
<b>Mailing Address</b> 1388 LAMPTON HILLTOP Rd		
<b>City, State, Zip Code</b> Columbia, MS 39429		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed		
	<b>Aggregate year-to-date</b>	\$325.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Desiree Hensley	05/02/2023	\$250.00
<b>Mailing Address</b> 210 Longest Rd		
<b>City, State, Zip Code</b> Oxford, MS 38655-2216		
<b>Name of Employer (Required)</b> University of Mississippi School of Law		
<b>Occupation (Required)</b> Law Professor		
	<b>Aggregate year-to-date</b>	\$275.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Cliff Johnson	05/02/2023	\$250.00
<b>Mailing Address</b> 1275 Highway 7 S		
<b>City, State, Zip Code</b> Water Valley, MS 38965-3758		
<b>Name of Employer (Required)</b> MacArthur Justice Center		
<b>Occupation (Required)</b> Attorney		
	<b>Aggregate year-to-date</b>	\$264.60
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Daniel Pair	05/12/2023	\$50.00
<b>Mailing Address</b> 968 Road 261		
<b>City, State, Zip Code</b> Tupelo, MS 38801-7600		
<b>Name of Employer (Required)</b> SSA		
<b>Occupation (Required)</b> Claims Specialist		
	<b>Aggregate year-to-date</b>	\$300.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Keith Mansel <hr/> <b>Mailing Address</b> 229 Eastbrooke St <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-4716 <hr/> <b>Name of Employer (Required)</b> University of Mississippi Medical Center	05/15/2023	\$1,000.00
<b>Occupation (Required)</b> Physician	<b>Aggregate year-to-date</b>	\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Brett White <hr/> <b>Mailing Address</b> 150 U St NE <hr/> <b>City, State, Zip Code</b> Washington, DC 20002-1372 <hr/> <b>Name of Employer (Required)</b> Pine Gate Renewables	05/20/2023	\$250.00
<b>Occupation (Required)</b> Attorney	<b>Aggregate year-to-date</b>	\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Ballard <hr/> <b>Mailing Address</b> 5488 Turningleaf Cv <hr/> <b>City, State, Zip Code</b> Tupelo, MS 38801-9516 <hr/> <b>Name of Employer (Required)</b> Cardinal Health	05/30/2023	\$100.00
<b>Occupation (Required)</b> Pharmacist	<b>Aggregate year-to-date</b>	\$350.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kevin W. Frye PLLC <hr/> <b>Mailing Address</b> PO Box 2456 <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-6200 <hr/> <b>Name of Employer (Required)</b>	05/02/2023	\$350.00
<b>Occupation (Required)</b>	<b>Aggregate year-to-date</b>	\$350.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Roger Mcdowell <b>Mailing Address</b> 1904 Fuller St <b>City, State, Zip Code</b> Hattiesburg, MS 39401-7544 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/14/2023	\$164.25
<b>Aggregate year-to-date</b>		\$1,339.25
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Marc Doyle <b>Mailing Address</b> 704 State St <b>City, State, Zip Code</b> Natchez, MS 39120-3543 <b>Name of Employer (Required)</b> Echo Pictures, Inc. <b>Occupation (Required)</b> Documentary Film Maker	05/31/2023	\$25.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Elizabeth Farish Percy <b>Mailing Address</b> 1006 Woodland Ln <b>City, State, Zip Code</b> Oxford, MS 38655-5305 <b>Name of Employer (Required)</b> University of Mississippi <b>Occupation (Required)</b> Professor	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Donald Sittman <b>Mailing Address</b> 1822 Devine St <b>City, State, Zip Code</b> Jackson, MS 39202-1317 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/23/2023	\$50.00
<b>Aggregate year-to-date</b>		\$1,250.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Elizabeth Cowan <hr/> <b>Mailing Address</b> 931 Governor Nicholls St <hr/> <b>City, State, Zip Code</b> New Orleans, LA 70116-2454 <hr/> <b>Name of Employer (Required)</b> None <hr/> <b>Occupation (Required)</b> University Student	05/23/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Pamela A. Johnson <hr/> <b>Mailing Address</b> 114 Bent Creek Dr <hr/> <b>City, State, Zip Code</b> Brandon, MS 39047-6636 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/01/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Clark <hr/> <b>Mailing Address</b> 167 Rolling Meadows Rd <hr/> <b>City, State, Zip Code</b> Ridgeland, MS 39157-9488 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/21/2023	\$100.00
<b>Aggregate year-to-date</b>		\$400.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Adrian L. Wood III <hr/> <b>Mailing Address</b> 2905 Pinecrest Cir <hr/> <b>City, State, Zip Code</b> Corinth, MS 38834-3864 <hr/> <b>Name of Employer (Required)</b> J&A Inc. <hr/> <b>Occupation (Required)</b> Director	05/31/2023	\$100.00
<b>Aggregate year-to-date</b>		\$500.00

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## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Martzell, Bickford, & Centola APC <hr/> <b>Mailing Address</b> 338 Lafayette St <hr/> <b>City, State, Zip Code</b> New Orleans, LA 70130-3244 <hr/> <b>Name of Employer (Required)</b>  <hr/> <b>Occupation (Required)</b>  	05/23/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Annette Sowell <hr/> <b>Mailing Address</b> 574 Nellwood Dr <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39402-9277 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/05/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Cathy Boone <hr/> <b>Mailing Address</b> 3710 Crane Blvd <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-3605 <hr/> <b>Name of Employer (Required)</b> ROI Communication <hr/> <b>Occupation (Required)</b> Consultant	05/25/2023	\$250.00
<b>Aggregate year-to-date</b>		\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> George D. Penick Jr <hr/> <b>Mailing Address</b> 4 Pecan Tree Pl <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-6468 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/26/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00

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 Secretary of State

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Maggie Sasser <b>Mailing Address</b> 603 Edmund St <b>City, State, Zip Code</b> Raleigh, NC 27604-2341 <b>Name of Employer (Required)</b> Pine Gate Renewables <b>Occupation (Required)</b> Vice President	05/17/2023	\$250.00
<b>Aggregate year-to-date</b>		\$3,903.74
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Frank Alley <b>Mailing Address</b> 735 Gillespie St <b>City, State, Zip Code</b> Jackson, MS 39202-1712 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/09/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Joyce Leech <b>Mailing Address</b> 214 Main St S <b>City, State, Zip Code</b> Amory, MS 38821-4218 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/31/2023	\$100.00
<b>Aggregate year-to-date</b>		\$350.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Roy Decker <b>Mailing Address</b> 4044 Oakridge Dr <b>City, State, Zip Code</b> Jackson, MS 39216-3413 <b>Name of Employer (Required)</b> Duvall Decker <b>Occupation (Required)</b> Architect	05/22/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Barbara Jakobson	05/05/2023	\$250.00
<b>Mailing Address</b> 167 E 74th St		
<b>City, State, Zip Code</b> New York, NY 10021-3226		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Retired		
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Thorne Butler	05/15/2023	\$10.00
<b>Mailing Address</b> 3942 Oakridge Dr		
<b>City, State, Zip Code</b> Jackson, MS 39216-3411		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed		
<b>Aggregate year-to-date</b>		\$360.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Donald Sittman	05/26/2023	\$1,000.00
<b>Mailing Address</b> 1822 Devine St		
<b>City, State, Zip Code</b> Jackson, MS 39202-1317		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed		
<b>Aggregate year-to-date</b>		\$1,250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Mary-Anna Holden	05/17/2023	\$1,000.00
<b>Mailing Address</b> 25 Grove St		
<b>City, State, Zip Code</b> Madison, NJ 07940-2143		
<b>Name of Employer (Required)</b> NJ Board of Public Utilities		
<b>Occupation (Required)</b> Commissioner		
<b>Aggregate year-to-date</b>		\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> James E Vance <hr/> <b>Mailing Address</b> 1216 Lakeshire Dr <hr/> <b>City, State, Zip Code</b> Tupelo, MS 38804-1000 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Tax Accountant	05/08/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> William L. Thames <hr/> <b>Mailing Address</b> 316 W 7th St <hr/> <b>City, State, Zip Code</b> Laurel, MS 39440-3407 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/10/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Karen Hinton <hr/> <b>Mailing Address</b> 817 Chartres St <hr/> <b>City, State, Zip Code</b> New Orleans, LA 70116-3206 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Writer	05/31/2023	\$250.00
<b>Aggregate year-to-date</b>		\$1,950.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Tom R. Schnridau <hr/> <b>Mailing Address</b> 14000 W El Bonito Dr <hr/> <b>City, State, Zip Code</b> Ocean Springs, MS 39564-2573 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/22/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Fred Kency <hr/> <b>Mailing Address</b> 503 Pinebrook Cv <hr/> <b>City, State, Zip Code</b> Brandon, MS 39047-7827 <hr/> <b>Name of Employer (Required)</b> Baptist Medical <hr/> <b>Occupation (Required)</b> Physician	05/07/2023	\$10.00
<b>Aggregate year-to-date</b>		\$210.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> William Sussman <hr/> <b>Mailing Address</b> 240 W 75th St <hr/> <b>City, State, Zip Code</b> New York, NY 10023-1723 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/18/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Carolyn Goren <hr/> <b>Mailing Address</b> PO Box 7189 <hr/> <b>City, State, Zip Code</b> Missoula, MT 59807-7189 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/12/2023	\$25.00
<b>Aggregate year-to-date</b>		\$280.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Cathy Isaacson <hr/> <b>Mailing Address</b> 2400 Saint Charles Ave <hr/> <b>City, State, Zip Code</b> New Orleans, LA 70130-6080 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/22/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Heath Randall	05/13/2023	\$250.00
<b>Mailing Address</b> 2248 Summit Dr		
<b>City, State, Zip Code</b> Arnold, MO 63010-2254		
<b>Name of Employer (Required)</b> Frontline Managed Services		
<b>Occupation (Required)</b> IT Professional	<b>Aggregate year-to-date</b>	\$575.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Barbara Rankin	05/15/2023	\$50.00
<b>Mailing Address</b> PO Box 219		
<b>City, State, Zip Code</b> Braxton, MS 39044-0219		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$475.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Robert L. Gibbs	05/26/2023	\$500.00
<b>Mailing Address</b> 1223 Hallmark Dr		
<b>City, State, Zip Code</b> Jackson, MS 39206-2142		
<b>Name of Employer (Required)</b> Self Employed		
<b>Occupation (Required)</b> Attorney	<b>Aggregate year-to-date</b>	\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Marie Mckellar	05/03/2023	\$2,000.00
<b>Mailing Address</b> 425 Davis St		
<b>City, State, Zip Code</b> Evanston, IL 60201-4830		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$8,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Richard Courtney <hr/> <b>Mailing Address</b> 136 Ingleside Rd <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-9729 <hr/> <b>Name of Employer (Required)</b> Self Employed	05/18/2023	\$100.00
<b>Occupation (Required)</b> Attorney	<b>Aggregate year-to-date</b>	\$350.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> George Jordan <hr/> <b>Mailing Address</b> 1087 Augusta Dr <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-6187 <hr/> <b>Name of Employer (Required)</b> Oxford Answerphone Inc	05/30/2023	\$500.00
<b>Occupation (Required)</b> Business Owner	<b>Aggregate year-to-date</b>	\$4,501.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Bruce Davis <hr/> <b>Mailing Address</b> 777 Shady Oaks Cir <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-5450 <hr/> <b>Name of Employer (Required)</b> Not Employed	05/30/2023	\$250.00
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Melissa Scholes <hr/> <b>Mailing Address</b> 2501 Lake Cir <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-6625 <hr/> <b>Name of Employer (Required)</b> University of Mississippi Medical Center	05/24/2023	\$250.00
<b>Occupation (Required)</b> Physician	<b>Aggregate year-to-date</b>	\$350.00



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Joseph Sheppard <hr/> <b>Mailing Address</b> PO Box 327 <hr/> <b>City, State, Zip Code</b> Cuero, TX 77954-0327 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/07/2023	\$250.00
<b>Aggregate year-to-date</b>		\$1,100.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Robert O'Brien <hr/> <b>Mailing Address</b> 6007 SW 240th St <hr/> <b>City, State, Zip Code</b> Vashon, WA 98070-7247 <hr/> <b>Name of Employer (Required)</b> Health Net <hr/> <b>Occupation (Required)</b> COO	05/08/2023	\$100.00
<b>Aggregate year-to-date</b>		\$300.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kathy Olsen <hr/> <b>Mailing Address</b> 4416 Sunnybrook Dr <hr/> <b>City, State, Zip Code</b> Nashville, TN 37205-3860 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/09/2023	\$10,000.00
<b>Aggregate year-to-date</b>		\$40,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Lele W. Gillespie <hr/> <b>Mailing Address</b> 1013 S Lamar Blvd <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4739 <hr/> <b>Name of Employer (Required)</b> University of Mississippi <hr/> <b>Occupation (Required)</b> Project Coordinator	05/30/2023	\$250.00
<b>Aggregate year-to-date</b>		\$1,100.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Jay Sones <b>Mailing Address</b> 1225 3rd St <b>City, State, Zip Code</b> New Orleans, LA 70130-5741 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/11/2023	\$5,000.00
<b>Aggregate year-to-date</b>		\$5,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Joseph B. Atkins <b>Mailing Address</b> 11 County Road 3064 <b>City, State, Zip Code</b> Oxford, MS 38655-8354 <b>Name of Employer (Required)</b> University of Mississippi <b>Occupation (Required)</b> Professor	05/02/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Karen Hinton <b>Mailing Address</b> 817 Chartres St <b>City, State, Zip Code</b> New Orleans, LA 70116-3206 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Writer	05/14/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,950.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Richard Ballard <b>Mailing Address</b> 142 Road 598 <b>City, State, Zip Code</b> Plantersville, MS 38862-4901 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/07/2023	\$5.00
<b>Aggregate year-to-date</b>		\$215.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Ray Mabus <b>Mailing Address</b> 74 Woodcutters Ln <b>City, State, Zip Code</b> Harpers Ferry, WV 25425-7121 <b>Name of Employer (Required)</b> Mabus Group <b>Occupation (Required)</b> CEO	05/08/2023	\$250.00
<b>Aggregate year-to-date</b>		\$1,250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Stephen Farrow <b>Mailing Address</b> 177 Kenmore Ave <b>City, State, Zip Code</b> Biloxi, MS 39531-4704 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/30/2023	\$100.00
<b>Aggregate year-to-date</b>		\$400.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Keith Johnson <b>Mailing Address</b> PO Box 421 <b>City, State, Zip Code</b> Nesbit, MS 38651-0421 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/31/2023	\$50.00
<b>Aggregate year-to-date</b>		\$450.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Wayne Drinkwater <b>Mailing Address</b> 106 Waterstone Dr <b>City, State, Zip Code</b> Oxford, MS 38655-0009 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/02/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Graham Slakie <hr/> <b>Mailing Address</b> 4706 Buckingham Dr <hr/> <b>City, State, Zip Code</b> Chattanooga, TN 37421-1108 <hr/> <b>Name of Employer (Required)</b> Regal Cinemas <hr/> <b>Occupation (Required)</b> Usher	05/16/2023	\$10.00
<b>Aggregate year-to-date</b>		\$200.60
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Redmond Gill <hr/> <b>Mailing Address</b> 721 Constantinople St <hr/> <b>City, State, Zip Code</b> New Orleans, LA 70115-1415 <hr/> <b>Name of Employer (Required)</b> Pine Gate Renewables <hr/> <b>Occupation (Required)</b> Senior Director	05/21/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kathy L. Neff <hr/> <b>Mailing Address</b> 122 Lakeway Dr <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-9666 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Bookseller	05/02/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Green Hills Farm <hr/> <b>Mailing Address</b> 1721 Highway 4 W <hr/> <b>City, State, Zip Code</b> Ripley, MS 38663-9678 <hr/> <b>Name of Employer (Required)</b> _____ <hr/> <b>Occupation (Required)</b> _____	05/03/2023	\$550.00
<b>Aggregate year-to-date</b>		\$550.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Ryan Scafidel <b>Mailing Address</b> 750 City Park Ave <b>City, State, Zip Code</b> New Orleans, LA 70119-3646 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Attorney	05/23/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Blue Ridge Power <b>Mailing Address</b> 105 Fairview Rd <b>City, State, Zip Code</b> Asheville, NC 28803-3077 <b>Name of Employer (Required)</b>  <b>Occupation (Required)</b>  	05/04/2023	\$5,000.00
<b>Aggregate year-to-date</b>		\$5,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Rheta Johnson <b>Mailing Address</b> 117 County Road 259 <b>City, State, Zip Code</b> Iuka, MS 38852-8542 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/16/2023	\$500.00
<b>Aggregate year-to-date</b>		\$650.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Nan Tarlton <b>Mailing Address</b> 210 Meadowlane Dr <b>City, State, Zip Code</b> Madison, MS 39110-9611 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/27/2023	\$50.00
<b>Aggregate year-to-date</b>		\$375.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Ronald W. Lewis	05/02/2023	\$250.00
<b>Mailing Address</b> PO Box 2729		
<b>City, State, Zip Code</b> Oxford, MS 38655-4200		
<b>Name of Employer (Required)</b> Lewis Law Firm		
<b>Occupation (Required)</b> Attorney	<b>Aggregate year-to-date</b>	\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Roger Mcdowell	05/04/2023	\$200.00
<b>Mailing Address</b> 1904 Fuller St		
<b>City, State, Zip Code</b> Hattiesburg, MS 39401-7544		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Retired	<b>Aggregate year-to-date</b>	\$1,339.25
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Michael Oneal	05/15/2023	\$100.00
<b>Mailing Address</b> 1011 Adeline St		
<b>City, State, Zip Code</b> Hattiesburg, MS 39401-5022		
<b>Name of Employer (Required)</b> Hattiesburg Clinic		
<b>Occupation (Required)</b> Physician	<b>Aggregate year-to-date</b>	\$1,200.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Judith Wiener	05/25/2023	\$500.00
<b>Mailing Address</b> 1621 Devine St		
<b>City, State, Zip Code</b> Jackson, MS 39202-1314		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Retired	<b>Aggregate year-to-date</b>	\$600.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Kelly A. Butler	05/26/2023	\$250.00
<b>Mailing Address</b> 3942 Oakridge Dr		
<b>City, State, Zip Code</b> Jackson, MS 39216-3411		
<b>Name of Employer (Required)</b> Barksdale Reading Institute		
<b>Occupation (Required)</b> Educator	<b>Aggregate year-to-date</b>	\$505.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Blandford	05/09/2023	\$2,500.00
<b>Mailing Address</b> 46 Mayfair Dr		
<b>City, State, Zip Code</b> Rancho Mirage, CA 92270-2562		
<b>Name of Employer (Required)</b> Blandford Group		
<b>Occupation (Required)</b> Public Affairs Consultant	<b>Aggregate year-to-date</b>	\$2,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kenneth Nash	05/22/2023	\$500.00
<b>Mailing Address</b> 1201 Mission Park Dr		
<b>City, State, Zip Code</b> Vicksburg, MS 39180-3747		
<b>Name of Employer (Required)</b> Nash Family Dentistry		
<b>Occupation (Required)</b> Dentist	<b>Aggregate year-to-date</b>	\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Marie Mckellar	05/17/2023	\$1,000.00
<b>Mailing Address</b> 425 Davis St		
<b>City, State, Zip Code</b> Evanston, IL 60201-4830		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$8,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Connie M Moran <hr/> <b>Mailing Address</b> 206 Washington Ave <hr/> <b>City, State, Zip Code</b> Ocean Springs, MS 39564-4626 <hr/> <b>Name of Employer (Required)</b> Moran Consultants <hr/> <b>Occupation (Required)</b> Property Development	05/22/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Elizabeth B. Allin <hr/> <b>Mailing Address</b> 782 Belhaven St <hr/> <b>City, State, Zip Code</b> Jackson, MS 39202-1705 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/26/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Mary F. Taylor <hr/> <b>Mailing Address</b> 2239 Greenbriar Dr <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-6735 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Educational Consultant	05/18/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kathryn J. Irby <hr/> <b>Mailing Address</b> 730 Tegarden Rd <hr/> <b>City, State, Zip Code</b> Gulfport, MS 39507-2625 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/11/2023	\$25.00
<b>Aggregate year-to-date</b>		\$343.25



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Betty Sparkman <hr/> <b>Mailing Address</b> 145 Least Tern Dr <hr/> <b>City, State, Zip Code</b> Pass Christian, MS 39571-4844 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/31/2023	\$100.00
<b>Aggregate year-to-date</b>		\$350.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Barbara Phillips <hr/> <b>Mailing Address</b> 111 Philip Rd <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-2013 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Donald L. Kilgore <hr/> <b>Mailing Address</b> 435 Center Ave N <hr/> <b>City, State, Zip Code</b> Philadelphia, MS 39350-2918 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/26/2023	\$100.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Martha Harper <hr/> <b>Mailing Address</b> 351 Oakridge Cir <hr/> <b>City, State, Zip Code</b> Biloxi, MS 39531-2719 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/19/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Cornelis Gispen <b>Mailing Address</b> 1112 S 11th St <b>City, State, Zip Code</b> Oxford, MS 38655-4610 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/11/2023	\$100.00
<b>Aggregate year-to-date</b>		\$1,050.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Miller Scott <b>Mailing Address</b> 111 E Pointe Dr <b>City, State, Zip Code</b> Starkville, MS 39759-3696 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/25/2023	\$100.00
<b>Aggregate year-to-date</b>		\$255.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> David Baria <b>Mailing Address</b> 544 Main St <b>City, State, Zip Code</b> Bay Saint Louis, MS 39520-2730 <b>Name of Employer (Required)</b> Cosmich Simmons & Brown PLLC <b>Occupation (Required)</b> Attorney	05/07/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$3,500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Virginia S. Bauer <b>Mailing Address</b> 210 Conover Ln <b>City, State, Zip Code</b> Red Bank, NJ 07701-6272 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/10/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$2,500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Michael Oneal <hr/> <b>Mailing Address</b> 1011 Adeline St <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39401-5022 <hr/> <b>Name of Employer (Required)</b> Hattiesburg Clinic <hr/> <b>Occupation (Required)</b> Physician	05/30/2023	\$250.00
<b>Aggregate year-to-date</b>		\$1,200.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Alma Walls <hr/> <b>Mailing Address</b> 3887 Kenton Dr <hr/> <b>City, State, Zip Code</b> Southaven, MS 38672-7225 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/30/2023	\$25.00
<b>Aggregate year-to-date</b>		\$575.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> David G. Hill <hr/> <b>Mailing Address</b> PO Box 429 <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-0429 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/02/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Fred Banks <hr/> <b>Mailing Address</b> 25 Saint Andrews Dr <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-2438 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/30/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> E. K. Pruitt <b>Mailing Address</b> 4217 Oakridge Dr <b>City, State, Zip Code</b> Jackson, MS 39216-3420 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/31/2023	\$50.00
<b>Aggregate year-to-date</b>		\$375.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> David O. Bell <b>Mailing Address</b> 906 University Ave <b>City, State, Zip Code</b> Oxford, MS 38655-3937 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Attorney	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Mark C. Wallfisch <b>Mailing Address</b> 211 Fairway Dr <b>City, State, Zip Code</b> Pass Christian, MS 39571-2126 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/04/2023	\$100.00
<b>Aggregate year-to-date</b>		\$300.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> L. Michelle Moore <b>Mailing Address</b> 13711 Winterberry Rdg <b>City, State, Zip Code</b> Midlothian, VA 23112-4951 <b>Name of Employer (Required)</b> Groundswell <b>Occupation (Required)</b> Nonprofit Executive	05/25/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Cherie Labat <b>Mailing Address</b> 8218 Ridgewood Dr <b>City, State, Zip Code</b> Kiln, MS 39556-8474 <b>Name of Employer (Required)</b> University of Southern Mississippi <b>Occupation (Required)</b> Educator	05/07/2023	\$6.00
<b>Aggregate year-to-date</b>		\$1,156.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Marilyn Vandemark <b>Mailing Address</b> 412 Highpoint Dr <b>City, State, Zip Code</b> Diamondhead, MS 39525-3719 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/27/2023	\$100.00
<b>Aggregate year-to-date</b>		\$300.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Eleanor Gill <b>Mailing Address</b> 2605 School St <b>City, State, Zip Code</b> Hernando, MS 38632-2217 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Dentist	05/08/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Francis Turner <b>Mailing Address</b> 166 Steep Holw <b>City, State, Zip Code</b> Hattiesburg, MS 39402-7004 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Attorney	05/29/2023	\$100.00
<b>Aggregate year-to-date</b>		\$300.00

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 Michael Watson  
 Secretary of State

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Reilly Morse <hr/> <b>Mailing Address</b> 929 Bridge St <hr/> <b>City, State, Zip Code</b> Gulfport, MS 39507-3432 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/31/2023	\$50.00
<b>Aggregate year-to-date</b>		\$400.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> James Lynch <hr/> <b>Mailing Address</b> 617 Camelia Trl <hr/> <b>City, State, Zip Code</b> Brandon, MS 39047-6316 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/24/2023	\$50.00
<b>Aggregate year-to-date</b>		\$275.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Janice Jackson <hr/> <b>Mailing Address</b> 113 Greens View Dr <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-8050 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/15/2023	\$34.00
<b>Aggregate year-to-date</b>		\$609.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> James Raymond <hr/> <b>Mailing Address</b> 3915 Saint Charles Ave <hr/> <b>City, State, Zip Code</b> New Orleans, LA 70115-4659 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$100.00
<b>Aggregate year-to-date</b>		\$775.00

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 Michael Watson  
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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Kathryn J. Irby <hr/> <b>Mailing Address</b> 730 Tegarden Rd <hr/> <b>City, State, Zip Code</b> Gulfport, MS 39507-2625 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$6.00
<b>Aggregate year-to-date</b>		\$343.25
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Virinder Singh <hr/> <b>Mailing Address</b> 1507 Elsdon Cir <hr/> <b>City, State, Zip Code</b> Carmichael, CA 95608-6014 <hr/> <b>Name of Employer (Required)</b> EDF Renewables <hr/> <b>Occupation (Required)</b> Vice President	05/22/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Joyce Leech <hr/> <b>Mailing Address</b> 214 Main St S <hr/> <b>City, State, Zip Code</b> Amory, MS 38821-4218 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/13/2023	\$50.00
<b>Aggregate year-to-date</b>		\$350.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Judi Leake <hr/> <b>Mailing Address</b> 5645 Traceside Dr <hr/> <b>City, State, Zip Code</b> Nashville, TN 37221-4093 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/25/2023	\$25.00
<b>Aggregate year-to-date</b>		\$225.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Douglas Masterson <hr/> <b>Mailing Address</b> 43 Palm Tree Loop <hr/> <b>City, State, Zip Code</b> Petal, MS 39465-9251 <hr/> <b>Name of Employer (Required)</b> University of Southern Mississippi <hr/> <b>Occupation (Required)</b> Chemist	05/16/2023	\$50.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Camp Brothers Real Estate LLC <hr/> <b>Mailing Address</b> 104 1/2 Maxwell St <hr/> <b>City, State, Zip Code</b> Starkville, MS 39759-3422 <hr/> <b>Name of Employer (Required)</b>  <hr/> <b>Occupation (Required)</b>  	05/08/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$3,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kathryn J. Irby <hr/> <b>Mailing Address</b> 730 Tegarden Rd <hr/> <b>City, State, Zip Code</b> Gulfport, MS 39507-2625 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/03/2023	\$5.00
<b>Aggregate year-to-date</b>		\$343.25
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Rebecca Conwell <hr/> <b>Mailing Address</b> 4846 Coliseum St <hr/> <b>City, State, Zip Code</b> New Orleans, LA 70115-3945 <hr/> <b>Name of Employer (Required)</b> UNO Research and Technology Foundation <hr/> <b>Occupation (Required)</b> President	05/23/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Duncan Gray III <hr/> <b>Mailing Address</b> 110 Philip Rd <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-2014 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/17/2023	\$50.00
<b>Aggregate year-to-date</b>		\$300.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Rebecca Avery <hr/> <b>Mailing Address</b> 143 Breckenridge Dr <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-7501 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Social Worker	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> James Goff II <hr/> <b>Mailing Address</b> 109 Lighthouse Pt <hr/> <b>City, State, Zip Code</b> Slidell, LA 70458-5767 <hr/> <b>Name of Employer (Required)</b> JGILS, LLC <hr/> <b>Occupation (Required)</b> Business Owner	05/04/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Will Manuel <hr/> <b>Mailing Address</b> 827 Beaumont Dr <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-7494 <hr/> <b>Name of Employer (Required)</b> Bradley Arant <hr/> <b>Occupation (Required)</b> Attorney	05/25/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Timothy C. Medley <hr/> <b>Mailing Address</b> 238 Eastbrooke St <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-4716 <hr/> <b>Name of Employer (Required)</b> Medley & Brown <hr/> <b>Occupation (Required)</b> Partner	05/26/2023	\$250.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kelly A. Butler <hr/> <b>Mailing Address</b> 3942 Oakridge Dr <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-3411 <hr/> <b>Name of Employer (Required)</b> Barksdale Reading Institute <hr/> <b>Occupation (Required)</b> Educator	05/09/2023	\$250.00
<b>Aggregate year-to-date</b>		\$505.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> David R. Mann <hr/> <b>Mailing Address</b> 316 Sonoma Cv <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-9549 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/31/2023	\$100.00
<b>Aggregate year-to-date</b>		\$450.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Mary Macwade <hr/> <b>Mailing Address</b> 4234 Brussels Dr <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-6105 <hr/> <b>Name of Employer (Required)</b> St. Philip's Episcopal Church <hr/> <b>Occupation (Required)</b> Episcopal Priest	05/23/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$2,500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Jamie Priest <hr/> <b>Mailing Address</b> 1316 Poplar Blvd <hr/> <b>City, State, Zip Code</b> Jackson, MS 39202-2111 <hr/> <b>Name of Employer (Required)</b> Gill Ladner & Priest PLLC <hr/> <b>Occupation (Required)</b> Attorney	05/08/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> James N. Butts <hr/> <b>Mailing Address</b> 703 N 7th Ave <hr/> <b>City, State, Zip Code</b> Laurel, MS 39440-3468 <hr/> <b>Name of Employer (Required)</b> Wayne Sanderson Farms <hr/> <b>Occupation (Required)</b> Manager	05/10/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kathy Olsen <hr/> <b>Mailing Address</b> 4416 Sunnybrook Dr <hr/> <b>City, State, Zip Code</b> Nashville, TN 37205-3860 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/01/2023	\$10,000.00
<b>Aggregate year-to-date</b>		\$40,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Stephen Suitts <hr/> <b>Mailing Address</b> 737 Myrtle St NE <hr/> <b>City, State, Zip Code</b> Atlanta, GA 30308-1402 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/31/2023	\$500.00
<b>Aggregate year-to-date</b>		\$3,550.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Carol P. Palmer <hr/> <b>Mailing Address</b> 3 Cypress Ln <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-5935 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/26/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Ed Penny <hr/> <b>Mailing Address</b> 4366 N Honeysuckle Ln <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-6131 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Forest Landowner	05/18/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Patrick C. Morrow <hr/> <b>Mailing Address</b> PO Box 1787 <hr/> <b>City, State, Zip Code</b> Opelousas, LA 70571-1787 <hr/> <b>Name of Employer (Required)</b> Patrick C Morrow APLC <hr/> <b>Occupation (Required)</b> Attorney	05/02/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$2,500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Scott T. Shows <hr/> <b>Mailing Address</b> 541 Madison St <hr/> <b>City, State, Zip Code</b> New Orleans, LA 70116-3313 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Physician	05/23/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> James W. Manuel <b>Mailing Address</b> 827 Beaumont Dr <b>City, State, Zip Code</b> Madison, MS 39110-7494 <b>Name of Employer (Required)</b> Bradley Arant <b>Occupation (Required)</b> Attorney	05/15/2023	\$100.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Graham Slakie <b>Mailing Address</b> 4706 Buckingham Dr <b>City, State, Zip Code</b> Chattanooga, TN 37421-1108 <b>Name of Employer (Required)</b> Regal Cinemas <b>Occupation (Required)</b> Usher	05/26/2023	\$6.00
<b>Aggregate year-to-date</b>		\$200.60
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Lisa M. Ross <b>Mailing Address</b> PO Box 11264 <b>City, State, Zip Code</b> Jackson, MS 39283-1264 <b>Name of Employer (Required)</b> Law Offices of Lisa M. Ross <b>Occupation (Required)</b> Attorney	05/26/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Joel Brunt <b>Mailing Address</b> 5130 Arthur St <b>City, State, Zip Code</b> Moss Point, MS 39563-2706 <b>Name of Employer (Required)</b> Ochsner <b>Occupation (Required)</b> Physician	05/02/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Robert Alexander <hr/> <b>Mailing Address</b> 18 Highland Meadows Dr <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-5949 <hr/> <b>Name of Employer (Required)</b> Alexander CPA, LLC <hr/> <b>Occupation (Required)</b> Certified Public Accountant	05/25/2023	\$100.00
<b>Aggregate year-to-date</b>		\$450.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Susan Shands Jones <hr/> <b>Mailing Address</b> 1233 Saint Ann St <hr/> <b>City, State, Zip Code</b> Jackson, MS 39202-2149 <hr/> <b>Name of Employer (Required)</b> University of Mississippi Medical Center <hr/> <b>Occupation (Required)</b> General Counsel	05/26/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> James Sullivan <hr/> <b>Mailing Address</b> 253 County Road 325 <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-9566 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$250.00
<b>Aggregate year-to-date</b>		\$750.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Hackett Cummins <hr/> <b>Mailing Address</b> 9 Nelson Ln <hr/> <b>City, State, Zip Code</b> Pass Christian, MS 39571-4716 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/01/2023	\$100.00
<b>Aggregate year-to-date</b>		\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Janice Jackson <hr/> <b>Mailing Address</b> 113 Greens View Dr <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-8050 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/31/2023	\$50.00
<b>Aggregate year-to-date</b>		\$609.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Suzette D. Shelmire <hr/> <b>Mailing Address</b> PO Box 3138 <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-3100 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Brian Miller <hr/> <b>Mailing Address</b> 850 Avondale St <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-3315 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/13/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Michael Oneal <hr/> <b>Mailing Address</b> 1011 Adeline St <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39401-5022 <hr/> <b>Name of Employer (Required)</b> Hattiesburg Clinic <hr/> <b>Occupation (Required)</b> Physician	05/25/2023	\$100.00
<b>Aggregate year-to-date</b>		\$1,200.00

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 Secretary of State

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Pam Mottley <hr/> <b>Mailing Address</b> 1810 Fuller St <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39401-7548 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$25.00
<b>Aggregate year-to-date</b>		\$275.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Edward Snowdon <hr/> <b>Mailing Address</b> 50 Riverside Dr <hr/> <b>City, State, Zip Code</b> New York, NY 10024-6508 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Theatrical Producer	05/11/2023	\$5,000.00
<b>Aggregate year-to-date</b>		\$5,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Curtis C. Wilkie <hr/> <b>Mailing Address</b> 1016 S 11th St <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4608 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/02/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Richard Ballard <hr/> <b>Mailing Address</b> 142 Road 598 <hr/> <b>City, State, Zip Code</b> Plantersville, MS 38862-4901 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/04/2023	\$10.00
<b>Aggregate year-to-date</b>		\$215.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Larry Holdren <b>Mailing Address</b> 3070 Redhaven Way <b>City, State, Zip Code</b> Highlands Ranch, CO 80126-7552 <b>Name of Employer (Required)</b> RenUSA <b>Occupation (Required)</b> Partner	05/15/2023	\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Aggregate year-to-date</b>	\$250.00
<b>Full Name</b> Debra Reed <b>Mailing Address</b> 3436 Magazine St <b>City, State, Zip Code</b> New Orleans, LA 70115-2480 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/29/2023	\$100.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Aggregate year-to-date</b>	\$1,100.00
<b>Full Name</b> Laura Bailey <b>Mailing Address</b> 2356 East St <b>City, State, Zip Code</b> Hernando, MS 38632-1801 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/20/2023	\$200.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Aggregate year-to-date</b>	\$300.00
<b>Full Name</b> Edward Ashworth <b>Mailing Address</b> PO Box 14356 <b>City, State, Zip Code</b> Baton Rouge, LA 70898-4356 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/11/2023	\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Aggregate year-to-date</b>	\$500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Randy M. Wadkins <hr/> <b>Mailing Address</b> 1605 Pierce Avenue Ext <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4459 <hr/> <b>Name of Employer (Required)</b> University of Mississippi <hr/> <b>Occupation (Required)</b> Chemist	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Linda Foshee <hr/> <b>Mailing Address</b> Not Employed <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39402 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/12/2023	\$10.00
<b>Aggregate year-to-date</b>		\$293.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Barbara Rankin <hr/> <b>Mailing Address</b> PO Box 219 <hr/> <b>City, State, Zip Code</b> Braxton, MS 39044-0219 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/23/2023	\$50.00
<b>Aggregate year-to-date</b>		\$475.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Roger Klingler <hr/> <b>Mailing Address</b> 7844 E Sandalwood Dr <hr/> <b>City, State, Zip Code</b> Scottsdale, AZ 85250-7269 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/15/2023	\$25.00
<b>Aggregate year-to-date</b>		\$775.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Sally Lewis <b>Mailing Address</b> 135 Bayou Rd <b>City, State, Zip Code</b> Greenville, MS 38701-7702 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Farmer	05/16/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Robert O'Brien <b>Mailing Address</b> 6007 SW 240th St <b>City, State, Zip Code</b> Vashon, WA 98070-7247 <b>Name of Employer (Required)</b> Health Net <b>Occupation (Required)</b> COO	05/30/2023	\$100.00
<b>Aggregate year-to-date</b>		\$300.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Elizabeth A. Payne <b>Mailing Address</b> 633 Park Dr <b>City, State, Zip Code</b> Oxford, MS 38655-2824 <b>Name of Employer (Required)</b> Southern Association for Women Historians <b>Occupation (Required)</b> Historian	05/02/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$2,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Michelle Dueitt <b>Mailing Address</b> 12446 Adams Ridge Ln <b>City, State, Zip Code</b> Humble, TX 77346-1868 <b>Name of Employer (Required)</b> Pine Gate Renewables <b>Occupation (Required)</b> Vice President	05/22/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Joel Brunt <hr/> <b>Mailing Address</b> 5130 Arthur St <hr/> <b>City, State, Zip Code</b> Moss Point, MS 39563-2706 <hr/> <b>Name of Employer (Required)</b> Ochsner <hr/> <b>Occupation (Required)</b> Physician	05/15/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Eugene Bramlett <hr/> <b>Mailing Address</b> 1123 College St <hr/> <b>City, State, Zip Code</b> Columbus, MS 39701-5810 <hr/> <b>Name of Employer (Required)</b> Covenant United Methodist Church <hr/> <b>Occupation (Required)</b> Minister	05/16/2023	\$25.00
<b>Aggregate year-to-date</b>		\$325.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Russell Smith <hr/> <b>Mailing Address</b> 158 Arlington Rd <hr/> <b>City, State, Zip Code</b> Beaumont, MS 39423-2617 <hr/> <b>Name of Employer (Required)</b> Bentley Systems, Inc. <hr/> <b>Occupation (Required)</b> Software Development Manager	05/20/2023	\$100.00
<b>Aggregate year-to-date</b>		\$341.40
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Drake <hr/> <b>Mailing Address</b> 1220 Sunset Dr <hr/> <b>City, State, Zip Code</b> Ocean Springs, MS 39564-2943 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/31/2023	\$100.00
<b>Aggregate year-to-date</b>		\$1,200.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Harriet D. Roberts <hr/> <b>Mailing Address</b> 2223 Lee Loop <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4919 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/02/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Elizabeth Sangisetty <hr/> <b>Mailing Address</b> 1535 Octavia St <hr/> <b>City, State, Zip Code</b> New Orleans, LA 70115-4256 <hr/> <b>Name of Employer (Required)</b> Ochsner Medical Center <hr/> <b>Occupation (Required)</b> Physician	05/23/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Marley Lott <hr/> <b>Mailing Address</b> 1928 South Blvd <hr/> <b>City, State, Zip Code</b> Houston, TX 77098-5424 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/04/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Doug Horne <hr/> <b>Mailing Address</b> 412 N Cedar Bluff Rd <hr/> <b>City, State, Zip Code</b> Knoxville, TN 37923-3631 <hr/> <b>Name of Employer (Required)</b> Horne Properties, Inc <hr/> <b>Occupation (Required)</b> Developer	05/20/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Laura Harper	05/04/2023	\$1,000.00
<b>Mailing Address</b> 326 Wishing Tree Ln		
<b>City, State, Zip Code</b> Oxford, MS 38655-9604		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Retired	<b>Aggregate year-to-date</b>	\$1,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> William R. Clement Jr	05/26/2023	\$250.00
<b>Mailing Address</b> 1605 Poplar Blvd		
<b>City, State, Zip Code</b> Jackson, MS 39202-2118		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Retired	<b>Aggregate year-to-date</b>	\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Linda Foshee	05/17/2023	\$35.00
<b>Mailing Address</b> Not Employed		
<b>City, State, Zip Code</b> Hattiesburg, MS 39402		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$293.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jeffrey Cantin	05/17/2023	\$500.00
<b>Mailing Address</b> 5804 River Oaks Rd S		
<b>City, State, Zip Code</b> New Orleans, LA 70123-2155		
<b>Name of Employer (Required)</b> Solar Alternatives		
<b>Occupation (Required)</b> Manager	<b>Aggregate year-to-date</b>	\$1,500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Karley Jarin <hr/> <b>Mailing Address</b> 1 Greenbriar Cir <hr/> <b>City, State, Zip Code</b> Newtown, PA 18940-2619 <hr/> <b>Name of Employer (Required)</b> Consultancy <hr/> <b>Occupation (Required)</b> Manager	05/09/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Natalie Bernstein <hr/> <b>Mailing Address</b> 2130 E Lake Rd NE <hr/> <b>City, State, Zip Code</b> Atlanta, GA 30307-1836 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/31/2023	\$250.00
<b>Aggregate year-to-date</b>		\$1,250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Hal Fogelman <hr/> <b>Mailing Address</b> 343 Greenway Pl <hr/> <b>City, State, Zip Code</b> Memphis, TN 38117-4315 <hr/> <b>Name of Employer (Required)</b> Research Dynamics <hr/> <b>Occupation (Required)</b> Marketing	05/04/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Charles Buchanan <hr/> <b>Mailing Address</b> 155 Bryant St <hr/> <b>City, State, Zip Code</b> Palo Alto, CA 94301-1104 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/04/2023	\$99.00
<b>Aggregate year-to-date</b>		\$331.50

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Eugene Bramlett <hr/> <b>Mailing Address</b> 1123 College St <hr/> <b>City, State, Zip Code</b> Columbus, MS 39701-5810 <hr/> <b>Name of Employer (Required)</b> Covenant United Methodist Church <hr/> <b>Occupation (Required)</b> Minister	05/05/2023	\$50.00
<b>Aggregate year-to-date</b>		\$325.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Audrey McBride <hr/> <b>Mailing Address</b> 1250 E Lakeshore Dr <hr/> <b>City, State, Zip Code</b> Starkville, MS 39759-2482 <hr/> <b>Name of Employer (Required)</b> McBride & Co Real Estate <hr/> <b>Occupation (Required)</b> Broker	05/25/2023	\$15.00
<b>Aggregate year-to-date</b>		\$265.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Sonia Thompson <hr/> <b>Mailing Address</b> 530 N 14th St <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-3218 <hr/> <b>Name of Employer (Required)</b> University of Mississippi <hr/> <b>Occupation (Required)</b> Public Relations	05/08/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Eden Brent <hr/> <b>Mailing Address</b> 811 Arnold Ave <hr/> <b>City, State, Zip Code</b> Greenville, MS 38701-5812 <hr/> <b>Name of Employer (Required)</b> Little Boogaloo Entertainment, LLC <hr/> <b>Occupation (Required)</b> Musician	05/18/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Danny Rasberry <hr/> <b>Mailing Address</b> 764 N 8th Ave <hr/> <b>City, State, Zip Code</b> Laurel, MS 39440-3451 <hr/> <b>Name of Employer (Required)</b> Rasberry Producer Group <hr/> <b>Occupation (Required)</b> Sales	05/10/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$2,750.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Benjamin Griffith <hr/> <b>Mailing Address</b> 162 Oxford Creek Dr <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-2242 <hr/> <b>Name of Employer (Required)</b> Griffith Law Firm <hr/> <b>Occupation (Required)</b> Attorney	05/30/2023	\$50.00
<b>Aggregate year-to-date</b>		\$325.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Ron Dale <hr/> <b>Mailing Address</b> 42 County Road 411 <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-9462 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Artist	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Linda Foshee <hr/> <b>Mailing Address</b> Not Employed <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39402 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/03/2023	\$20.00
<b>Aggregate year-to-date</b>		\$293.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Cheryl Goggin <hr/> <b>Mailing Address</b> 402 Mandalay Dr <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39402-2039 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/04/2023	\$100.00
<b>Aggregate year-to-date</b>		\$205.10
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Randall B. Wall <hr/> <b>Mailing Address</b> 2206 Culleywood Rd <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-5815 <hr/> <b>Name of Employer (Required)</b> Jones Walker LLP <hr/> <b>Occupation (Required)</b> Attorney	05/26/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> E. K. Pruitt <hr/> <b>Mailing Address</b> 4217 Oakridge Dr <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-3420 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/07/2023	\$50.00
<b>Aggregate year-to-date</b>		\$375.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Carol Rizzolo <hr/> <b>Mailing Address</b> 24 Long Hill Farm <hr/> <b>City, State, Zip Code</b> Guilford, CT 06437-1867 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/18/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Carolyn Goren <hr/> <b>Mailing Address</b> PO Box 7189 <hr/> <b>City, State, Zip Code</b> Missoula, MT 59807-7189 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/01/2023	\$25.00
<b>Aggregate year-to-date</b>		\$280.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Todd A. Williams <hr/> <b>Mailing Address</b> 3889 Maple Ave <hr/> <b>City, State, Zip Code</b> Dallas, TX 75219-3923 <hr/> <b>Name of Employer (Required)</b> The Commit Partnership <hr/> <b>Occupation (Required)</b> CEO	05/11/2023	\$2,000.00
<b>Aggregate year-to-date</b>		\$2,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Barksdale <hr/> <b>Mailing Address</b> 837 Lowell Blvd <hr/> <b>City, State, Zip Code</b> Denver, CO 80204-3118 <hr/> <b>Name of Employer (Required)</b> Radiant Engineering <hr/> <b>Occupation (Required)</b> Solar Engineer	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Alicia A. Franck <hr/> <b>Mailing Address</b> 1326 Philip St <hr/> <b>City, State, Zip Code</b> New Orleans, LA 70130-5719 <hr/> <b>Name of Employer (Required)</b> National World War II Museum <hr/> <b>Occupation (Required)</b> Vice President	05/23/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Michael F. Cavanaugh <hr/> <b>Mailing Address</b> PO Box 1911 <hr/> <b>City, State, Zip Code</b> Biloxi, MS 39533-1911 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/26/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Alma Walls <hr/> <b>Mailing Address</b> 3887 Kenton Dr <hr/> <b>City, State, Zip Code</b> Southaven, MS 38672-7225 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/18/2023	\$250.00
<b>Aggregate year-to-date</b>		\$575.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Frank Witherspoon <hr/> <b>Mailing Address</b> 910 Lincoln Ave <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4328 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$50.00
<b>Aggregate year-to-date</b>		\$750.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Frances M. Coleman <hr/> <b>Mailing Address</b> 108 Royal Garden Ter <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-7637 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/12/2023	\$5.00
<b>Aggregate year-to-date</b>		\$300.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Jerry Harrington	05/04/2023	\$250.00
<b>Mailing Address</b> 2327 Cameron Way		
<b>City, State, Zip Code</b> Iowa City, IA 52246-1830		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Retired		
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Aggregate year-to-date</b>	\$250.00
<b>Full Name</b> Kristie Miller	05/04/2023	\$500.00
<b>Mailing Address</b> 3133 Connecticut Ave NW		
<b>City, State, Zip Code</b> Washington, DC 20008-5112		
<b>Name of Employer (Required)</b> Self Employed		
<b>Occupation (Required)</b> Writer		
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Aggregate year-to-date</b>	\$500.00
<b>Full Name</b> Debbie Hall	05/16/2023	\$25.00
<b>Mailing Address</b> 127 Sesame Rd		
<b>City, State, Zip Code</b> Tupelo, MS 38801-8615		
<b>Name of Employer (Required)</b> University of Mississippi		
<b>Occupation (Required)</b> Professor		
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Aggregate year-to-date</b>	\$437.40
<b>Full Name</b> Cynthia Walker	05/07/2023	\$1,000.00
<b>Mailing Address</b> 201 Watermelon Rd		
<b>City, State, Zip Code</b> Ovett, MS 39464-4046		
<b>Name of Employer (Required)</b> Self Employed		
<b>Occupation (Required)</b> Writer		
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Aggregate year-to-date</b>	\$1,000.00

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 Michael Watson  
 Secretary of State

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> David Williams <hr/> <b>Mailing Address</b> 122 Madison Pl <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39402-8339 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/29/2023	\$250.00
<b>Aggregate year-to-date</b>		\$525.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> David Clark <hr/> <b>Mailing Address</b> 110 Olympia Flds <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-2509 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/10/2023	\$5,000.00
<b>Aggregate year-to-date</b>		\$10,003.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Ann J. Abadie <hr/> <b>Mailing Address</b> 2238 Lee Loop <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4920 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/30/2023	\$25.00
<b>Aggregate year-to-date</b>		\$585.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Christy Jones <hr/> <b>Mailing Address</b> 205 Duck Cv <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-9280 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Raleigh Byars <hr/> <b>Mailing Address</b> 48 County Road 229 <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-5800 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$25.00
<b>Aggregate year-to-date</b>		\$215.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Suzanne Robinson <hr/> <b>Mailing Address</b> 206 Wood St <hr/> <b>City, State, Zip Code</b> Water Valley, MS 38965-2603 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/31/2023	\$50.00
<b>Aggregate year-to-date</b>		\$425.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Gay G. Graeber <hr/> <b>Mailing Address</b> 1584 Buchanan Ave <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4418 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Artist	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Deborah Bailey <hr/> <b>Mailing Address</b> 109 1st St <hr/> <b>City, State, Zip Code</b> Grenada, MS 38901-2615 <hr/> <b>Name of Employer (Required)</b> First & Green, LLC <hr/> <b>Occupation (Required)</b> Entrepreneur	05/03/2023	\$25.00
<b>Aggregate year-to-date</b>		\$525.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Sue Bell Cobb <hr/> <b>Mailing Address</b> 837 Williamsburg Dr <hr/> <b>City, State, Zip Code</b> Pike Road, AL 36064-3427 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/08/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jennifer Riley-Collins <hr/> <b>Mailing Address</b> 142 Bellemeade Trce <hr/> <b>City, State, Zip Code</b> Clinton, MS 39056-6240 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/11/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Claiborne Barksdale <hr/> <b>Mailing Address</b> 917 Old Taylor Rd <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4637 <hr/> <b>Name of Employer (Required)</b> Barksdale Reading Institute <hr/> <b>Occupation (Required)</b> Attorney	05/02/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Mary Coleman <hr/> <b>Mailing Address</b> 1338 N El Paso St <hr/> <b>City, State, Zip Code</b> Colorado Spring, CO 80903-2524 <hr/> <b>Name of Employer (Required)</b> Oak Street Health <hr/> <b>Occupation (Required)</b> Healthcare Administrator	05/04/2023	\$100.00
<b>Aggregate year-to-date</b>		\$353.40



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Deborah Reiner <b>Mailing Address</b> 1921 Jonahs Ridge Dr <b>City, State, Zip Code</b> Nolensville, TN 37135-9609 <b>Name of Employer (Required)</b> HCA Healthcare <b>Occupation (Required)</b> Marketing	05/24/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$2,500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Ben Kelahan <b>Mailing Address</b> 23119 Minerva Dr <b>City, State, Zip Code</b> Brambleton, VA 20148-7289 <b>Name of Employer (Required)</b> RenUSA <b>Occupation (Required)</b> Partner	05/15/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Richard Ballard <b>Mailing Address</b> 142 Road 598 <b>City, State, Zip Code</b> Plantersville, MS 38862-4901 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/27/2023	\$10.00
<b>Aggregate year-to-date</b>		\$215.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Andrew Dickson <b>Mailing Address</b> 807 Sth 19Th Ave <b>City, State, Zip Code</b> Hattiesburg, MS 39401 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/20/2023	\$100.00
<b>Aggregate year-to-date</b>		\$900.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Marcella Strong <hr/> <b>Mailing Address</b> 100 Fairlane Dr <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39402-2309 <hr/> <b>Name of Employer (Required)</b> Not Employed	05/30/2023	\$100.00
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$300.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Graham Slakie <hr/> <b>Mailing Address</b> 4706 Buckingham Dr <hr/> <b>City, State, Zip Code</b> Chattanooga, TN 37421-1108 <hr/> <b>Name of Employer (Required)</b> Regal Cinemas	05/11/2023	\$25.00
<b>Occupation (Required)</b> Usher	<b>Aggregate year-to-date</b>	\$200.60
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Nancy H. Brown <hr/> <b>Mailing Address</b> 512 Northpointe Loop <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-7718 <hr/> <b>Name of Employer (Required)</b> Not Employed	05/02/2023	\$500.00
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Chapman Lewis & Swan, PLLC <hr/> <b>Mailing Address</b> PO Box 428 <hr/> <b>City, State, Zip Code</b> Clarksdale, MS 38614-0428 <hr/> <b>Name of Employer (Required)</b>	05/10/2023	\$500.00
<b>Occupation (Required)</b>	<b>Aggregate year-to-date</b>	\$500.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Jack Reed III <hr/> <b>Mailing Address</b> 555 Page Ave NE <hr/> <b>City, State, Zip Code</b> Atlanta, GA 30307-1766 <hr/> <b>Name of Employer (Required)</b> Reed & Reed Marketing <hr/> <b>Occupation (Required)</b> Marketing	05/31/2023	\$25.00
<b>Aggregate year-to-date</b>		\$225.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Ben Smith <hr/> <b>Mailing Address</b> 601 New Rd <hr/> <b>City, State, Zip Code</b> Raleigh, NC 27608-2705 <hr/> <b>Name of Employer (Required)</b> Kilpatrick Townsend & Stockton LLP <hr/> <b>Occupation (Required)</b> Attorney	05/23/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Helen Boone <hr/> <b>Mailing Address</b> 3726 Crane Blvd <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-3605 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/17/2023	\$87.70
<b>Aggregate year-to-date</b>		\$647.45
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Charles Parrott <hr/> <b>Mailing Address</b> 9 Abbey Nord Pl <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-3743 <hr/> <b>Name of Employer (Required)</b> Adams and Reese <hr/> <b>Occupation (Required)</b> Attorney	05/31/2023	\$100.00
<b>Aggregate year-to-date</b>		\$350.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Susan Fino <hr/> <b>Mailing Address</b> 1030 Augusta Dr <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-8142 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Margaret Thomas <hr/> <b>Mailing Address</b> 153 Timberton Dr <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39401-8209 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/15/2023	\$10.00
<b>Aggregate year-to-date</b>		\$312.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Sarah Bentley <hr/> <b>Mailing Address</b> 144 Glenway Dr <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-4101 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/26/2023	\$250.00
<b>Aggregate year-to-date</b>		\$519.50
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Beth Orlansky <hr/> <b>Mailing Address</b> 12 Oakleigh Pl <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-2204 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/09/2023	\$250.00
<b>Aggregate year-to-date</b>		\$350.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Nancy Miller <hr/> <b>Mailing Address</b> 17452 Lovers Ln <hr/> <b>City, State, Zip Code</b> Gordonsville, VA 22942-8133 <hr/> <b>Name of Employer (Required)</b> Miller Firm LLC <hr/> <b>Occupation (Required)</b> Attorney	05/21/2023	\$5,000.00
<b>Aggregate year-to-date</b>		\$5,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Gayle Massey <hr/> <b>Mailing Address</b> 186 Parke Dr <hr/> <b>City, State, Zip Code</b> Ridgeland, MS 39157-9402 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/31/2023	\$100.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jean Fenwick <hr/> <b>Mailing Address</b> 208 S Madison St <hr/> <b>City, State, Zip Code</b> Kosciusko, MS 39090-3946 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/04/2023	\$50.00
<b>Aggregate year-to-date</b>		\$950.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Keith Johnson <hr/> <b>Mailing Address</b> PO Box 421 <hr/> <b>City, State, Zip Code</b> Nesbit, MS 38651-0421 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/26/2023	\$50.00
<b>Aggregate year-to-date</b>		\$450.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Alan W. Perry <hr/> <b>Mailing Address</b> 2455 Sandridge Dr <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-6204 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/26/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Wilson Golden <hr/> <b>Mailing Address</b> 3136 White Magnolia Chase SW <hr/> <b>City, State, Zip Code</b> Gainesville, GA 30504-5587 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/17/2023	\$35.00
<b>Aggregate year-to-date</b>		\$685.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Wilson Golden <hr/> <b>Mailing Address</b> 3136 White Magnolia Chase SW <hr/> <b>City, State, Zip Code</b> Gainesville, GA 30504-5587 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/17/2023	\$250.00
<b>Aggregate year-to-date</b>		\$685.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Michael J. Stratton <hr/> <b>Mailing Address</b> 1717 N Downing St <hr/> <b>City, State, Zip Code</b> Denver, CO 80218-1056 <hr/> <b>Name of Employer (Required)</b> Brownstein Hyatt Farber Schreck <hr/> <b>Occupation (Required)</b> Senior Policy Director	05/10/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$2,000.00

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<b>Full Name</b> Fraser Hunter <b>Mailing Address</b> 645 W End Ave <b>City, State, Zip Code</b> New York, NY 10025-7352 <b>Name of Employer (Required)</b> WilmerHale <b>Occupation (Required)</b> Attorney	05/31/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jack Pendarvis <b>Mailing Address</b> 406 Timber Ln <b>City, State, Zip Code</b> Oxford, MS 38655-5853 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Writer	05/04/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Carol C. Mann <b>Mailing Address</b> 316 Sonoma Cv <b>City, State, Zip Code</b> Madison, MS 39110-9549 <b>Name of Employer (Required)</b> Mann Agency <b>Occupation (Required)</b> Communications	05/26/2023	\$250.00
<b>Aggregate year-to-date</b>		\$285.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Juanita Boutin <b>Mailing Address</b> PO Box 400 <b>City, State, Zip Code</b> Oxford, MS 38655-0400 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/07/2023	\$25.00
<b>Aggregate year-to-date</b>		\$425.00

Ref No: CF202330347  
 Date Filed: 6/9/2023  
 Michael Watson  
 Secretary of State

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Kathy Ashworth <hr/> <b>Mailing Address</b> 1015 W Saint Mary Blvd <hr/> <b>City, State, Zip Code</b> Lafayette, LA 70506-3420 <hr/> <b>Name of Employer (Required)</b> RLP Realty Investing LLC <hr/> <b>Occupation (Required)</b> Real Estate	05/17/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Rogers <hr/> <b>Mailing Address</b> 831 Cedar Lake Rd <hr/> <b>City, State, Zip Code</b> Biloxi, MS 39532-4671 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/18/2023	\$250.00
<b>Aggregate year-to-date</b>		\$350.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Johnny Sneed <hr/> <b>Mailing Address</b> 4303 Ambrose Ave <hr/> <b>City, State, Zip Code</b> Los Angeles, CA 90027-2112 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Actor	05/31/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> H. Hackett Cummins <hr/> <b>Mailing Address</b> 9 Nelson Ln <hr/> <b>City, State, Zip Code</b> Pass Christian, MS 39571-4716 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/22/2023	\$250.00
<b>Aggregate year-to-date</b>		\$300.00



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Mary Clay Morgan <hr/> <b>Mailing Address</b> 1045 Avondale St <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-3513 <hr/> <b>Name of Employer (Required)</b> Horne LLP <hr/> <b>Occupation (Required)</b> Attorney	05/26/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> W. Ralph Eubanks <hr/> <b>Mailing Address</b> 133 U St NE <hr/> <b>City, State, Zip Code</b> Washington, DC 20002-1319 <hr/> <b>Name of Employer (Required)</b> University of Mississippi <hr/> <b>Occupation (Required)</b> Professor	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Andrew Cunningham <hr/> <b>Mailing Address</b> 13462 MS Highway 388 <hr/> <b>City, State, Zip Code</b> Brooksville, MS 39739-9167 <hr/> <b>Name of Employer (Required)</b> Valley Farm <hr/> <b>Occupation (Required)</b> Farm Worker	05/13/2023	\$100.00
<b>Aggregate year-to-date</b>		\$400.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Ed Gogek <hr/> <b>Mailing Address</b> PO Box 13086 <hr/> <b>City, State, Zip Code</b> Prescott, AZ 86304-3086 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Physician	05/04/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Peter A. Simon <hr/> <b>Mailing Address</b> PO Box 19088 <hr/> <b>City, State, Zip Code</b> Jean, NV 89019-9088 <hr/> <b>Name of Employer (Required)</b> Diamond Gold Investors <hr/> <b>Occupation (Required)</b> Managing Partner	05/26/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Stephanie Barksdale <hr/> <b>Mailing Address</b> 1331 3rd St <hr/> <b>City, State, Zip Code</b> New Orleans, LA 70130-5743 <hr/> <b>Name of Employer (Required)</b> Sparking Insights LLC <hr/> <b>Occupation (Required)</b> Consultant	05/27/2023	\$5,000.00
<b>Aggregate year-to-date</b>		\$5,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jean Fenwick <hr/> <b>Mailing Address</b> 208 S Madison St <hr/> <b>City, State, Zip Code</b> Kosciusko, MS 39090-3946 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/11/2023	\$100.00
<b>Aggregate year-to-date</b>		\$950.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Andrew Dickson <hr/> <b>Mailing Address</b> 807 Sth 19Th Ave <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39401 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/03/2023	\$250.00
<b>Aggregate year-to-date</b>		\$900.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Polly Sattler <hr/> <b>Mailing Address</b> 289 Candler St NE <hr/> <b>City, State, Zip Code</b> Atlanta, GA 30307-2031 <hr/> <b>Name of Employer (Required)</b> Partnership for Inclusive Innovation <hr/> <b>Occupation (Required)</b> Sustainability Planner	05/07/2023	\$250.00
<b>Aggregate year-to-date</b>		\$484.34
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jean Fenwick <hr/> <b>Mailing Address</b> 208 S Madison St <hr/> <b>City, State, Zip Code</b> Kosciusko, MS 39090-3946 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/18/2023	\$100.00
<b>Aggregate year-to-date</b>		\$950.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Deirdre Phillips <hr/> <b>Mailing Address</b> 200 Jefferson Rdg <hr/> <b>City, State, Zip Code</b> Ridgeland, MS 39157-9101 <hr/> <b>Name of Employer (Required)</b> Delta Health System <hr/> <b>Occupation (Required)</b> Physician	05/09/2023	\$50.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Mignon Clyburn <hr/> <b>Mailing Address</b> 350 G St SW <hr/> <b>City, State, Zip Code</b> Washington, DC 20024-3170 <hr/> <b>Name of Employer (Required)</b> MLC Strategies, LLC <hr/> <b>Occupation (Required)</b> Consultant	05/29/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> John Ditto <hr/> <b>Mailing Address</b> 4212 Sneed Rd <hr/> <b>City, State, Zip Code</b> Nashville, TN 37215-3214 <hr/> <b>Name of Employer (Required)</b> Hamilton Creek Partners, LLC <hr/> <b>Occupation (Required)</b> Investments	05/10/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> David Clark <hr/> <b>Mailing Address</b> 110 Olympia Flds <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-2509 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/30/2023	\$3.00
<b>Aggregate year-to-date</b>		\$10,003.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Brombacher <hr/> <b>Mailing Address</b> 108 Coachmans Rd <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-9227 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> William N. LaForge <hr/> <b>Mailing Address</b> 225 Liberty St <hr/> <b>City, State, Zip Code</b> New York, NY 10281-1048 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Johanna Rice <hr/> <b>Mailing Address</b> 167 Court St <hr/> <b>City, State, Zip Code</b> West Point, MS 39773-7990 <hr/> <b>Name of Employer (Required)</b> Johanna Rice, LLC <hr/> <b>Occupation (Required)</b> Publisher	05/27/2023	\$100.00
<b>Aggregate year-to-date</b>		\$350.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Peter OKeefe <hr/> <b>Mailing Address</b> 4200 Fordham Rd NW <hr/> <b>City, State, Zip Code</b> Washington, DC 20016-1908 <hr/> <b>Name of Employer (Required)</b> Forbes Tate Co <hr/> <b>Occupation (Required)</b> Consultant	05/08/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$2,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Leslie Fye <hr/> <b>Mailing Address</b> 5439 Ennis Rd <hr/> <b>City, State, Zip Code</b> Starkville, MS 39759-4861 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Licensed Professional Counselor	05/28/2023	\$10.00
<b>Aggregate year-to-date</b>		\$545.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Susan McAdory <hr/> <b>Mailing Address</b> 163 Skyline Dr <hr/> <b>City, State, Zip Code</b> Clinton, MS 39056-6009 <hr/> <b>Name of Employer (Required)</b> Porter & Malouf <hr/> <b>Occupation (Required)</b> Paralegal	05/19/2023	\$276.70
<b>Aggregate year-to-date</b>		\$276.70

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Ken Mcgraw <hr/> <b>Mailing Address</b> 1406 Johnson Ave <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4720 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/04/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Elvin Sunds <hr/> <b>Mailing Address</b> 4000 W Tidewater Ln <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-8942 <hr/> <b>Name of Employer (Required)</b> St. Francis of Assisi Church <hr/> <b>Occupation (Required)</b> Clergy	05/16/2023	\$25.00
<b>Aggregate year-to-date</b>		\$235.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kathryn J. Irby <hr/> <b>Mailing Address</b> 730 Tegarden Rd <hr/> <b>City, State, Zip Code</b> Gulfport, MS 39507-2625 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/26/2023	\$5.00
<b>Aggregate year-to-date</b>		\$343.25
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Joyce Leech <hr/> <b>Mailing Address</b> 214 Main St S <hr/> <b>City, State, Zip Code</b> Amory, MS 38821-4218 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/28/2023	\$25.00
<b>Aggregate year-to-date</b>		\$350.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Stephen Suitts <hr/> <b>Mailing Address</b> 737 Myrtle St NE <hr/> <b>City, State, Zip Code</b> Atlanta, GA 30308-1402 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/11/2023	\$50.00
<b>Aggregate year-to-date</b>		\$3,550.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Richard C. Howorth <hr/> <b>Mailing Address</b> 310 N 16th St <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-3712 <hr/> <b>Name of Employer (Required)</b> Square Books <hr/> <b>Occupation (Required)</b> Business Owner	05/02/2023	\$1,500.00
<b>Aggregate year-to-date</b>		\$1,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Klein <hr/> <b>Mailing Address</b> 51 Blossom Cove Rd <hr/> <b>City, State, Zip Code</b> Red Bank, NJ 07701-6302 <hr/> <b>Name of Employer (Required)</b> Thrive RB <hr/> <b>Occupation (Required)</b> Non-Profit Manager	05/03/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$2,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Law Offices of Richard R. Main <hr/> <b>Mailing Address</b> 2086 Old Taylor Rd <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-5500 <hr/> <b>Name of Employer (Required)</b> _____ <hr/> <b>Occupation (Required)</b> _____	05/05/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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<b>Full Name</b> Lunsford Baskin & Priebe LLC	05/10/2023	\$1,500.00
<b>Mailing Address</b> 317 E Capitol St		
<b>City, State, Zip Code</b> Jackson, MS 39201-3409		
<b>Name of Employer (Required)</b> _____		
<b>Occupation (Required)</b> _____	<b>Aggregate year-to-date</b>	\$1,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Lori Pierce	05/30/2023	\$100.00
<b>Mailing Address</b> 1514 Forrest Hill Dr		
<b>City, State, Zip Code</b> Columbus, MS 39701-3500		
<b>Name of Employer (Required)</b> State of Mississippi		
<b>Occupation (Required)</b> Teacher	<b>Aggregate year-to-date</b>	\$230.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Cindy Brown	05/11/2023	\$50.00
<b>Mailing Address</b> 219 Carol Ln		
<b>City, State, Zip Code</b> Oxford, MS 38655-3403		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$350.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Joe Osgoode	05/02/2023	\$250.00
<b>Mailing Address</b> 10 Private Rd		
<b>City, State, Zip Code</b> Oxford, MS 38655		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$250.00



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<b>Full Name</b> Francis Gresock <b>Mailing Address</b> 609 Washington St <b>City, State, Zip Code</b> Natchez, MS 39120-3526 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/22/2023	\$25.00
<b>Aggregate year-to-date</b>		\$375.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Steven Levitas <b>Mailing Address</b> 17 Westover Dr <b>City, State, Zip Code</b> Asheville, NC 28801-1633 <b>Name of Employer (Required)</b> Pine Gate Renewables <b>Occupation (Required)</b> Executive	05/23/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Graham Slakie <b>Mailing Address</b> 4706 Buckingham Dr <b>City, State, Zip Code</b> Chattanooga, TN 37421-1108 <b>Name of Employer (Required)</b> Regal Cinemas <b>Occupation (Required)</b> Usher	05/31/2023	\$6.00
<b>Aggregate year-to-date</b>		\$200.60
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Carter B. Myers <b>Mailing Address</b> 1005 Fillmore Ave <b>City, State, Zip Code</b> Oxford, MS 38655-4323 <b>Name of Employer (Required)</b> Bloomboard, Inc. <b>Occupation (Required)</b> Director of Sales	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00

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 Michael Watson  
 Secretary of State

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Jeffrey R. Blackwood <hr/> <b>Mailing Address</b> PO Box 1789 <hr/> <b>City, State, Zip Code</b> Jackson, MS 39215-1789 <hr/> <b>Name of Employer (Required)</b> Bradley Arant Boult Cummings LLP <hr/> <b>Occupation (Required)</b> Attorney	05/26/2023	\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jean Fenwick <hr/> <b>Mailing Address</b> 208 S Madison St <hr/> <b>City, State, Zip Code</b> Kosciusko, MS 39090-3946 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/31/2023	\$100.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Charles R. Wilson <hr/> <b>Mailing Address</b> 114 Leighton Rd <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-2010 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/02/2023	\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Steve Chapman <hr/> <b>Mailing Address</b> 13048 Knaus Rd <hr/> <b>City, State, Zip Code</b> Lake Oswego, OR 97034-1515 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/22/2023	\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
	<b>Aggregate year-to-date</b>	<b>\$950.00</b>

Ref No: CF202330347  
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 Michael Watson  
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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Kathryn J. Irby <hr/> <b>Mailing Address</b> 730 Tegarden Rd <hr/> <b>City, State, Zip Code</b> Gulfport, MS 39507-2625 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/13/2023	\$35.00
<b>Aggregate year-to-date</b>		\$343.25
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Amy Kreider <hr/> <b>Mailing Address</b> 1145 Grant Rd <hr/> <b>City, State, Zip Code</b> Watertown, TN 37184-3114 <hr/> <b>Name of Employer (Required)</b> Ridgely Walsh <hr/> <b>Occupation (Required)</b> President	05/05/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Charles Buchanan <hr/> <b>Mailing Address</b> 155 Bryant St <hr/> <b>City, State, Zip Code</b> Palo Alto, CA 94301-1104 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/26/2023	\$45.71
<b>Aggregate year-to-date</b>		\$331.50
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Knox Walkup <hr/> <b>Mailing Address</b> 3710 Richland Ave <hr/> <b>City, State, Zip Code</b> Nashville, TN 37205-2438 <hr/> <b>Name of Employer (Required)</b> Wyatt Tarrant & Combs <hr/> <b>Occupation (Required)</b> Attorney	05/26/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Andrew Jenkins <b>Mailing Address</b> 116 Highland Meadow Rd <b>City, State, Zip Code</b> Flora, MS 39071-9553 <b>Name of Employer (Required)</b> AJA Management & Technical Services <b>Occupation (Required)</b> Engineering	05/17/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$2,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Elvin Sunds <b>Mailing Address</b> 4000 W Tidewater Ln <b>City, State, Zip Code</b> Madison, MS 39110-8942 <b>Name of Employer (Required)</b> St. Francis of Assisi Church <b>Occupation (Required)</b> Clergy	05/11/2023	\$25.00
<b>Aggregate year-to-date</b>		\$235.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Inez Kelleher <b>Mailing Address</b> 914 N Country Club Ln <b>City, State, Zip Code</b> Biloxi, MS 39532-3204 <b>Name of Employer (Required)</b> Memorial Hospital Gulfport <b>Occupation (Required)</b> Physician	05/31/2023	\$100.00
<b>Aggregate year-to-date</b>		\$1,150.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Christine Lasala <b>Mailing Address</b> 15 W 81st St <b>City, State, Zip Code</b> New York, NY 10024-6022 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/04/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Wade Perry <hr/> <b>Mailing Address</b> 2454 Eloong Dr <hr/> <b>City, State, Zip Code</b> Mobile, AL 36605-4113 <hr/> <b>Name of Employer (Required)</b> NTIA <hr/> <b>Occupation (Required)</b> Program Officer	05/04/2023	\$250.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jean Fenwick <hr/> <b>Mailing Address</b> 208 S Madison St <hr/> <b>City, State, Zip Code</b> Kosciusko, MS 39090-3946 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/15/2023	\$100.00
<b>Aggregate year-to-date</b>		\$950.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> William N. Reed <hr/> <b>Mailing Address</b> 28 Waterford Pl <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-2945 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/17/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Philip B. Jones <hr/> <b>Mailing Address</b> 1141 19th Ave E <hr/> <b>City, State, Zip Code</b> Seattle, WA 98112-3504 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/08/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00

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 Secretary of State

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Patrick Falkner <hr/> <b>Mailing Address</b> 176 Shady Acres Rd <hr/> <b>City, State, Zip Code</b> Tupelo, MS 38804-2945 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/18/2023	\$100.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Barbara Casey <hr/> <b>Mailing Address</b> 229 Peachtree Hills Ave NE <hr/> <b>City, State, Zip Code</b> Atlanta, GA 30305-4413 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/28/2023	\$25.00
<b>Aggregate year-to-date</b>		\$325.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Sheila W. Varnado <hr/> <b>Mailing Address</b> PO Box 16958 <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39404-6958 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/10/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Graham Slakie <hr/> <b>Mailing Address</b> 4706 Buckingham Dr <hr/> <b>City, State, Zip Code</b> Chattanooga, TN 37421-1108 <hr/> <b>Name of Employer (Required)</b> Regal Cinemas <hr/> <b>Occupation (Required)</b> Usher	05/21/2023	\$6.00
<b>Aggregate year-to-date</b>		\$200.60

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 Secretary of State

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Michael Jefcoat <hr/> <b>Mailing Address</b> 1306 Homewood Dr <hr/> <b>City, State, Zip Code</b> Laurel, MS 39440-2260 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Obie M. McNair Jr <hr/> <b>Mailing Address</b> 102 Cirencester Dr <hr/> <b>City, State, Zip Code</b> Ridgeland, MS 39157-9788 <hr/> <b>Name of Employer (Required)</b> Central MS Health System <hr/> <b>Occupation (Required)</b> Physician	05/13/2023	\$25.00
<b>Aggregate year-to-date</b>		\$275.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Debra B. Young <hr/> <b>Mailing Address</b> 27 County Road 3024 <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-9786 <hr/> <b>Name of Employer (Required)</b> University of Mississippi <hr/> <b>Occupation (Required)</b> Academic Dean	05/26/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> David Williams <hr/> <b>Mailing Address</b> 122 Madison Pl <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39402-8339 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/27/2023	\$25.00
<b>Aggregate year-to-date</b>		\$525.00

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 Michael Watson  
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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Frank Tietjens <hr/> <b>Mailing Address</b> 209 Lake Cir <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-7992 <hr/> <b>Name of Employer (Required)</b> Not Employed	05/08/2023	\$500.00
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$1,100.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Sallye Killebrew <hr/> <b>Mailing Address</b> 1200 Harrison Ave <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-3944 <hr/> <b>Name of Employer (Required)</b> University of Mississippi <hr/> <b>Occupation (Required)</b> Tutor	05/02/2023	\$250.00
<b>Occupation (Required)</b> Tutor	<b>Aggregate year-to-date</b>	\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Sarah Faulkner <hr/> <b>Mailing Address</b> 108 Sumach St <hr/> <b>City, State, Zip Code</b> Lookout Mountai, TN 37350-1132 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/13/2023	\$2,500.00
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$10,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> David Sullivan <hr/> <b>Mailing Address</b> 16 Notre Dame Ave <hr/> <b>City, State, Zip Code</b> Cambridge, MA 02140-2506 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/27/2023	\$500.00
<b>Occupation (Required)</b> Attorney	<b>Aggregate year-to-date</b>	\$500.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Cherie Labat <hr/> <b>Mailing Address</b> 8218 Ridgewood Dr <hr/> <b>City, State, Zip Code</b> Kiln, MS 39556-8474 <hr/> <b>Name of Employer (Required)</b> University of Southern Mississippi <hr/> <b>Occupation (Required)</b> Educator	05/31/2023	\$900.00
<b>Aggregate year-to-date</b>		\$1,156.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kathryn J. Irby <hr/> <b>Mailing Address</b> 730 Tegarden Rd <hr/> <b>City, State, Zip Code</b> Gulfport, MS 39507-2625 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/12/2023	\$5.00
<b>Aggregate year-to-date</b>		\$343.25
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Pat Guyton <hr/> <b>Mailing Address</b> 11002 Covington Way <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-7348 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/03/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Charles R. Wilson <hr/> <b>Mailing Address</b> 114 Leighton Rd <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-2010 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/14/2023	\$50.00
<b>Aggregate year-to-date</b>		\$450.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Graham Slakie <hr/> <b>Mailing Address</b> 4706 Buckingham Dr <hr/> <b>City, State, Zip Code</b> Chattanooga, TN 37421-1108 <hr/> <b>Name of Employer (Required)</b> Regal Cinemas <hr/> <b>Occupation (Required)</b> Usher	05/07/2023	\$6.00
<b>Aggregate year-to-date</b>		\$200.60
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Denise Pilgrim <hr/> <b>Mailing Address</b> 108 Bellingham Dr <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-8524 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/27/2023	\$100.00
<b>Aggregate year-to-date</b>		\$367.90
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Cynthia Yap <hr/> <b>Mailing Address</b> 1955 Popps Ferry Rd <hr/> <b>City, State, Zip Code</b> Biloxi, MS 39532-2029 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/27/2023	\$25.00
<b>Aggregate year-to-date</b>		\$285.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Whitney Shuman <hr/> <b>Mailing Address</b> 1039 S Valley Rd <hr/> <b>City, State, Zip Code</b> Poplarville, MS 39470-6272 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Wm. F. Horne Jr <hr/> <b>Mailing Address</b> 32 Silver Leaf Ct <hr/> <b>City, State, Zip Code</b> Laurel, MS 39440-9002 <hr/> <b>Name of Employer (Required)</b> Wm. F. Horne & Co., PLLC <hr/> <b>Occupation (Required)</b> Managing Partner	05/10/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Charles Benvenuti <hr/> <b>Mailing Address</b> PO Box 2639 <hr/> <b>City, State, Zip Code</b> Bay Saint Louis, MS 39521-2639 <hr/> <b>Name of Employer (Required)</b> AVL CPA Firm, LLC <hr/> <b>Occupation (Required)</b> Accountant	05/31/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> C. Jackson Williams <hr/> <b>Mailing Address</b> PO Box 8325 <hr/> <b>City, State, Zip Code</b> University, MS 38677 <hr/> <b>Name of Employer (Required)</b> University of Mississippi <hr/> <b>Occupation (Required)</b> Professor	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Allan Benglen <hr/> <b>Mailing Address</b> 1725 Forrest Hill Dr <hr/> <b>City, State, Zip Code</b> Columbus, MS 39701-3530 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/25/2023	\$100.00
<b>Aggregate year-to-date</b>		\$300.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> George Higginbotham <hr/> <b>Mailing Address</b> 27 Fox Hollow Ln <hr/> <b>City, State, Zip Code</b> Laurel, MS 39443-4946 <hr/> <b>Name of Employer (Required)</b> South Central Regional Medical Center <hr/> <b>Occupation (Required)</b> Hospital Administrator	05/08/2023	\$250.00
<b>Aggregate year-to-date</b>		\$1,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jamie Amos <hr/> <b>Mailing Address</b> 2109 Acklen Ave <hr/> <b>City, State, Zip Code</b> Nashville, TN 37212-3501 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Film Producer	05/11/2023	\$5,000.00
<b>Aggregate year-to-date</b>		\$5,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Elaine Gelbard <hr/> <b>Mailing Address</b> 309 Philip Rd <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-2017 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Andrew Cunningham <hr/> <b>Mailing Address</b> 13462 MS Highway 388 <hr/> <b>City, State, Zip Code</b> Brooksville, MS 39739-9167 <hr/> <b>Name of Employer (Required)</b> Valley Farm <hr/> <b>Occupation (Required)</b> Farm Worker	05/30/2023	\$100.00
<b>Aggregate year-to-date</b>		\$400.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Alma Walls <b>Mailing Address</b> 3887 Kenton Dr <b>City, State, Zip Code</b> Southaven, MS 38672-7225 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Attorney	05/31/2023	\$25.00
<b>Aggregate year-to-date</b>		\$575.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kathryn York <b>Mailing Address</b> 315 Panola St <b>City, State, Zip Code</b> Water Valley, MS 38965-2408 <b>Name of Employer (Required)</b> Teach for America <b>Occupation (Required)</b> Nonprofit Administration	05/25/2023	\$250.00
<b>Aggregate year-to-date</b>		\$600.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Francis Gresock <b>Mailing Address</b> 609 Washington St <b>City, State, Zip Code</b> Natchez, MS 39120-3526 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/06/2023	\$100.00
<b>Aggregate year-to-date</b>		\$375.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> George Schimmel <b>Mailing Address</b> 3630 Kings Hwy <b>City, State, Zip Code</b> Jackson, MS 39216-3321 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/16/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$6,350.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Mack Lowery <hr/> <b>Mailing Address</b> 5055 Myers Rd <hr/> <b>City, State, Zip Code</b> Terry, MS 39170-9429 <hr/> <b>Name of Employer (Required)</b> Aamco Transmission <hr/> <b>Occupation (Required)</b> Business Owner	05/11/2023	\$25.00
<b>Aggregate year-to-date</b>		\$225.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Charles Buchanan <hr/> <b>Mailing Address</b> 155 Bryant St <hr/> <b>City, State, Zip Code</b> Palo Alto, CA 94301-1104 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/31/2023	\$100.00
<b>Aggregate year-to-date</b>		\$331.50
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Patrina R. Dace <hr/> <b>Mailing Address</b> 105 Sutter Dr <hr/> <b>City, State, Zip Code</b> Terry, MS 39170-5032 <hr/> <b>Name of Employer (Required)</b> Kaleidoscope of Learning <hr/> <b>Occupation (Required)</b> Business Owner	05/31/2023	\$50.00
<b>Aggregate year-to-date</b>		\$400.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Wanda A. Ikeda <hr/> <b>Mailing Address</b> 418 Cherokee Dr <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-2700 <hr/> <b>Name of Employer (Required)</b> Cardiac Associates of Northern MS <hr/> <b>Occupation (Required)</b> Registered Nurse	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Francis Gresock <b>Mailing Address</b> 609 Washington St <b>City, State, Zip Code</b> Natchez, MS 39120-3526 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/24/2023	\$25.00
<b>Aggregate year-to-date</b>		\$375.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Susan Hart <b>Mailing Address</b> PO Box 13913 <b>City, State, Zip Code</b> Jackson, MS 39236-3913 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/16/2023	\$250.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Mike Kerce <b>Mailing Address</b> 245 Hidden Creek Dr <b>City, State, Zip Code</b> Ridgeland, MS 39157-6601 <b>Name of Employer (Required)</b> Deposit Alternatives, LLC <b>Occupation (Required)</b> CEO	05/26/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Renasant Bank Employees Voluntary Pol. C <b>Mailing Address</b> PO Box 709 <b>City, State, Zip Code</b> Tupelo, MS 38802-0709 <b>Name of Employer (Required)</b>	05/08/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Kelley Walton Fenelon <hr/> <b>Mailing Address</b> 3511 Hawthorn Dr <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-3308 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/21/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Josh Bogen <hr/> <b>Mailing Address</b> 200 Washington Ave <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-2175 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/02/2023	\$1,500.00
<b>Aggregate year-to-date</b>		\$1,500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Joanne P. Morris <hr/> <b>Mailing Address</b> 801 Arlington St <hr/> <b>City, State, Zip Code</b> Jackson, MS 39202-1655 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/26/2023	\$250.00
<b>Aggregate year-to-date</b>		\$275.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Scott Elias <hr/> <b>Mailing Address</b> 1211 Van St SE <hr/> <b>City, State, Zip Code</b> Washington, DC 20003-4678 <hr/> <b>Name of Employer (Required)</b> CleanCapital <hr/> <b>Occupation (Required)</b> Solar Industry	05/17/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Y	
<b>Full Name</b> The Whalen Firm	05/19/2023	\$500.00
<b>Mailing Address</b> PO Box 23222		
<b>City, State, Zip Code</b> Jackson, MS 39225-3222		
<b>Name of Employer (Required)</b> _____		
<b>Occupation (Required)</b> _____	<b>Aggregate year-to-date</b>	\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Benjamin Griffith	05/11/2023	\$25.00
<b>Mailing Address</b> 162 Oxford Creek Dr		
<b>City, State, Zip Code</b> Oxford, MS 38655-2242		
<b>Name of Employer (Required)</b> Griffith Law Firm		
<b>Occupation (Required)</b> Attorney	<b>Aggregate year-to-date</b>	\$325.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kelly Coleman	05/31/2023	\$100.00
<b>Mailing Address</b> 66 Grandview Cir		
<b>City, State, Zip Code</b> Brandon, MS 39047-7398		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$300.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Brenda M. Eagles	05/03/2023	\$300.00
<b>Mailing Address</b> 116 Philip Rd		
<b>City, State, Zip Code</b> Oxford, MS 38655-2014		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Retired	<b>Aggregate year-to-date</b>	\$300.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Daniel Edwards <hr/> <b>Mailing Address</b> 103 S 21st Ave <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39401-6002 <hr/> <b>Name of Employer (Required)</b> Forrest General Hospital <hr/> <b>Occupation (Required)</b> Physician	05/23/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Brenda Plunkett <hr/> <b>Mailing Address</b> 138 N Ridge Dr <hr/> <b>City, State, Zip Code</b> Saltillo, MS 38866-5763 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/26/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,101.20
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Robert M. Pugh <hr/> <b>Mailing Address</b> 5924 Whitestone Rd <hr/> <b>City, State, Zip Code</b> Jackson, MS 39206-2515 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/17/2023	\$25.00
<b>Aggregate year-to-date</b>		\$350.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jimmy Walker <hr/> <b>Mailing Address</b> 750 Island Dr <hr/> <b>City, State, Zip Code</b> Memphis, TN 38103-0801 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/10/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Helen Boone	05/01/2023	\$59.75
<b>Mailing Address</b> 3726 Crane Blvd		
<b>City, State, Zip Code</b> Jackson, MS 39216-3605		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$647.45
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Miller Scott	05/21/2023	\$5.00
<b>Mailing Address</b> 111 E Pointe Dr		
<b>City, State, Zip Code</b> Starkville, MS 39759-3696		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$255.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> James L. Davis III	05/26/2023	\$1,500.00
<b>Mailing Address</b> PO Box 1839		
<b>City, State, Zip Code</b> Gulfport, MS 39502-1839		
<b>Name of Employer (Required)</b> Law Office of Jim Davis		
<b>Occupation (Required)</b> Attorney	<b>Aggregate year-to-date</b>	\$1,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> E. K. Pruitt	05/17/2023	\$50.00
<b>Mailing Address</b> 4217 Oakridge Dr		
<b>City, State, Zip Code</b> Jackson, MS 39216-3420		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$375.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> John Jopling <hr/> <b>Mailing Address</b> 276 Santini St <hr/> <b>City, State, Zip Code</b> Biloxi, MS 39530-2946 <hr/> <b>Name of Employer (Required)</b> MS Center for Justice <hr/> <b>Occupation (Required)</b> Attorney	05/08/2023	\$100.00
<b>Aggregate year-to-date</b>		\$350.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Maggie Sasser <hr/> <b>Mailing Address</b> 603 Edmund St <hr/> <b>City, State, Zip Code</b> Raleigh, NC 27604-2341 <hr/> <b>Name of Employer (Required)</b> Pine Gate Renewables <hr/> <b>Occupation (Required)</b> Vice President	05/18/2023	\$100.00
<b>Aggregate year-to-date</b>		\$3,903.74
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Tom Rhoden <hr/> <b>Mailing Address</b> 117 Park Circle Dr <hr/> <b>City, State, Zip Code</b> Flowood, MS 39232-8878 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/19/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$2,500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Elizabeth Bailey <hr/> <b>Mailing Address</b> 140 Chickasaw Dr <hr/> <b>City, State, Zip Code</b> West Point, MS 39773-3270 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$50.00
<b>Aggregate year-to-date</b>		\$1,050.00

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Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Franklin Services Inc <hr/> <b>Mailing Address</b> PO Box 3910 <hr/> <b>City, State, Zip Code</b> Tupelo, MS 38803-3910 <hr/> <b>Name of Employer (Required)</b> _____ <hr/> <b>Occupation (Required)</b> _____	05/01/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
<b>Full Name</b> Raleigh Byars <hr/> <b>Mailing Address</b> 48 County Road 229 <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-5800 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/31/2023	\$25.00
<b>Aggregate year-to-date</b>		\$215.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
<b>Full Name</b> Michael J. Stratton <hr/> <b>Mailing Address</b> 1717 N Downing St <hr/> <b>City, State, Zip Code</b> Denver, CO 80218-1056 <hr/> <b>Name of Employer (Required)</b> Brownstein Hyatt Farber Schreck <hr/> <b>Occupation (Required)</b> Senior Policy Director	05/02/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
<b>Full Name</b> Leslie Fye <hr/> <b>Mailing Address</b> 5439 Ennis Rd <hr/> <b>City, State, Zip Code</b> Starkville, MS 39759-4861 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Licensed Professional Counselor	05/13/2023	\$5.00
<b>Aggregate year-to-date</b>		\$545.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> James S. Fritz Jr <hr/> <b>Mailing Address</b> 1066 Avondale St <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-3512 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/26/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Leslie Fye <hr/> <b>Mailing Address</b> 5439 Ennis Rd <hr/> <b>City, State, Zip Code</b> Starkville, MS 39759-4861 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Licensed Professional Counselor	05/07/2023	\$50.00
<b>Aggregate year-to-date</b>		\$545.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Lisa Stevens <hr/> <b>Mailing Address</b> 101 Boone Dr <hr/> <b>City, State, Zip Code</b> Booneville, MS 38829-2609 <hr/> <b>Name of Employer (Required)</b> NE MS Community College <hr/> <b>Occupation (Required)</b> College Instructor	05/19/2023	\$25.00
<b>Aggregate year-to-date</b>		\$225.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Pam Mottley <hr/> <b>Mailing Address</b> 1810 Fuller St <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39401-7548 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/01/2023	\$25.00
<b>Aggregate year-to-date</b>		\$275.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Kathy Olsen	05/31/2023	\$10,000.00
<b>Mailing Address</b> 4416 Sunnybrook Dr		
<b>City, State, Zip Code</b> Nashville, TN 37205-3860		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Retired	<b>Aggregate year-to-date</b>	\$40,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Alison Anderson	05/02/2023	\$250.00
<b>Mailing Address</b> 203 County Road 181		
<b>City, State, Zip Code</b> Oxford, MS 38655-8476		
<b>Name of Employer (Required)</b> Impak Retail		
<b>Occupation (Required)</b> Sales	<b>Aggregate year-to-date</b>	\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> George Jordan	05/24/2023	\$3,000.00
<b>Mailing Address</b> 1087 Augusta Dr		
<b>City, State, Zip Code</b> Oxford, MS 38655-6187		
<b>Name of Employer (Required)</b> Oxford Answerphone Inc		
<b>Occupation (Required)</b> Business Owner	<b>Aggregate year-to-date</b>	\$4,501.00
<b>Source:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Hankins, Inc.	05/26/2023	\$1,000.00
<b>Mailing Address</b> PO Box 517		
<b>City, State, Zip Code</b> Ripley, MS 38663-0517		
<b>Name of Employer (Required)</b>		
<b>Occupation (Required)</b>	<b>Aggregate year-to-date</b>	\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Margaret Thomas <b>Mailing Address</b> 153 Timberton Dr <b>City, State, Zip Code</b> Hattiesburg, MS 39401-8209 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/27/2023	\$250.00
<b>Aggregate year-to-date</b>		\$312.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jeff Richardson <b>Mailing Address</b> 115 Bristol Ln <b>City, State, Zip Code</b> Madison, MS 39110-5021 <b>Name of Employer (Required)</b> Ontario Power Generation <b>Occupation (Required)</b> Executive	05/30/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Thomas Peddy <b>Mailing Address</b> 3230 Richfield Ln <b>City, State, Zip Code</b> Phoenix, MD 21131-2016 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Real Estate	05/04/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Felicia Brown-Williams <b>Mailing Address</b> 4010 Council Cir <b>City, State, Zip Code</b> Jackson, MS 39206-5813 <b>Name of Employer (Required)</b> David & Lucile Packard Foundation <b>Occupation (Required)</b> Advisor	05/14/2023	\$50.00
<b>Aggregate year-to-date</b>		\$350.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> James Hull <b>Mailing Address</b> 1008 Coolidge St <b>City, State, Zip Code</b> Tupelo, MS 38801-6231 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Journslist	05/28/2023	\$100.00
<b>Aggregate year-to-date</b>		\$220.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Russell Smith <b>Mailing Address</b> 158 Arlington Rd <b>City, State, Zip Code</b> Beaumont, MS 39423-2617 <b>Name of Employer (Required)</b> Bentley Systems, Inc. <b>Occupation (Required)</b> Software Development Manager	05/29/2023	\$100.00
<b>Aggregate year-to-date</b>		\$341.40
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Dorothy Roberts <b>Mailing Address</b> 252 Handy Ln <b>City, State, Zip Code</b> Pass Christian, MS 39571-4426 <b>Name of Employer (Required)</b> Robin's Nest In The Pass <b>Occupation (Required)</b> Business Owner	05/30/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jane Walman <b>Mailing Address</b> 8021 Lake Cv <b>City, State, Zip Code</b> Oxford, MS 38655-5997 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/31/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Robert Latham <hr/> <b>Mailing Address</b> 2090 Jefferson Pkwy <hr/> <b>City, State, Zip Code</b> Hernando, MS 38632-5905 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/02/2023	\$100.00
<b>Aggregate year-to-date</b>		\$650.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Lauren Leslie <hr/> <b>Mailing Address</b> 328 S Main St <hr/> <b>City, State, Zip Code</b> Grenada, MS 38901-3215 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/02/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Richard Raspet <hr/> <b>Mailing Address</b> PO Box 2595 <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4900 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/02/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$3,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Sneed <hr/> <b>Mailing Address</b> 4303 Ambrose Ave <hr/> <b>City, State, Zip Code</b> Los Angeles, CA 90027-2112 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Actor	05/04/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Stephen Farrow <hr/> <b>Mailing Address</b> 177 Kenmore Ave <hr/> <b>City, State, Zip Code</b> Biloxi, MS 39531-4704 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/05/2023	\$100.00
<b>Aggregate year-to-date</b>		\$400.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Tray Hairston <hr/> <b>Mailing Address</b> 1020 Highland Colony Pkwy <hr/> <b>City, State, Zip Code</b> Ridgeland, MS 39157-2139 <hr/> <b>Name of Employer (Required)</b> Butler Snow LLP <hr/> <b>Occupation (Required)</b> Attorney	05/15/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jean Fenwick <hr/> <b>Mailing Address</b> 208 S Madison St <hr/> <b>City, State, Zip Code</b> Kosciusko, MS 39090-3946 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$100.00
<b>Aggregate year-to-date</b>		\$950.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> James W. Manuel <hr/> <b>Mailing Address</b> 827 Beaumont Dr <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-7494 <hr/> <b>Name of Employer (Required)</b> Bradley Arant <hr/> <b>Occupation (Required)</b> Attorney	05/31/2023	\$50.00
<b>Aggregate year-to-date</b>		\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Dennis Truax <hr/> <b>Mailing Address</b> 913 Southgate Dr <hr/> <b>City, State, Zip Code</b> Starkville, MS 39759-9434 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Engineer	05/31/2023	\$25.00
<b>Aggregate year-to-date</b>		\$850.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> S. Allan Alexander <hr/> <b>Mailing Address</b> 526 N 11th St <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-3108 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Bill Simmons <hr/> <b>Mailing Address</b> 907 Lincoln Ave <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4327 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/03/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Tiffany Bohlin <hr/> <b>Mailing Address</b> 100 Tower Dr <hr/> <b>City, State, Zip Code</b> Edgewater, NJ 07020-2238 <hr/> <b>Name of Employer (Required)</b> Muller Bohlin <hr/> <b>Occupation (Required)</b> Consulting	05/25/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$2,500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Barbara Casey <hr/> <b>Mailing Address</b> 229 Peachtree Hills Ave NE <hr/> <b>City, State, Zip Code</b> Atlanta, GA 30305-4413 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/06/2023	\$100.00
<b>Aggregate year-to-date</b>		\$325.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Robert Ward <hr/> <b>Mailing Address</b> 1026 16th St NW <hr/> <b>City, State, Zip Code</b> Washington, DC 20036-5709 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/16/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Machinists Non-Partisan Political League <hr/> <b>Mailing Address</b> 9000 Machinists Pl <hr/> <b>City, State, Zip Code</b> Upper Marlboro, MD 20772-2675 <hr/> <b>Name of Employer (Required)</b> _____ <hr/> <b>Occupation (Required)</b> _____	05/10/2023	\$10,000.00
<b>Aggregate year-to-date</b>		\$10,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Karla Loeb <hr/> <b>Mailing Address</b> 648 Orleans Pl NE <hr/> <b>City, State, Zip Code</b> Washington, DC 20002-3402 <hr/> <b>Name of Employer (Required)</b> Arcadia <hr/> <b>Occupation (Required)</b> Energy	05/23/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Stacy Evans <hr/> <b>Mailing Address</b> 4825 County Road 23 <hr/> <b>City, State, Zip Code</b> Louin, MS 39338-3367 <hr/> <b>Name of Employer (Required)</b> SE Land Management LLC <hr/> <b>Occupation (Required)</b> Business Owner	05/04/2023	\$250.00
<b>Aggregate year-to-date</b>		\$322.40
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> David Morse <hr/> <b>Mailing Address</b> 2046 Meadowbrook Rd <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-6527 <hr/> <b>Name of Employer (Required)</b> Coker and Palmer <hr/> <b>Occupation (Required)</b> Financial Planner	05/16/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Linda Foshee <hr/> <b>Mailing Address</b> Not Employed <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39402 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$10.00
<b>Aggregate year-to-date</b>		\$293.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Brenda J. West <hr/> <b>Mailing Address</b> 201 Park Dr <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-2816 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$400.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Y	
<b>Full Name</b> Ready Law Firm	05/22/2023	\$1,000.00
<b>Mailing Address</b> 2103 5th St		
<b>City, State, Zip Code</b> Meridian, MS 39301-5131		
<b>Name of Employer (Required)</b> _____		
<b>Occupation (Required)</b> _____	<b>Aggregate year-to-date</b>	\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Virden Jones	05/22/2023	\$500.00
<b>Mailing Address</b> 686 Hazelton Dr		
<b>City, State, Zip Code</b> Madison, MS 39110-7332		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Retired	<b>Aggregate year-to-date</b>	\$1,698.90
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Cherie Labat	05/15/2023	\$250.00
<b>Mailing Address</b> 8218 Ridgewood Dr		
<b>City, State, Zip Code</b> Kiln, MS 39556-8474		
<b>Name of Employer (Required)</b> University of Southern Mississippi		
<b>Occupation (Required)</b> Educator	<b>Aggregate year-to-date</b>	\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> George S. Luter	05/26/2023	\$250.00
<b>Mailing Address</b> PO Box 3656		
<b>City, State, Zip Code</b> Jackson, MS 39207-3656		
<b>Name of Employer (Required)</b> Self Employed		
<b>Occupation (Required)</b> Attorney	<b>Aggregate year-to-date</b>	\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Luther Munford <b>Mailing Address</b> 810 Gillespie St <b>City, State, Zip Code</b> Jackson, MS 39202-1714 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/09/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kelly J. Jacobs <b>Mailing Address</b> 3985 Robertson Gin Rd <b>City, State, Zip Code</b> Hernando, MS 38632-8227 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/03/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Joanna Shows <b>Mailing Address</b> 1388 LAMPTON HILLTOP Rd <b>City, State, Zip Code</b> Columbia, MS 39429 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/24/2023	\$250.00
<b>Aggregate year-to-date</b>		\$325.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> David Clark <b>Mailing Address</b> 110 Olympia Flds <b>City, State, Zip Code</b> Jackson, MS 39211-2509 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/05/2023	\$500.00
<b>Aggregate year-to-date</b>		\$10,003.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Leslie-Burl McLemore <hr/> <b>Mailing Address</b> 7900 Michael Dr <hr/> <b>City, State, Zip Code</b> Lake Cormorant, MS 38641-8211 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/26/2023	\$200.00
<b>Aggregate year-to-date</b>		\$450.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Randy Hall <hr/> <b>Mailing Address</b> 104 Peninsula Dr <hr/> <b>City, State, Zip Code</b> Carriere, MS 39426-7738 <hr/> <b>Name of Employer (Required)</b> Trace7 Services, LLC <hr/> <b>Occupation (Required)</b> Defense Management	05/17/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Joel L. Fleishman <hr/> <b>Mailing Address</b> 210 Science Dr <hr/> <b>City, State, Zip Code</b> Durham, NC 27708-9985 <hr/> <b>Name of Employer (Required)</b> Duke University <hr/> <b>Occupation (Required)</b> Professor	05/10/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Elvin Sunds <hr/> <b>Mailing Address</b> 4000 W Tidewater Ln <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-8942 <hr/> <b>Name of Employer (Required)</b> St. Francis of Assisi Church <hr/> <b>Occupation (Required)</b> Clergy	05/31/2023	\$10.00
<b>Aggregate year-to-date</b>		\$235.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Preston E. Sullivan <hr/> <b>Mailing Address</b> 1601 County Road 410 <hr/> <b>City, State, Zip Code</b> Okolona, MS 38860-9330 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/26/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> James Hull <hr/> <b>Mailing Address</b> 1008 Coolidge St <hr/> <b>City, State, Zip Code</b> Tupelo, MS 38801-6231 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Jounslist	05/07/2023	\$10.00
<b>Aggregate year-to-date</b>		\$220.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Elise Gomez-Sanchez <hr/> <b>Mailing Address</b> 536 Countryside Pl <hr/> <b>City, State, Zip Code</b> Madison, MS 39110-9301 <hr/> <b>Name of Employer (Required)</b> University of Mississippi Medical Center <hr/> <b>Occupation (Required)</b> Professor	05/18/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$2,000.00
<b>Source:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Fred Taylor Company, Inc. <hr/> <b>Mailing Address</b> PO Box 3948 <hr/> <b>City, State, Zip Code</b> Albany, GA 31706-3948 <hr/> <b>Name of Employer (Required)</b> _____	05/01/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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 Secretary of State

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Deval Patrick <hr/> <b>Mailing Address</b> 245 Furnace Rd <hr/> <b>City, State, Zip Code</b> Richmond, MA 01254-5010 <hr/> <b>Name of Employer (Required)</b> Harvard Kennedy School <hr/> <b>Occupation (Required)</b> Professor	05/31/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$2,500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Tammy Taylor-Bufford <hr/> <b>Mailing Address</b> 335 Hotophia Hill Dr <hr/> <b>City, State, Zip Code</b> Batesville, MS 38606-5724 <hr/> <b>Name of Employer (Required)</b> Delta Gastroenterology <hr/> <b>Occupation (Required)</b> Nurse Practitioner	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$323.40
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Marianne R. Wynn <hr/> <b>Mailing Address</b> 4009 Pinewood Dr <hr/> <b>City, State, Zip Code</b> Jackson, MS 39211-6447 <hr/> <b>Name of Employer (Required)</b> Pearl River Glass Studio <hr/> <b>Occupation (Required)</b> Craftswoman	05/04/2023	\$250.00
<b>Aggregate year-to-date</b>		\$364.60
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Mary Coleman <hr/> <b>Mailing Address</b> 1338 N El Paso St <hr/> <b>City, State, Zip Code</b> Colorado Spring, CO 80903-2524 <hr/> <b>Name of Employer (Required)</b> Oak Street Health <hr/> <b>Occupation (Required)</b> Healthcare Administrator	05/04/2023	\$53.40
<b>Aggregate year-to-date</b>		\$353.40

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Carolyn Goren <hr/> <b>Mailing Address</b> PO Box 7189 <hr/> <b>City, State, Zip Code</b> Missoula, MT 59807-7189 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/05/2023	\$35.00
<b>Aggregate year-to-date</b>		\$280.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> James Keeton <hr/> <b>Mailing Address</b> 1333 Belvoir Pl <hr/> <b>City, State, Zip Code</b> Jackson, MS 39202-1208 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Photographer	05/26/2023	\$500.00
<b>Aggregate year-to-date</b>		\$750.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Melissa Patterson <hr/> <b>Mailing Address</b> 725 N Old Canton Rd <hr/> <b>City, State, Zip Code</b> Canton, MS 39046-8844 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/18/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> James Raymond <hr/> <b>Mailing Address</b> 3915 Saint Charles Ave <hr/> <b>City, State, Zip Code</b> New Orleans, LA 70115-4659 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/31/2023	\$25.00
<b>Aggregate year-to-date</b>		\$775.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Nancy Loftus <hr/> <b>Mailing Address</b> 20329 Longview Rd <hr/> <b>City, State, Zip Code</b> Long Beach, MS 39560-9026 <hr/> <b>Name of Employer (Required)</b> Catholic Charities of Southern Mississippi <hr/> <b>Occupation (Required)</b> Social Worker	05/31/2023	\$100.00
<b>Aggregate year-to-date</b>		\$576.40
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Cornelis Gispen <hr/> <b>Mailing Address</b> 1112 S 11th St <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-4610 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/02/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,050.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Roy Campbell <hr/> <b>Mailing Address</b> 835 Avondale St <hr/> <b>City, State, Zip Code</b> Jackson, MS 39216-3316 <hr/> <b>Name of Employer (Required)</b> Bradley Arant Boult Cummings LLP <hr/> <b>Occupation (Required)</b> Attorney	05/24/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Carolyn Goren <hr/> <b>Mailing Address</b> PO Box 7189 <hr/> <b>City, State, Zip Code</b> Missoula, MT 59807-7189 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/16/2023	\$5.00
<b>Aggregate year-to-date</b>		\$280.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Y	
<b>Full Name</b> Landfair Solutions LLC	05/26/2023	\$1,000.00
<b>Mailing Address</b> 6035 Waverly Dr		
<b>City, State, Zip Code</b> Jackson, MS 39206-2508		
<b>Name of Employer (Required)</b> _____		
<b>Occupation (Required)</b> _____	<b>Aggregate year-to-date</b>	\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Bradley	05/30/2023	\$500.00
<b>Mailing Address</b> 107 Philip Rd		
<b>City, State, Zip Code</b> Oxford, MS 38655-2013		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$6,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jerry Smith	05/30/2023	\$50.00
<b>Mailing Address</b> 136 St Regis Dr		
<b>City, State, Zip Code</b> Madison, MS 39110-7798		
<b>Name of Employer (Required)</b> Mississippi Baptist Medical Center		
<b>Occupation (Required)</b> Pharmacist	<b>Aggregate year-to-date</b>	\$300.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Barbara Rankin	05/11/2023	\$50.00
<b>Mailing Address</b> PO Box 219		
<b>City, State, Zip Code</b> Braxton, MS 39044-0219		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$475.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Margaret Thomas <b>Mailing Address</b> 153 Timberton Dr <b>City, State, Zip Code</b> Hattiesburg, MS 39401-8209 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/31/2023	\$10.00
<b>Aggregate year-to-date</b>		\$312.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> William Painter <b>Mailing Address</b> 203 Eastbrooke St <b>City, State, Zip Code</b> Jackson, MS 39216-4716 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Attorney	05/04/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> David Rushing <b>Mailing Address</b> 102 N Sunflower Ave <b>City, State, Zip Code</b> Indianola, MS 38751-2552 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/14/2023	\$100.00
<b>Aggregate year-to-date</b>		\$314.60
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> William Sumerford <b>Mailing Address</b> 60022 State Line Rd <b>City, State, Zip Code</b> Smithville, MS 38870-9426 <b>Name of Employer (Required)</b> Tronox <b>Occupation (Required)</b> Engineer	05/07/2023	\$1,000.00
<b>Aggregate year-to-date</b>		\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> George Patton <b>Mailing Address</b> 5102 Canton Heights Dr <b>City, State, Zip Code</b> Jackson, MS 39211-4515 <b>Name of Employer (Required)</b> Franciscan Missionaries of Our Lady Health System <b>Occupation (Required)</b> Physician	05/30/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
<b>Full Name</b> TBA of NJ LLC <b>Mailing Address</b> 115 Broadway <b>City, State, Zip Code</b> New York, NY 10006-1619 <b>Name of Employer (Required)</b> Tonio Burgos & Associates <b>Occupation (Required)</b> CEO	05/30/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$2,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
<b>Full Name</b> John Jopling <b>Mailing Address</b> 276 Santini St <b>City, State, Zip Code</b> Biloxi, MS 39530-2946 <b>Name of Employer (Required)</b> MS Center for Justice <b>Occupation (Required)</b> Attorney	05/31/2023	\$250.00
<b>Aggregate year-to-date</b>		\$350.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
<b>Full Name</b> Robert W. Barnard Jr <b>Mailing Address</b> 104 Woodland Hills Dr <b>City, State, Zip Code</b> Oxford, MS 38655-9700 <b>Name of Employer (Required)</b> University of Mississippi <b>Occupation (Required)</b> Professor	05/02/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Wilson Golden	05/12/2023	\$50.00
<b>Mailing Address</b> 3136 White Magnolia Chase SW		
<b>City, State, Zip Code</b> Gainesville, GA 30504-5587		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$685.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Cheryl Goggin	05/22/2023	\$55.10
<b>Mailing Address</b> 402 Mandalay Dr		
<b>City, State, Zip Code</b> Hattiesburg, MS 39402-2039		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Retired	<b>Aggregate year-to-date</b>	\$205.10
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Laura Bailey	05/03/2023	\$100.00
<b>Mailing Address</b> 2356 East St		
<b>City, State, Zip Code</b> Hernando, MS 38632-1801		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$300.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Nan Tarlton	05/25/2023	\$100.00
<b>Mailing Address</b> 210 Meadowlane Dr		
<b>City, State, Zip Code</b> Madison, MS 39110-9611		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$375.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Jesse White <hr/> <b>Mailing Address</b> 38 Mount Bolus Rd <hr/> <b>City, State, Zip Code</b> Chapel Hill, NC 27514-2635 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/09/2023	\$250.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Theresa Steinberger <hr/> <b>Mailing Address</b> 909 Eastwood St <hr/> <b>City, State, Zip Code</b> Pascagoula, MS 39567-7549 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/10/2023	\$25.00
<b>Aggregate year-to-date</b>		\$275.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Mary A. Alford <hr/> <b>Mailing Address</b> 2182 Attala Road 1162 <hr/> <b>City, State, Zip Code</b> Kosciusko, MS 39090-6916 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/11/2023	\$100.00
<b>Aggregate year-to-date</b>		\$700.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Karen Hinton <hr/> <b>Mailing Address</b> 817 Chartres St <hr/> <b>City, State, Zip Code</b> New Orleans, LA 70116-3206 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Writer	05/05/2023	\$100.00
<b>Aggregate year-to-date</b>		\$1,950.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Michael Moore <hr/> <b>Mailing Address</b> 104 Hidden Oaks Cv <hr/> <b>City, State, Zip Code</b> Ridgeland, MS 39157-7703 <hr/> <b>Name of Employer (Required)</b> Self Employed <hr/> <b>Occupation (Required)</b> Attorney	05/15/2023	\$2,500.00
<b>Aggregate year-to-date</b>		\$2,500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Linda Foshee <hr/> <b>Mailing Address</b> Not Employed <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39402 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/20/2023	\$10.00
<b>Aggregate year-to-date</b>		\$293.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Robert Latham <hr/> <b>Mailing Address</b> 2090 Jefferson Pkwy <hr/> <b>City, State, Zip Code</b> Hernando, MS 38632-5905 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/30/2023	\$100.00
<b>Aggregate year-to-date</b>		\$650.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kenneth Groue <hr/> <b>Mailing Address</b> 128 Seaside Dr <hr/> <b>City, State, Zip Code</b> Ocean Springs, MS 39564-5145 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/21/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Margaret Wylde <b>Mailing Address</b> 38 County Road 452 <b>City, State, Zip Code</b> Water Valley, MS 38965-3773 <b>Name of Employer (Required)</b> Promatura Group LLC <b>Occupation (Required)</b> Business Owner	05/02/2023	\$1,500.00
<b>Aggregate year-to-date</b>		\$1,500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> John T. Edge <b>Mailing Address</b> 913 S 11th St <b>City, State, Zip Code</b> Oxford, MS 38655-4315 <b>Name of Employer (Required)</b> University of Mississippi <b>Occupation (Required)</b> Teacher	05/03/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Michael Ubertini <b>Mailing Address</b> 11 Helen Ln <b>City, State, Zip Code</b> Walpole, MA 02081-2046 <b>Name of Employer (Required)</b> Long and Foster <b>Occupation (Required)</b> Recruiter	05/13/2023	\$5.00
<b>Aggregate year-to-date</b>		\$265.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Daniel Pair <b>Mailing Address</b> 968 Road 261 <b>City, State, Zip Code</b> Tupelo, MS 38801-7600 <b>Name of Employer (Required)</b> SSA <b>Occupation (Required)</b> Claims Specialist	05/25/2023	\$50.00
<b>Aggregate year-to-date</b>		\$300.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Susan Anand <b>Mailing Address</b> 251 Highland Meadow Rd <b>City, State, Zip Code</b> Flora, MS 39071-9513 <b>Name of Employer (Required)</b> University of Mississippi Medical Center <b>Occupation (Required)</b> Art Therapist	05/16/2023	\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Aggregate year-to-date</b> \$1,000.00
<b>Full Name</b> Staci Morgan <b>Mailing Address</b> 6946 Weir Panhandle Rd <b>City, State, Zip Code</b> Weir, MS 39772 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Conference Director	05/07/2023	\$100.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Aggregate year-to-date</b> \$868.40
<b>Full Name</b> Michael Collins <b>Mailing Address</b> 1826 Ray St <b>City, State, Zip Code</b> Ocean Springs, MS 39564-2930 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/31/2023	\$100.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Aggregate year-to-date</b> \$300.00
<b>Full Name</b> J. Cal Mayo <b>Mailing Address</b> PO Box 1456 <b>City, State, Zip Code</b> Oxford, MS 38655-1456 <b>Name of Employer (Required)</b> Mayo Mallette PLLC <b>Occupation (Required)</b> Attorney	05/02/2023	\$1,000.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Aggregate year-to-date</b> \$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Tom Starrs <b>Mailing Address</b> 5808 SW 41st Ave <b>City, State, Zip Code</b> Portland, OR 97221-3407 <b>Name of Employer (Required)</b> EDP Renewables <b>Occupation (Required)</b> Renewable Energy Executive	05/25/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Piper Miller <b>Mailing Address</b> 46 Piercy St <b>City, State, Zip Code</b> Asheville, NC 28806-4466 <b>Name of Employer (Required)</b> Pine Gate Renewables <b>Occupation (Required)</b> Vice President	05/16/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Richard L. Cooper <b>Mailing Address</b> 424 Turnberry Ct <b>City, State, Zip Code</b> Oxford, MS 38655-2571 <b>Name of Employer (Required)</b> Thrifty Building Supply LLC <b>Occupation (Required)</b> Business Owner	05/02/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Pine Gate Renewables, LLC <b>Mailing Address</b> 130 Roberts St <b>City, State, Zip Code</b> Asheville, NC 28801-3129 <b>Name of Employer (Required)</b>	05/22/2023	\$10,000.00
<b>Aggregate year-to-date</b>		\$10,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Kris Graham	05/22/2023	\$500.00
<b>Mailing Address</b> PO Box 578		
<b>City, State, Zip Code</b> Ridgeland, MS 39158-0578		
<b>Name of Employer (Required)</b> Self Employed		
<b>Occupation (Required)</b> Attorney		
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Aggregate year-to-date</b>	\$500.00
<b>Full Name</b> Kay Guiles	05/05/2023	\$500.00
<b>Mailing Address</b> 199 Thomas Creek Rd		
<b>City, State, Zip Code</b> Petal, MS 39465-8137		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Retired		
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Aggregate year-to-date</b>	\$500.00
<b>Full Name</b> Linda Foshee	05/25/2023	\$3.00
<b>Mailing Address</b> Not Employed		
<b>City, State, Zip Code</b> Hattiesburg, MS 39402		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed		
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Aggregate year-to-date</b>	\$293.00
<b>Full Name</b> Jayne Buttross	05/26/2023	\$250.00
<b>Mailing Address</b> 329 E Mayes St		
<b>City, State, Zip Code</b> Jackson, MS 39206-5718		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed		
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Aggregate year-to-date</b>	\$600.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Ann J. Abadie <b>Mailing Address</b> 2238 Lee Loop <b>City, State, Zip Code</b> Oxford, MS 38655-4920 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/30/2023	\$25.00
<b>Aggregate year-to-date</b>		\$585.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Charles Buchanan <b>Mailing Address</b> 155 Bryant St <b>City, State, Zip Code</b> Palo Alto, CA 94301-1104 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/11/2023	\$25.00
<b>Aggregate year-to-date</b>		\$331.50
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Suzanne Robinson <b>Mailing Address</b> 206 Wood St <b>City, State, Zip Code</b> Water Valley, MS 38965-2603 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/21/2023	\$5.00
<b>Aggregate year-to-date</b>		\$425.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Roger Mcdowell <b>Mailing Address</b> 1904 Fuller St <b>City, State, Zip Code</b> Hattiesburg, MS 39401-7544 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/24/2023	\$250.00
<b>Aggregate year-to-date</b>		\$1,339.25



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Tim Lawrence <hr/> <b>Mailing Address</b> 804 Woodland Pne <hr/> <b>City, State, Zip Code</b> Flowood, MS 39232-8996 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/26/2023	\$10.00
<b>Aggregate year-to-date</b>		\$223.60
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Kirk Lewis <hr/> <b>Mailing Address</b> 1964 Northshire Dr <hr/> <b>City, State, Zip Code</b> Tupelo, MS 38804-7022 <hr/> <b>Name of Employer (Required)</b> Blue Springs Metals, LLC <hr/> <b>Occupation (Required)</b> Business Owner	05/17/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Andrew Dickson <hr/> <b>Mailing Address</b> 807 Sth 19Th Ave <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39401 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/08/2023	\$200.00
<b>Aggregate year-to-date</b>		\$900.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Charles Buchanan <hr/> <b>Mailing Address</b> 155 Bryant St <hr/> <b>City, State, Zip Code</b> Palo Alto, CA 94301-1104 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/28/2023	\$31.79
<b>Aggregate year-to-date</b>		\$331.50

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> M. Deborrah Hyde <b>Mailing Address</b> 19 Summer Trace Blvd <b>City, State, Zip Code</b> Laurel, MS 39440-2510 <b>Name of Employer (Required)</b> Self Employed <b>Occupation (Required)</b> Physician	05/10/2023	\$250.00
<b>Aggregate year-to-date</b>		\$250.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Duncan Gray III <b>Mailing Address</b> 110 Philip Rd <b>City, State, Zip Code</b> Oxford, MS 38655-2014 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Retired	05/31/2023	\$200.00
<b>Aggregate year-to-date</b>		\$300.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Linda N. Mabry <b>Mailing Address</b> 10608 Maple St <b>City, State, Zip Code</b> Vancleave, MS 39565-8339 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/22/2023	\$500.00
<b>Aggregate year-to-date</b>		\$600.00
<b>Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each receipt this period</b>
<b>Full Name</b> Raburn Coln <b>Mailing Address</b> 288 County Road 218 <b>City, State, Zip Code</b> Corinth, MS 38834-7531 <b>Name of Employer (Required)</b> Not Employed <b>Occupation (Required)</b> Not Employed	05/29/2023	\$50.00
<b>Aggregate year-to-date</b>		\$225.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Cheryl Goggin <hr/> <b>Mailing Address</b> 402 Mandalay Dr <hr/> <b>City, State, Zip Code</b> Hattiesburg, MS 39402-2039 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/31/2023	\$50.00
<b>Aggregate year-to-date</b>		\$205.10
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Jack Garner <hr/> <b>Mailing Address</b> 408 Vivian St <hr/> <b>City, State, Zip Code</b> Oxford, MS 38655-2724 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Retired	05/02/2023	\$500.00
<b>Aggregate year-to-date</b>		\$500.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Carolyn Goren <hr/> <b>Mailing Address</b> PO Box 7189 <hr/> <b>City, State, Zip Code</b> Missoula, MT 59807-7189 <hr/> <b>Name of Employer (Required)</b> Not Employed <hr/> <b>Occupation (Required)</b> Not Employed	05/12/2023	\$25.00
<b>Aggregate year-to-date</b>		\$280.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Peyton D. Prospere <hr/> <b>Mailing Address</b> 1336 Saint Mary St <hr/> <b>City, State, Zip Code</b> Jackson, MS 39202-1848 <hr/> <b>Name of Employer (Required)</b> Watkins & Eager PLLC <hr/> <b>Occupation (Required)</b> Attorney	05/26/2023	\$500.00
<b>Aggregate year-to-date</b>		\$1,500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> Heath Randall	05/19/2023	\$25.00
<b>Mailing Address</b> 2248 Summit Dr		
<b>City, State, Zip Code</b> Arnold, MO 63010-2254		
<b>Name of Employer (Required)</b> Frontline Managed Services		
<b>Occupation (Required)</b> IT Professional	<b>Aggregate year-to-date</b>	\$575.00
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Sarah Bentley	05/04/2023	\$179.75
<b>Mailing Address</b> 144 Glenway Dr		
<b>City, State, Zip Code</b> Jackson, MS 39216-4101		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$519.50
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> John Bradley	05/25/2023	\$500.00
<b>Mailing Address</b> 107 Philip Rd		
<b>City, State, Zip Code</b> Oxford, MS 38655-2013		
<b>Name of Employer (Required)</b> Not Employed		
<b>Occupation (Required)</b> Not Employed	<b>Aggregate year-to-date</b>	\$6,500.00
<b>Source:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
<b>Full Name</b> Sandy Jones Contractor	05/26/2023	\$1,000.00
<b>Mailing Address</b> 34 Yippie Calle Rd		
<b>City, State, Zip Code</b> Williamsburg, NM 87942-9032		
<b>Name of Employer (Required)</b>		
<b>Occupation (Required)</b>	<b>Aggregate year-to-date</b>	\$1,000.00

Name of Candidate or Committee Brandon Presley  
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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Y	
<b>Full Name</b> John David Barksdale	05/28/2023	\$2,500.00
<b>Mailing Address</b> 1331 3rd St		
<b>City, State, Zip Code</b> New Orleans, LA 70130-5743		
<b>Name of Employer (Required)</b> Alluvian Capital		
<b>Occupation (Required)</b> Investor	<b>Aggregate year-to-date</b>	\$2,500.00

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**Secretary of State**

## ITEMIZED RECEIPTS - IN-KIND CONTRIBUTIONS

<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	
<b>Full Name</b> Jerry Wigginton	05/01/2023
<b>Mailing Address</b> 2005 W Main St	<b>Estimated Amount of In-Kind Contribution*</b>
<b>City, State, Zip Code</b> Tupelo, MS 38801-3214	
<b>Name of Employer (Required)</b> WC Services LLC	
<b>Occupation (Required)</b> Business Owner	
<b>In-Kind Contribution:</b> Office Space	
<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date (Mo., Day, Year)</b>
<b>Full Name</b> Maggie Sasser	05/23/2023
<b>Mailing Address</b> 603 Edmund St	<b>Estimated Amount of In-Kind Contribution*</b>
<b>City, State, Zip Code</b> Raleigh, NC 27604-2341	
<b>Name of Employer (Required)</b> Pine Gate Renewables	
<b>Occupation (Required)</b> Vice President	
<b>In-Kind Contribution:</b> Event Catering	

\* Do not add estimated amount of in-kind contribution into total amount of contributions on Report of Receipts and Disbursements.

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## ITEMIZED RECEIPTS - IN-KIND CONTRIBUTION

<b>Source:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	
<b>Full Name</b> Jason Lee Shelton	05/18/2023
<b>Mailing Address</b> 807 Indian Oaks Dr	<b>Estimated Amount of In-Kind Contribution*</b>
<b>City, State, Zip Code</b> Saltillo, MS 38866-9404	
<b>Name of Employer (Required)</b> General Services Administration	\$314.64
<b>Occupation (Required)</b> Regional Administrator	
<b>In-Kind Contribution:</b> Travel	

\* Do not add estimated amount of in-kind contribution into total amount of contributions on Report of Receipts and Disbursements.

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## ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Bumperactive	05/24/2023	\$1,132.63
<b>Mailing Address</b>		
5907 Burnet Rd		
<b>City, State, Zip Code</b>		
Austin, TX 78757-3224		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$6,290.89
Store Overhead		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
Aristotle, Inc.	05/17/2023	\$500.00
<b>Mailing Address</b>		
205 Pennsylvania Ave SE		
<b>City, State, Zip Code</b>		
Washington, DC 20003-1164		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$2,500.00
Database Services		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
Battleaxe Digital	05/08/2023	\$7,751.14
<b>Mailing Address</b>		
1405 Florida Ave NW		
<b>City, State, Zip Code</b>		
Washington, DC 20009-5801		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$56,660.92
Digital Consulting		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
NGP VAN	05/04/2023	\$1,783.44
<b>Mailing Address</b>		
1101 15th St NW		
<b>City, State, Zip Code</b>		
Washington, DC 20005-5006		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$8,441.88
Database Services		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
Jackie Courson	05/15/2023	\$250.00
<b>Mailing Address</b>		
63 Hidden Crk		
<b>City, State, Zip Code</b>		
Pontotoc, MS 38863-7514		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$250.00
Contribution Refund		



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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stripe	05/08/2023	\$15.66
<b>Mailing Address</b> 3180 18th St		
<b>City, State, Zip Code</b> San Francisco, CA 94110-2042		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing	<b>Aggregate year-to-date</b>	\$453.80
Walmart	05/19/2023	\$25.74
<b>Mailing Address</b> 702 SW 8th St		
<b>City, State, Zip Code</b> Bentonville, AR 72716-6209		
<b>Purpose of Disbursement (Optional)</b> Office Supplies	<b>Aggregate year-to-date</b>	\$286.35
Fedex	05/05/2023	\$108.86
<b>Mailing Address</b> 3640 Hacks Cross Rd		
<b>City, State, Zip Code</b> Memphis, TN 38125-8800		
<b>Purpose of Disbursement (Optional)</b> Shipping & Postage	<b>Aggregate year-to-date</b>	\$350.78
Battleaxe Digital	05/19/2023	\$411.13
<b>Mailing Address</b> 1405 Florida Ave NW		
<b>City, State, Zip Code</b> Washington, DC 20009-5801		
<b>Purpose of Disbursement (Optional)</b> Digital Consulting	<b>Aggregate year-to-date</b>	\$56,660.92
Benjamin Hunt	05/01/2023	\$2,167.10
<b>Mailing Address</b> 510 S Broadway St		
<b>City, State, Zip Code</b> Tupelo, MS 38804-4832		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$6,501.30

Name of Candidate or Committee Brandon PresleyReporting Period 5/1/2023 through 5/31/2023

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## ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Kroger Co.	05/11/2023	\$54.95
Mailing Address 1014 Vine St		
City, State, Zip Code Cincinnati, OH 45202-1141		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$952.23
Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	05/02/2023	\$173.08
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$28,280.49
Full Name Tom Bigbee Fiber	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1346 Auburn Rd	05/15/2023	\$309.85
City, State, Zip Code Tupelo, MS 38804-8412		
Purpose of Disbursement (Optional) Utilities	Aggregate year-to-date	\$1,188.35
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	05/15/2023	\$80.33
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$631.98
Full Name Issac Lampner	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 945 Mitchell St	05/15/2023	\$2,798.60
City, State, Zip Code Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$20,051.95

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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shinitra Russell	05/01/2023	\$2,320.98
<b>Mailing Address</b> 1185 Collier Rd NW		
<b>City, State, Zip Code</b> Atlanta, GA 30318-8272		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$4,641.96
Full Name Begley Law Firm	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 287	05/08/2023	\$5,000.00
City, State, Zip Code Jackson, MS 39205-0287		
Purpose of Disbursement (Optional) Legal Services	Aggregate year-to-date	\$5,000.00
Full Name Tom Bigbee Fiber	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1346 Auburn Rd	05/24/2023	\$304.40
City, State, Zip Code Tupelo, MS 38804-8412		
Purpose of Disbursement (Optional) Utilities	Aggregate year-to-date	\$1,188.35
Full Name KMM Consulting	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 8242 Birch St	05/08/2023	\$8,761.98
City, State, Zip Code New Orleans, LA 70118-2822		
Purpose of Disbursement (Optional) Fundraising Consulting	Aggregate year-to-date	\$40,620.20
Full Name Bumperactive	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5907 Burnet Rd	05/04/2023	\$1,112.13
City, State, Zip Code Austin, TX 78757-3224		
Purpose of Disbursement (Optional) Store Overhead	Aggregate year-to-date	\$6,290.89

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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart	05/22/2023	\$13.99
<b>Mailing Address</b> 702 SW 8th St		
<b>City, State, Zip Code</b> Bentonville, AR 72716-6209		
<b>Purpose of Disbursement (Optional)</b> Office Supplies	<b>Aggregate year-to-date</b>	\$286.35
ActBlue Technical Services	05/15/2023	\$371.92
<b>Mailing Address</b> PO Box 382110		
<b>City, State, Zip Code</b> Cambridge, MA 02238-2110		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing	<b>Aggregate year-to-date</b>	\$10,562.16
Vardaman Elementary School	05/12/2023	\$375.00
<b>Mailing Address</b> 114 Wb Gregg Dr		
<b>City, State, Zip Code</b> Vardaman, MS 38878-6201		
<b>Purpose of Disbursement (Optional)</b> Event Sponsorship	<b>Aggregate year-to-date</b>	\$375.00
United Healthcare	05/19/2023	\$7,038.62
<b>Mailing Address</b> PO Box 94017		
<b>City, State, Zip Code</b> Palatine, IL 60094-4017		
<b>Purpose of Disbursement (Optional)</b> Health Insurance	<b>Aggregate year-to-date</b>	\$14,091.72
Benjamin Hunt	05/01/2023	\$2,167.10
<b>Mailing Address</b> 510 S Broadway St		
<b>City, State, Zip Code</b> Tupelo, MS 38804-4832		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$6,501.30

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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jake Laves	05/15/2023	\$2,974.48
<b>Mailing Address</b> 699 Nation Hills Dr		
<b>City, State, Zip Code</b> Tupelo, MS 38804-6063		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$12,661.60
JVEyes, Inc.	05/08/2023	\$1,800.00
<b>Mailing Address</b> 1150 Post Rd		
<b>City, State, Zip Code</b> Fairfield, CT 06824-6006		
<b>Purpose of Disbursement (Optional)</b> Media Monitoring	<b>Aggregate year-to-date</b>	\$2,400.00
Shell Oil Co	05/22/2023	\$4.90
<b>Mailing Address</b> PO Box 2463		
<b>City, State, Zip Code</b> Houston, TX 77252-2463		
<b>Purpose of Disbursement (Optional)</b> Travel	<b>Aggregate year-to-date</b>	\$631.98
Amazon, Inc.	05/11/2023	\$385.11
<b>Mailing Address</b> 410 Terry Ave N		
<b>City, State, Zip Code</b> Seattle, WA 98109-5210		
<b>Purpose of Disbursement (Optional)</b> Office Supplies	<b>Aggregate year-to-date</b>	\$1,094.97
WFCA Radio	05/18/2023	\$786.00
<b>Mailing Address</b> 300 Church St		
<b>City, State, Zip Code</b> French Camp, MS 39745-8600		
<b>Purpose of Disbursement (Optional)</b> Radio Ad Buy	<b>Aggregate year-to-date</b>	\$1,536.00

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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero		
<b>Mailing Address</b>		
200 Spectrum Center Dr	05/15/2023	\$909.37
<b>City, State, Zip Code</b>		
Irvine, CA 92618-5004		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$28,280.49
Credit Card Processing		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
Ethan Cox		
<b>Mailing Address</b>		
3614 N Fremont St	05/19/2023	\$453.66
<b>City, State, Zip Code</b>		
Chicago, IL 60613-4372		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$5,323.92
Reimbursement - Travel, Office Supplies		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
Issac Lampner		
<b>Mailing Address</b>		
945 Mitchell St	05/01/2023	\$2,798.60
<b>City, State, Zip Code</b>		
Tupelo, MS 38801-6773		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$20,051.95
Salary		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
Stripe		
<b>Mailing Address</b>		
3180 18th St	05/23/2023	\$19.13
<b>City, State, Zip Code</b>		
San Francisco, CA 94110-2042		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$453.80
Credit Card Processing		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
Payroll Data Processing		
<b>Mailing Address</b>		
3501 E Frontage Rd	05/01/2023	\$77.48
<b>City, State, Zip Code</b>		
Tampa, FL 33607-1723		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$59,405.27
Payroll Fees		

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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Abby O'Keefe	05/15/2023	\$2,811.60
<b>Mailing Address</b> 1404 Highland Valley Cir		
<b>City, State, Zip Code</b> Wildwood, MO 63005-4259		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$11,561.23
ALG Polling, Inc.	05/08/2023	\$45,600.00
<b>Mailing Address</b> 260 Commerce St		
<b>City, State, Zip Code</b> Montgomery, AL 36104-2546		
<b>Purpose of Disbursement (Optional)</b> Research Consultant	<b>Aggregate year-to-date</b>	\$172,400.00
Expedia.com	05/24/2023	\$81.65
<b>Mailing Address</b> 1111 Expedia Group Way W		
<b>City, State, Zip Code</b> Seattle, WA 98119-1111		
<b>Purpose of Disbursement (Optional)</b> Travel	<b>Aggregate year-to-date</b>	\$457.11
Shell Oil Co	05/22/2023	\$7.35
<b>Mailing Address</b> PO Box 2463		
<b>City, State, Zip Code</b> Houston, TX 77252-2463		
<b>Purpose of Disbursement (Optional)</b> Travel	<b>Aggregate year-to-date</b>	\$631.98
Amazon, Inc.	05/11/2023	\$664.20
<b>Mailing Address</b> 410 Terry Ave N		
<b>City, State, Zip Code</b> Seattle, WA 98109-5210		
<b>Purpose of Disbursement (Optional)</b> Office Supplies	<b>Aggregate year-to-date</b>	\$1,094.97

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## ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
WFCA Radio	05/18/2023	\$750.00
<b>Mailing Address</b>		
300 Church St		
<b>City, State, Zip Code</b>		
French Camp, MS 39745-8600		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$1,536.00
Radio Ad Buy		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
Google	05/02/2023	\$107.40
<b>Mailing Address</b>		
1600 Amphitheatre Pkwy		
<b>City, State, Zip Code</b>		
Mountain View, CA 94043-1351		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$300.90
Email Services		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
Stripe	05/15/2023	\$11.69
<b>Mailing Address</b>		
3180 18th St		
<b>City, State, Zip Code</b>		
San Francisco, CA 94110-2042		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$453.80
Credit Card Processing		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
Ron Owens	05/19/2023	\$259.96
<b>Mailing Address</b>		
3545 Mitchell Rd		
<b>City, State, Zip Code</b>		
Tupelo, MS 38801-9616		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$33,810.21
Reimbursement - Travel (Delta Airlines)		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
Jake Laves	05/01/2023	\$2,974.48
<b>Mailing Address</b>		
699 Nation Hills Dr		
<b>City, State, Zip Code</b>		
Tupelo, MS 38804-6063		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$12,661.60
Salary		



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## ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Payroll Data Processing	05/01/2023	\$13,615.40
<b>Mailing Address</b>		
3501 E Frontage Rd		
<b>City, State, Zip Code</b>		
Tampa, FL 33607-1723		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$59,405.27
Payroll Taxes		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Payroll Data Processing	05/15/2023	\$13,668.21
<b>Mailing Address</b>		
3501 E Frontage Rd		
<b>City, State, Zip Code</b>		
Tampa, FL 33607-1723		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$59,405.27
Payroll Taxes		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ron Owens	05/15/2023	\$3,935.75
<b>Mailing Address</b>		
3545 Mitchell Rd		
<b>City, State, Zip Code</b>		
Tupelo, MS 38801-9616		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$33,810.21
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Law Office of Michael Winfield	05/08/2023	\$1,500.00
<b>Mailing Address</b>		
106 S President St		
<b>City, State, Zip Code</b>		
Jackson, MS 39201-3601		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$1,500.00
Rent		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hilton Hotels	05/18/2023	\$163.92
<b>Mailing Address</b>		
7930 Jones Branch Dr		
<b>City, State, Zip Code</b>		
McLean, VA 22102-3388		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$695.28
Travel		

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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Silly Sisters, LLC	05/17/2023	\$1,800.00
<b>Mailing Address</b> 310 County Road 640		
<b>City, State, Zip Code</b> Baldwyn, MS 38824-8680		
<b>Purpose of Disbursement (Optional)</b> Rent	<b>Aggregate year-to-date</b>	\$3,600.00
<b>Full Name</b> Abby O'Keefe	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> 1404 Highland Valley Cir	05/01/2023	\$2,811.60
<b>City, State, Zip Code</b> Wildwood, MO 63005-4259		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$11,561.23
<b>Full Name</b> Numero	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> 200 Spectrum Center Dr	05/03/2023	\$612.00
<b>City, State, Zip Code</b> Irvine, CA 92618-5004		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing	<b>Aggregate year-to-date</b>	\$28,280.49
<b>Full Name</b> Payroll Data Processing	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> 3501 E Frontage Rd	05/15/2023	\$83.48
<b>City, State, Zip Code</b> Tampa, FL 33607-1723		
<b>Purpose of Disbursement (Optional)</b> Payroll Fees	<b>Aggregate year-to-date</b>	\$59,405.27
<b>Full Name</b> Numero	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> 200 Spectrum Center Dr	05/10/2023	\$1,287.99
<b>City, State, Zip Code</b> Irvine, CA 92618-5004		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing	<b>Aggregate year-to-date</b>	\$28,280.49

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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shawn Patterson	05/15/2023	\$2,974.48
<b>Mailing Address</b> 1160 1st St NE		
<b>City, State, Zip Code</b> Washington, DC 20002-4799		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$12,233.48
Chipotle	05/19/2023	\$65.06
<b>Mailing Address</b> 610 Newport Center Dr		
<b>City, State, Zip Code</b> Newport Beach, CA 92660-6460		
<b>Purpose of Disbursement (Optional)</b> Meals	<b>Aggregate year-to-date</b>	\$293.79
Número	05/05/2023	\$312.45
<b>Mailing Address</b> 200 Spectrum Center Dr		
<b>City, State, Zip Code</b> Irvine, CA 92618-5004		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing	<b>Aggregate year-to-date</b>	\$28,280.49
Número	05/08/2023	\$209.44
<b>Mailing Address</b> 200 Spectrum Center Dr		
<b>City, State, Zip Code</b> Irvine, CA 92618-5004		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing	<b>Aggregate year-to-date</b>	\$28,280.49
ActBlue Technical Services	05/01/2023	\$610.12
<b>Mailing Address</b> PO Box 382110		
<b>City, State, Zip Code</b> Cambridge, MA 02238-2110		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing	<b>Aggregate year-to-date</b>	\$10,562.16

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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Boosters Inc	05/17/2023	\$5,186.33
<b>Mailing Address</b>		
PO Box 70156		
<b>City, State, Zip Code</b>		
Montgomery, AL 36107-0156		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$5,186.33
Printing of Campaign Materials		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ron Owens	05/01/2023	\$3,935.75
<b>Mailing Address</b>		
3545 Mitchell Rd		
<b>City, State, Zip Code</b>		
Tupelo, MS 38801-9616		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$33,810.21
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stripe	05/26/2023	\$11.68
<b>Mailing Address</b>		
3180 18th St		
<b>City, State, Zip Code</b>		
San Francisco, CA 94110-2042		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$453.80
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Adam Beyer	05/15/2023	\$2,974.48
<b>Mailing Address</b>		
4288 N Gloster St		
<b>City, State, Zip Code</b>		
Tupelo, MS 38804-7249		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$12,234.24
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Número	05/01/2023	\$597.60
<b>Mailing Address</b>		
200 Spectrum Center Dr		
<b>City, State, Zip Code</b>		
Irvine, CA 92618-5004		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$28,280.49
Credit Card Processing		

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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Greta Presley	05/15/2023	\$209.88
<b>Mailing Address</b> 7054 Penbrook Dr		
<b>City, State, Zip Code</b> Franklin, TN 37069-8407		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$209.88
Chipotle	05/22/2023	\$18.97
<b>Mailing Address</b> 610 Newport Center Dr		
<b>City, State, Zip Code</b> Newport Beach, CA 92660-6460		
<b>Purpose of Disbursement (Optional)</b> Meals	<b>Aggregate year-to-date</b>	\$293.79
Huffman & Rejebian	05/08/2023	\$12,500.00
<b>Mailing Address</b> PO Box 1180		
<b>City, State, Zip Code</b> Jackson, MS 39215-1180		
<b>Purpose of Disbursement (Optional)</b> Research Consulting	<b>Aggregate year-to-date</b>	\$12,500.00
Número	05/31/2023	\$562.14
<b>Mailing Address</b> 200 Spectrum Center Dr		
<b>City, State, Zip Code</b> Irvine, CA 92618-5004		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing	<b>Aggregate year-to-date</b>	\$28,280.49
Número	05/25/2023	\$53.91
<b>Mailing Address</b> 200 Spectrum Center Dr		
<b>City, State, Zip Code</b> Irvine, CA 92618-5004		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing	<b>Aggregate year-to-date</b>	\$28,280.49

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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	05/26/2023	\$406.91
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing		
	Aggregate year-to-date	\$28,280.49
Full Name Elvis Presley Birthplace	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 1339	05/17/2023	\$500.00
City, State, Zip Code Tupelo, MS 38802-1339		
Purpose of Disbursement (Optional) Event Space Rental		
	Aggregate year-to-date	\$500.00
Full Name Shawn Patterson	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1160 1st St NE	05/01/2023	\$2,974.48
City, State, Zip Code Washington, DC 20002-4799		
Purpose of Disbursement (Optional) Salary		
	Aggregate year-to-date	\$12,233.48
Full Name Ethan Cox	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3614 N Fremont St	05/15/2023	\$1,623.42
City, State, Zip Code Chicago, IL 60613-4372		
Purpose of Disbursement (Optional) Salary		
	Aggregate year-to-date	\$5,323.92
Full Name Shinitra Russell	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1185 Collier Rd NW	05/15/2023	\$2,320.98
City, State, Zip Code Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional) Salary		
	Aggregate year-to-date	\$4,641.96

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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chipotle	05/22/2023	\$209.76
<b>Mailing Address</b>		
610 Newport Center Dr		
<b>City, State, Zip Code</b>		
Newport Beach, CA 92660-6460		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$293.79
Meals		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
Allmond Printing Co	05/04/2023	\$160.50
<b>Mailing Address</b>		
603 W Commerce St		
<b>City, State, Zip Code</b>		
Aberdeen, MS 39730-2405		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$258.00
Printing		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
IP Casino Resort & Spa	05/25/2023	\$100.65
<b>Mailing Address</b>		
850 Bayview Ave		
<b>City, State, Zip Code</b>		
Biloxi, MS 39530-1701		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$371.39
Travel		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
State Farm Insurance	05/05/2023	\$102.52
<b>Mailing Address</b>		
1 State Farm Plz		
<b>City, State, Zip Code</b>		
Bloomington, IL 61710-0001		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$410.08
Insurance		
<b>Full Name</b>	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
United Airlines	05/03/2023	\$460.30
<b>Mailing Address</b>		
233 S Wacker Dr		
<b>City, State, Zip Code</b>		
Chicago, IL 60606-7147		
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate year-to-date</b>	\$460.30
Travel		

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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
IP Casino Resort & Spa	05/12/2023	\$14.98
<b>Mailing Address</b> 850 Bayview Ave		
<b>City, State, Zip Code</b> Biloxi, MS 39530-1701		
<b>Purpose of Disbursement (Optional)</b> Travel	<b>Aggregate year-to-date</b>	\$371.39
<b>Full Name</b> Jacob Smith	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> 4100 N Gloster St	05/01/2023	\$1,435.54
<b>City, State, Zip Code</b> Tupelo, MS 38804-7228		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$7,177.70
<b>Full Name</b> Numero	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> 200 Spectrum Center Dr	05/01/2023	\$1,531.00
<b>City, State, Zip Code</b> Irvine, CA 92618-5004		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing	<b>Aggregate year-to-date</b>	\$28,280.49
<b>Full Name</b> Benjamin Hunt	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> 510 S Broadway St	05/15/2023	\$2,167.10
<b>City, State, Zip Code</b> Tupelo, MS 38804-4832		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$6,501.30
<b>Full Name</b> Jacob Smith	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> 4100 N Gloster St	05/15/2023	\$1,435.54
<b>City, State, Zip Code</b> Tupelo, MS 38804-7228		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$7,177.70



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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
<b>Mailing Address</b> 200 Spectrum Center Dr	05/04/2023	\$192.23
<b>City, State, Zip Code</b> Irvine, CA 92618-5004		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing		
	<b>Aggregate year-to-date</b>	\$28,280.49
<b>Full Name</b> IP Casino Resort & Spa	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> 850 Bayview Ave	05/25/2023	\$14.98
<b>City, State, Zip Code</b> Biloxi, MS 39530-1701		
<b>Purpose of Disbursement (Optional)</b> Travel		
	<b>Aggregate year-to-date</b>	\$371.39
<b>Full Name</b> United States Postal Service	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> 475 Lenfant Plz SW	05/01/2023	\$28.75
<b>City, State, Zip Code</b> Washington, DC 20260-0004		
<b>Purpose of Disbursement (Optional)</b> Shipping & Postage		
	<b>Aggregate year-to-date</b>	\$207.15
<b>Full Name</b> ActBlue Technical Services	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> PO Box 382110	05/08/2023	\$490.00
<b>City, State, Zip Code</b> Cambridge, MA 02238-2110		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing		
	<b>Aggregate year-to-date</b>	\$10,562.16
<b>Full Name</b> Expedia.com	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> 1111 Expedia Group Way W	05/08/2023	\$161.26
<b>City, State, Zip Code</b> Seattle, WA 98119-1111		
<b>Purpose of Disbursement (Optional)</b> Travel		
	<b>Aggregate year-to-date</b>	\$457.11

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Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Adam Beyer	05/01/2023	\$2,974.98
<b>Mailing Address</b> 4288 N Gloster St		
<b>City, State, Zip Code</b> Tupelo, MS 38804-7249		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$12,234.24
IP Casino Resort & Spa	05/12/2023	\$14.98
<b>Mailing Address</b> 850 Bayview Ave		
<b>City, State, Zip Code</b> Biloxi, MS 39530-1701		
<b>Purpose of Disbursement (Optional)</b> Travel	<b>Aggregate year-to-date</b>	\$371.39
Shalonda Spencer	05/01/2023	\$2,811.60
<b>Mailing Address</b> 1509 Hawthorne Pl		
<b>City, State, Zip Code</b> Clinton, MS 39056-3910		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$9,921.87
ActBlue Technical Services	05/29/2023	\$840.65
<b>Mailing Address</b> PO Box 382110		
<b>City, State, Zip Code</b> Cambridge, MA 02238-2110		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing	<b>Aggregate year-to-date</b>	\$10,562.16
Jordan Kelley	05/15/2023	\$2,320.98
<b>Mailing Address</b> 8364 Barton Dr		
<b>City, State, Zip Code</b> Strongsville, OH 44149-1017		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$2,320.98

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Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
<b>Mailing Address</b> 200 Spectrum Center Dr	05/22/2023	\$999.21
<b>City, State, Zip Code</b> Irvine, CA 92618-5004		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing		
<b>Full Name</b> Shalonda Spencer	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> disbursement this period
<b>Mailing Address</b> 1509 Hawthorne Pl	05/15/2023	\$2,811.60
<b>City, State, Zip Code</b> Clinton, MS 39056-3910		
<b>Purpose of Disbursement (Optional)</b> Salary		
<b>Full Name</b> MBA Consulting Group	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> disbursement this period
<b>Mailing Address</b> 611 Pennsylvania Ave SE	05/04/2023	\$10,000.00
<b>City, State, Zip Code</b> Washington, DC 20003-4303		
<b>Purpose of Disbursement (Optional)</b> Compliance Consulting		
<b>Full Name</b> IP Casino Resort & Spa	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> disbursement this period
<b>Mailing Address</b> 850 Bayview Ave	05/25/2023	\$100.65
<b>City, State, Zip Code</b> Biloxi, MS 39530-1701		
<b>Purpose of Disbursement (Optional)</b> Travel		
<b>Full Name</b> Stripe	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> disbursement this period
<b>Mailing Address</b> 3180 18th St	05/01/2023	\$22.71
<b>City, State, Zip Code</b> San Francisco, CA 94110-2042		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing		
	<b>Aggregate</b> year-to-date	\$28,280.49
	<b>Aggregate</b> year-to-date	\$9,921.87
	<b>Aggregate</b> year-to-date	\$25,020.00
	<b>Aggregate</b> year-to-date	\$371.39
	<b>Aggregate</b> year-to-date	\$453.80

Name of Candidate or Committee Brandon PresleyReporting Period 5/1/2023 through 5/31/2023

Ref No: CF202330347

Date Filed: 6/9/2023

Michael Watson

Secretary of State

## ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
<b>Mailing Address</b> 702 SW 8th St	05/16/2023	\$52.66
<b>City, State, Zip Code</b> Bentonville, AR 72716-6209		
<b>Purpose of Disbursement (Optional)</b> Office Supplies	<b>Aggregate year-to-date</b>	\$286.35
United States Postal Service		
<b>Mailing Address</b> 475 Lenfant Plz SW	05/02/2023	\$28.75
<b>City, State, Zip Code</b> Washington, DC 20260-0004		
<b>Purpose of Disbursement (Optional)</b> Shipping & Postage	<b>Aggregate year-to-date</b>	\$207.15
Switchboard Public Benefit Corp.		
<b>Mailing Address</b> 195 Binney St	05/19/2023	\$10,812.45
<b>City, State, Zip Code</b> Cambridge, MA 02142-1095		
<b>Purpose of Disbursement (Optional)</b> Digital Fundraising	<b>Aggregate year-to-date</b>	\$16,412.36
Ethan Cox		
<b>Mailing Address</b> 3614 N Fremont St	05/01/2023	\$1,623.42
<b>City, State, Zip Code</b> Chicago, IL 60613-4372		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$5,323.92
Jefferson Stevens, LLC		
<b>Mailing Address</b> 5907 Baxter Dr	05/03/2023	\$7,500.00
<b>City, State, Zip Code</b> Jackson, MS 39211-3319		
<b>Purpose of Disbursement (Optional)</b> Political Strategy Consultant	<b>Aggregate year-to-date</b>	\$11,445.56

Name of Candidate or Committee Brandon PresleyReporting Period 5/1/2023 through 5/31/2023

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## ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mama Justice - MW Law Firm	05/25/2023	\$2,000.00
<b>Mailing Address</b> 2005 W Main St		
<b>City, State, Zip Code</b> Tupelo, MS 38801-3214		
<b>Purpose of Disbursement (Optional)</b> Office Furniture	<b>Aggregate year-to-date</b>	\$2,000.00
<b>Full Name</b> Shell Oil Co	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> PO Box 2463	05/04/2023	\$88.04
<b>City, State, Zip Code</b> Houston, TX 77252-2463		
<b>Purpose of Disbursement (Optional)</b> Travel	<b>Aggregate year-to-date</b>	\$631.98
<b>Full Name</b> Katharine Kurz	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> 5030 Celtic Ct	05/15/2023	\$209.88
<b>City, State, Zip Code</b> Raleigh, NC 27612-3086		
<b>Purpose of Disbursement (Optional)</b> Salary	<b>Aggregate year-to-date</b>	\$209.88
<b>Full Name</b> ActBlue Technical Services	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> PO Box 382110	05/22/2023	\$512.15
<b>City, State, Zip Code</b> Cambridge, MA 02238-2110		
<b>Purpose of Disbursement (Optional)</b> Credit Card Processing	<b>Aggregate year-to-date</b>	\$10,562.16
<b>Full Name</b> Shalonda Spencer	<b>Date (Mo., Day, Year)</b>	<b>Amount of each disbursement this period</b>
<b>Mailing Address</b> 1509 Hawthorne Pl	05/26/2023	\$1,487.07
<b>City, State, Zip Code</b> Clinton, MS 39056-3910		
<b>Purpose of Disbursement (Optional)</b> Reimbursement - Travel, Office Supplies	<b>Aggregate year-to-date</b>	\$9,921.87

Name of Candidate or Committee Brandon PresleyReporting Period 5/1/2023 through 5/31/2023

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## ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or after

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amalgamated Bank	05/26/2023	\$187.95
Mailing Address 275 7th Ave		
City, State, Zip Code New York, NY 10001-6708		
Purpose of Disbursement (Optional) Bank Fee	Aggregate year-to-date	\$244.70
Full Name KEP Strategies, LLC	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 450268	05/08/2023	\$8,809.64
City, State, Zip Code Atlanta, GA 31145-0268		
Purpose of Disbursement (Optional) Fundraising Consulting	Aggregate year-to-date	\$39,640.46