

Candidate's Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
2019 Election



Name of Candidate Tate for Governor
 Address 4 River Bend Place #210 City/Zip Flower M 37232
 Telephone (Work) _____ (Fax) _____
 Treasurer Knigh Mendenhall Email Address _____
 Office Sought Governor Party Affiliation _____



Check here if above information is different from previous report

TYPE OF REPORT

- ____ May 10, 2019 Periodic Report (January 1, 2019, through April 30, 2019) Mandatory
- ____ June 10, 2019 Periodic Report (May 1, 2019, through May 31, 2019) Mandatory
- ____ July 10, 2019 Periodic Report (June 1, 2019, through June 30, 2019) Mandatory
- ____ July 30, 2019 Primary Pre-Election Report (July 1, 2019, through July 27, 2019) Mandatory
- ____ August 20, 2019 Primary Pre-Runoff Report (July 28, 2019, through August 17, 2019) Runoff Candidates Only
- ____ October 10, 2019 Periodic Report (July 1, 2019, through September 30, 2019) Mandatory
- * ____ October 29, 2019 Pre-Election Report (October 1, 2019, through October 26, 2019) Mandatory
- ____ November 19, 2019 Pre-Runoff Report (October 27, 2019, through November 16, 2019) Runoff Candidates Only
- ____ January 10, 2020 Periodic Report (October 1, 2019, through December 31, 2019) Mandatory
- ____ Termination Report (Committee will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation and a zero cash on hand balance) Required to terminate reporting obligations

IMPORTANT

- (1) All candidates for office, and their political committees if organized as such, 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 committee 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, all campaign finance disclosure 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 those "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 report by 5:00 p.m. on the deadline. If the deadline falls on a weekend or legal holiday, the office must be in actual receipt of the required report by 5:00 p.m. on the first working day before the deadline.

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

JAN. 1, 2019 CASH ON HAND BALANCE

	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS¹				
TOTAL AMT OF DISBURSEMENTS				
CASH ON HAND BALANCE				

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

JAN. 1, 2019 CASH ON HAND BALANCE

\$0.00

	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$1,505,404.94	\$7,696.65	\$1,513,101.59	\$10,962,737.84
TOTAL AMT OF DISBURSEMENTS	\$2,463,066.43	\$6,789.14	\$2,469,855.57	\$10,769,909.09
CASH ON HAND BALANCE				\$192,828.75

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



Signature of Director or Treasurer

10/29/2019

Date

Penalties: Failure to timely submit required reports in accordance with the applicable statute(s) may result in the imposition of a civil penalty of \$50 per day for ten (10) days and/or prosecution pursuant to Miss. Code Ann. §§ 23-15-811 and 813 (1972).

Political Committees supporting or opposing Statewide, State District or Legislative Candidates file this form 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.
Political Committees supporting or opposing county and/or county district candidates file this form with the Circuit Clerk's Office.

1. Contributions to pre-Jan. 1, 2018 campaign funds are limited to interest and dividends earned upon pre-Jan. 1, 2018 monies.

Name of Candidate or Committee

Tate for Governor

Reporting Period 10/01/2019

through 10/26/2019

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, Year)	Amount of each receipt this period
Full Name Gregory S. Brown	10/22/2019	\$210.00
Mailing Address 293 Corinth Church Road		
City, State, Zip Code Petal, MS 39465-8324		
Name of Employer (Required) Self		
Occupation (Required) Farmer	Aggregate Year-to-date	\$210.00
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, Year)	Amount of each receipt this period
Full Name Thompson Victory Group, Inc.	10/02/2019	\$1,000.00
Mailing Address 3223 Paces Ferry Place		
City, State, Zip Code Atlanta, GA 30305-1308		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name Joe Usry	10/17/2019	\$1,041.98
Mailing Address 134 INDIAN CREEK BLVD		
City, State, Zip Code Flowood, MS 39232-8678		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,041.98
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
Full Name Herbert Bradford Ramey	10/18/2019	\$1,500.00
Mailing Address 622 Highway 589		
City, State, Zip Code Purvis, MS 39475-4101		
Name of Employer (Required) Rameys		
Occupation (Required) Owner	Aggregate Year-to-date	\$5,000.00

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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, Year)	Amount of each receipt this period
Full Name Theresa L. Brady	10/01/2019	\$500.00
Mailing Address 1889 Forest Park		
City, State, Zip Code Tupelo, MS 38801-7100		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael P. Mills	10/02/2019	\$1,000.00
Mailing Address 118 Meadow St		
City, State, Zip Code Fulton, MS 38843-9545		
Name of Employer (Required) Self		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,250.00
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
Full Name Singh H. Sood	10/16/2019	\$500.00
Mailing Address 102 Essex Court		
City, State, Zip Code Madison, MS 39110-9295		
Name of Employer (Required) RRR, LLC		
Occupation (Required) Owner	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Seemann Composites, LLC	10/01/2019	\$5,000.00
Mailing Address PO Box 3449		
City, State, Zip Code Gulfport, MS 39505-3449		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$7,500.00

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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, Year)	Amount of each receipt this period
Full Name Dean Wingo	10/18/2019	\$250.00
Mailing Address 964 Fair Oakes Drive		
City, State, Zip Code Collierville, TN 38017-1314		
Name of Employer (Required) City Center Shopping Plaza		
Occupation (Required) Partner	Aggregate Year-to-date	\$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
Full Name David Machado	10/10/2019	\$1,000.00
Mailing Address 6 Povenir Pl.		
City, State, Zip Code Gulfport, MS 39507-4234		
Name of Employer (Required) Machado Patano		
Occupation (Required) Executive	Aggregate Year-to-date	\$11,000.00
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
Full Name J. R. Carter Sr.	10/09/2019	\$2,500.00
Mailing Address PO Box 1600		
City, State, Zip Code Gulfport, MS 39502-1600		
Name of Employer (Required) Island View Casino Resort		
Occupation (Required) Owner	Aggregate Year-to-date	\$12,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Herbert Bradford Ramey	10/03/2019	\$2,500.00
Mailing Address 622 Highway 589		
City, State, Zip Code Purvis, MS 39475-4101		
Name of Employer (Required) Rameys		
Occupation (Required) Owner	Aggregate Year-to-date	\$3,500.00

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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, Year)	Amount of each receipt this period
Full Name Jeanhee Kang	10/18/2019	\$1,000.00
Mailing Address 729 White Oak Circle		
City, State, Zip Code Flowood, MS 39232-9336		
Name of Employer (Required) Berkshire Hathaway Home Services		
Occupation (Required) Broker Associate	Aggregate Year-to-date	\$1,000.00
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
Full Name William Tabor	10/21/2019	\$50.00
Mailing Address P.O. Box 828		
City, State, Zip Code Louisville, MS 39339-0828		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$280.00
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
Full Name James N. Compton	10/23/2019	\$1,000.00
Mailing Address 31 St. Andrews		
City, State, Zip Code Hattiesburg, MS 39401-8213		
Name of Employer (Required) Cooperative Energy		
Occupation (Required) CEO	Aggregate Year-to-date	\$1,000.00
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
Full Name Robert L. Smith Jr.	10/25/2019	\$25.00
Mailing Address 7 E Commerce Street		
City, State, Zip Code Hernando, MS 38632-2215		
Name of Employer (Required) Self		
Occupation (Required) Dentist	Aggregate Year-to-date	\$646.34

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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, Year)	Amount of each receipt this period
Full Name Charlie Thomas III	10/21/2019	\$3,000.00
Mailing Address PO Box 98		
City, State, Zip Code Shuqualak, MS 39361-0098		
Name of Employer (Required) Shuqualak Lumber Company		
Occupation (Required) Vice President	Aggregate Year-to-date	\$10,000.00
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
Full Name Chihong Chu	10/09/2019	\$500.00
Mailing Address 19 Heather Way		
City, State, Zip Code East Brunswick, NJ 08816-2825		
Name of Employer (Required) Converge Management		
Occupation (Required) Manager	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Larry Homan	10/02/2019	\$2,500.00
Mailing Address PO Box 39		
City, State, Zip Code Fulton, MS 38843-0039		
Name of Employer (Required) Homan Industries		
Occupation (Required) President	Aggregate Year-to-date	\$2,500.00
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, Year)	Amount of each receipt this period
Full Name Government Employees Insurance Co.	10/15/2019	\$1,000.00
Mailing Address One Geico Plaza		
City, State, Zip Code Washington, DC 20076-0003		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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through 10/26/2019

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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, Year)	Amount of each receipt this period
Full Name Andy Morris	10/18/2019	\$100.00
Mailing Address 1085 CR 25		
City, State, Zip Code Myrtle, MS 38650-9312		
Name of Employer (Required) Southern Corrosion		
Occupation (Required) Sales	Aggregate Year-to-date	\$100.00
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>Campaign Committee</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Friends of William F. Kinkade	10/02/2019	\$500.00
Mailing Address 7165 Getwell Rd Bldg D		
City, State, Zip Code Southaven, MS 38672-9619		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James H. Heidelberg	10/02/2019	\$1,000.00
Mailing Address 1300 Driftwood Street		
City, State, Zip Code Pascagoula, MS 39567-7592		
Name of Employer (Required) Heidelberg Steinberger		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Terry W. Green	10/09/2019	\$2,500.00
Mailing Address PO Box 2788		
City, State, Zip Code Sugar Land, TX 77487-2788		
Name of Employer (Required) Island View Casino Resort		
Occupation (Required) Owner	Aggregate Year-to-date	\$10,000.00

Name of Candidate or Committee

Tate for Governor

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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, Year)	Amount of each receipt this period
Full Name B. Bryan Jones III	10/23/2019	\$1,000.00
Mailing Address 134 Hidden Heights		
City, State, Zip Code Ridgeland, MS 39157-8626		
Name of Employer (Required) B.B. Jones Properties		
Occupation (Required) Owner	Aggregate Year-to-date	\$3,000.00
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
Full Name John Ferguson Dane	10/13/2019	\$2,000.00
Mailing Address 9020 Victoria Circle		
City, State, Zip Code Gulfport, MS 39503-6139		
Name of Employer (Required) United States Marine, Inc.		
Occupation (Required) Executive	Aggregate Year-to-date	\$3,000.00
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
Full Name David Riemann	10/09/2019	\$1,000.00
Mailing Address 5310 Quincy Ave		
City, State, Zip Code Gulfport, MS 39507-4547		
Name of Employer (Required) Riemann Family Funeral Homes		
Occupation (Required) Chairman and Owner	Aggregate Year-to-date	\$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
Full Name Heather Hescheles	10/09/2019	\$500.00
Mailing Address 4856 35th Road North		
City, State, Zip Code Arlington, VA 22207-2817		
Name of Employer (Required) Leidos		
Occupation (Required) Government Relations	Aggregate Year-to-date	\$500.00

Name of Candidate or Committee

Tate for Governor

Reporting Period 10/01/2019

through 10/26/2019

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>Campaign committee</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Friends of Randall Patterson	10/08/2019	\$500.00
Mailing Address 1352 Kensington Dr		
City, State, Zip Code Biloxi, MS 39530-1626		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John D. Milne	10/08/2019	\$500.00
Mailing Address 409 G Street SE		
City, State, Zip Code Washington, DC 20003-4257		
Name of Employer (Required) MWS Strategies		
Occupation (Required) Partner	Aggregate Year-to-date	\$531.56
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
Full Name Amy Weiskopf	10/18/2019	\$500.00
Mailing Address 1305 Nottingham Road		
City, State, Zip Code Starkville, MS 39759-4023		
Name of Employer (Required) Self		
Occupation (Required) Dietitian	Aggregate Year-to-date	\$1,000.00
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
Full Name Rodney C. Richardson	10/09/2019	\$100.00
Mailing Address 1609 24th Ave		
City, State, Zip Code Meridian, MS 39301-3112		
Name of Employer (Required) Self		
Occupation (Required) Dentist	Aggregate Year-to-date	\$1,150.00

Name of Candidate or Committee

Tate for Governor

Reporting Period 10/01/2019

through 10/26/2019

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, Year)	Amount of each receipt this period
Full Name Turner Wingo	10/16/2019	\$1,000.00
Mailing Address 875 W Poplar Avenue Suite 23		
City, State, Zip Code Collierville, TN 38017-2598		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,000.00
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
Full Name Richard Jackson	10/21/2019	\$2,500.00
Mailing Address 2655 Northwinds Parkway		
City, State, Zip Code Alpharetta, GA 30009-2280		
Name of Employer (Required) Jackson Healthcare		
Occupation (Required) CEO	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Chris W. Cox	10/08/2019	\$500.00
Mailing Address 428 N. Washington St.		
City, State, Zip Code Alexandria, VA 22314-2312		
Name of Employer (Required) NRA		
Occupation (Required) Government Relations	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bedi Investments, LLC	10/16/2019	\$2,500.00
Mailing Address 457 Bozeman Road		
City, State, Zip Code Madison, MS 39110-7533		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00

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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, Year)	Amount of each receipt this period
Full Name Mark Gotjen	10/09/2019	\$1,000.00
Mailing Address 14309 Goff Street		
City, State, Zip Code Biloxi, MS 39532-8903		
Name of Employer (Required) Power Systems of MS		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,000.00

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
Full Name John R. McCartney	10/02/2019	\$5,000.00
Mailing Address 100 Laurel West Cove		
City, State, Zip Code Starkville, MS 39759-4380		
Name of Employer (Required) Bracken Construction		
Occupation (Required) President	Aggregate Year-to-date	\$5,000.00

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
Full Name Wendy Richens Hill	10/18/2019	\$25.00
Mailing Address 107 Bella Cima Dr		
City, State, Zip Code Austin, TX 78734-2651		
Name of Employer (Required) Self		
Occupation (Required) Interior Designer	Aggregate Year-to-date	\$256.15

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
Full Name John T. Hudson	10/23/2019	\$1,000.00
Mailing Address P.O. Box 592		
City, State, Zip Code Purvis, MS 39475-0592		
Name of Employer (Required) Ward's Fast Foods of Purvis		
Occupation (Required) Executive	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Ryan C. Harper	10/03/2019	\$2,500.00
Mailing Address P.O. Box 532		
City, State, Zip Code Pelahatchie, MS 39145-0532		
Name of Employer (Required) Brandon Discount Drugs		
Occupation (Required) Pharmacist	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Alexander Brunini	10/11/2019	\$1,000.00
Mailing Address 119 Rosedowne Bend		
City, State, Zip Code Madison, MS 39110-4710		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada		
Occupation (Required) Attorney	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Caterpillar Employees PAC	10/15/2019	\$5,000.00
Mailing Address 100 NE Adams St		
City, State, Zip Code Peoria, IL 61629-0001		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$10,000.00
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
Full Name Thomas H. Kline	10/02/2019	\$1,000.00
Mailing Address P.o. Box 121		
City, State, Zip Code Fulton, MS 38843-0121		
Name of Employer (Required) Kline Mechanical Systems, Inc.		
Occupation (Required) COO	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Tate for Governor
 Reporting Period 10/01/2019 through 10/26/2019

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, Year)	Amount of each receipt this period
Full Name John M. Hairston	10/18/2019	\$602.00
Mailing Address 9114 Victoria Circle		
City, State, Zip Code Gulfport, MS 39503-6140		
Name of Employer (Required) Whitney Hancock Bank		
Occupation (Required) CEO	Aggregate Year-to-date	\$20,602.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi Manufacturers Association PAC	10/01/2019	\$10,000.00
Mailing Address 720 N President St		
City, State, Zip Code Jackson, MS 39202-3004		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$35,000.00
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
Full Name L. Wayne Tisdale	10/22/2019	\$1,000.00
Mailing Address 9161 Ridge Road		
City, State, Zip Code Gulfport, MS 39503-6120		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name BankPlus PAC for Responsible Government	10/03/2019	\$2,500.00
Mailing Address 1068 Highland Colony Pkwy		
City, State, Zip Code Ridgeland, MS 39157-8807		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00

Name of Candidate or Committee Tate for Governor
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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, Year)	Amount of each receipt this period
Full Name Douglas F. Jefcoat	10/14/2019	\$250.00
Mailing Address 56 Dykes Road		
City, State, Zip Code Soso, MS 39480-5042		
Name of Employer (Required) Sawmill Animal Hospital		
Occupation (Required) Veterinarian	Aggregate Year-to-date	\$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
Full Name Charles Brittingham	10/04/2019	\$260.73
Mailing Address 3203 Collard Street		
City, State, Zip Code Alexandria, VA 22306-1421		
Name of Employer (Required) Cassidy & Associates		
Occupation (Required) Government Affairs	Aggregate Year-to-date	\$260.73

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
Full Name Russel Carlson	10/21/2019	\$250.00
Mailing Address 955 Lakeview Drive		
City, State, Zip Code Madison, GA 30650-1425		
Name of Employer (Required) GHCA		
Occupation (Required) Vice President	Aggregate Year-to-date	\$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
Full Name William H. Seemann IV	10/08/2019	\$1,000.00
Mailing Address 135 Hillcrest Drive		
City, State, Zip Code Pass Christian, MS 39571-2401		
Name of Employer (Required) Seemann Composites, LLC		
Occupation (Required) CFO	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee

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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, Year)	Amount of each receipt this period
Full Name Lee Voulters	10/10/2019	\$1,000.00
Mailing Address 927 E Scenic Drive		
City, State, Zip Code Pass Christian, MS 39571-4701		
Name of Employer (Required) Gulfport Memorial Hospital		
Occupation (Required) Neurologist	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi AGC-PAC	10/24/2019	\$2,500.00
Mailing Address PO Box 12615		
City, State, Zip Code Jackson, MS 39236-2615		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$17,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nancy Adams Collins	10/01/2019	\$250.00
Mailing Address 1604 Briar Ridge Road		
City, State, Zip Code Tupelo, MS 38804-5108		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,250.00
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
Full Name John A. Polk	10/21/2019	\$1,000.00
Mailing Address 53 Tidewater Road		
City, State, Zip Code Hattiesburg, MS 39402-9778		
Name of Employer (Required) Polks Meat Products Inc.		
Occupation (Required) Executive	Aggregate Year-to-date	\$1,500.00

Name of Candidate or Committee

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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, Year)	Amount of each receipt this period
Full Name Roy H. Parker	10/18/2019	\$250.00
Mailing Address 2820 Narrow Gauge Road		
City, State, Zip Code Bolton, MS 39041-9774		
Name of Employer (Required) Parker - McGill		
Occupation (Required) President	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Arnie Hederman	10/08/2019	\$1,000.00
Mailing Address 5 Charleston Place		
City, State, Zip Code Jackson, MS 39211-6070		
Name of Employer (Required) Clearwater Group, LLC		
Occupation (Required) Government Relations	Aggregate Year-to-date	\$2,000.00

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, Year)	Amount of each receipt this period
Full Name BKS, Inc	10/23/2019	\$500.00
Mailing Address 7048 U.S. Hwy 49 N		
City, State, Zip Code Hattiesburg, MS 39402-9159		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael L. Johnson	10/01/2019	\$500.00
Mailing Address 1101 Emerald Dr.		
City, State, Zip Code Alexandria, VA 22308-2629		
Name of Employer (Required) Cassidy & Associates		
Occupation (Required) Consultant	Aggregate Year-to-date	\$750.00

Name of Candidate or Committee Tate for Governor
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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, Year)	Amount of each receipt this period
Full Name Clyde Stewart	10/25/2019	\$300.00
Mailing Address 119 Mayfair Road		
City, State, Zip Code Hattiesburg, MS 39402-1464		
Name of Employer (Required) Remax Real Estate		
Occupation (Required) Realtor	Aggregate Year-to-date	\$300.00

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, Year)	Amount of each receipt this period
Full Name M2 Media, Corp.	10/01/2019	\$250.00
Mailing Address 12268 Intraplex Parkway		
City, State, Zip Code Gulfport, MS 39503-4642		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00

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, Year)	Amount of each receipt this period
Full Name Prime Holdings Insurance Services, Inc.	10/07/2019	\$1,000.00
Mailing Address 8722 South 300 West		
City, State, Zip Code Sandy, UT 84070-1420		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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
Full Name Carson M. Hughes	10/26/2019	\$50.00
Mailing Address 20 Carriage Court Place		
City, State, Zip Code Brandon, MS 39047-8776		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,621.15

Name of Candidate or Committee

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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, Year)	Amount of each receipt this period
Full Name Gay Drake	10/18/2019	\$250.00
Mailing Address 930 Arlington Street		
City, State, Zip Code Jackson, MS 39202-1620		
Name of Employer (Required) BankPlus		
Occupation (Required) Director of Accounting/VP	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trans4Fed, LLC	10/24/2019	\$500.00
Mailing Address 15 Mangum Lane		
City, State, Zip Code Purvis, MS 39475-4550		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Centene Management Company, LLC	10/02/2019	\$35,000.00
Mailing Address 7700 Forsyth Blvd		
City, State, Zip Code Saint Louis, MO 63105-1807		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$35,000.00
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, Year)	Amount of each receipt this period
Full Name Global Enterprises, Inc.	10/09/2019	\$125.00
Mailing Address PO Box 207		
City, State, Zip Code Gulfport, MS 39502-0207		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$625.00

Name of Candidate or Committee Tate for Governor
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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, Year)	Amount of each receipt this period
Full Name Hiren Patel	10/16/2019	\$5,000.00
Mailing Address 114 Bridgewater Xing		
City, State, Zip Code Ridgeland, MS 39157-8603		
Name of Employer (Required) Heritage Hospitality Group		
Occupation (Required) CEO	Aggregate Year-to-date	\$5,000.00
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
Full Name Richard Wax	10/09/2019	\$25,000.00
Mailing Address PO Box 60		
City, State, Zip Code Amory, MS 38821-0060		
Name of Employer (Required) The Wax Company		
Occupation (Required) Owner	Aggregate Year-to-date	\$75,000.00
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
Full Name Ray L. Wesson Jr.	10/09/2019	\$250.00
Mailing Address 618 N. Central Ave.		
City, State, Zip Code Waveland, MS 39576-4310		
Name of Employer (Required) The First		
Occupation (Required) President-Southern Region	Aggregate Year-to-date	\$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
Full Name Kevin Binger	10/01/2019	\$250.00
Mailing Address 12910 Creamery Hill Drive		
City, State, Zip Code Germantown, MD 20874-6338		
Name of Employer (Required) Cassidy and Associates		
Occupation (Required) Senior Vice President	Aggregate Year-to-date	\$250.00

Name of Candidate or Committee Tate for Governor
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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, Year)	Amount of each receipt this period
Full Name Douglas C. Lanier Jr.	10/10/2019	\$5,000.00
Mailing Address 4300B W. Railroad St.		
City, State, Zip Code Gulfport, MS 39501-2568		
Name of Employer (Required) South Mississippi Nephrology		
Occupation (Required) Physician	Aggregate Year-to-date	\$10,000.00
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
Full Name Mary Connor Adcock	10/01/2019	\$1,000.00
Mailing Address 1304 Lawhon Drive		
City, State, Zip Code Tupelo, MS 38804-1860		
Name of Employer (Required) McCullough Steel		
Occupation (Required) President	Aggregate Year-to-date	\$1,000.00
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
Full Name G. O. Griffith Jr.	10/03/2019	\$5,000.00
Mailing Address 625 Oakland Terrace		
City, State, Zip Code Alexandria, VA 22302-4114		
Name of Employer (Required) BGR Group		
Occupation (Required) Chairman	Aggregate Year-to-date	\$6,000.00
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
Full Name Andrew McNulty	10/22/2019	\$500.00
Mailing Address P.O. Box 13275		
City, State, Zip Code Portland, OR 97213-0275		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,500.00

Name of Candidate or Committee Tate for Governor
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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, Year)	Amount of each receipt this period
Full Name Woods Cattle Company	10/01/2019	\$500.00
Mailing Address P.O. Box 366		
City, State, Zip Code Byhalia, MS 38611-0366		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Betty Lou Jones	10/05/2019	\$104.48
Mailing Address 3637 Parkway Boulevard		
City, State, Zip Code Meridian, MS 39305-3869		
Name of Employer (Required) MDOC		
Occupation (Required) Social Worker	Aggregate Year-to-date	\$572.40

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
Full Name Kimberley Fritts	10/02/2019	\$1,000.00
Mailing Address 2700 Woodley Road Northwest #314		
City, State, Zip Code Washington, DC 20008-4151		
Name of Employer (Required) Cogent Strategies		
Occupation (Required) CEO	Aggregate Year-to-date	\$1,000.00

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
Full Name Kevin Payne	10/01/2019	\$250.00
Mailing Address 103 Lexington Lane		
City, State, Zip Code Fulton, MS 38843-6610		
Name of Employer (Required) F.L. Crane & Sons, Inc.		
Occupation (Required) Executive Vice President	Aggregate Year-to-date	\$250.00

Name of Candidate or Committee Tate for Governor
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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, Year)	Amount of each receipt this period
Full Name L. Sidney Charbonnet IV	10/09/2019	\$1,000.00
Mailing Address 18 Golf View Dr		
City, State, Zip Code Pass Christian, MS 39571-2007		
Name of Employer (Required) Seemann Composites Inc.		
Occupation (Required) President	Aggregate Year-to-date	\$1,000.00

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
Full Name Floyd Seal Jr.	10/09/2019	\$1,000.00
Mailing Address P.O. Box 240		
City, State, Zip Code Pascagoula, MS 39568-0240		
Name of Employer (Required) Empress Auto Sales, LLC		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,000.00

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Little Bluff, LLC	10/09/2019	\$1,000.00
Mailing Address P.O. Box 1437		
City, State, Zip Code Ocean Springs, MS 39566-1437		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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
Full Name James E. Carney II	10/01/2019	\$1,000.00
Mailing Address 2700 Marigold Cove		
City, State, Zip Code Tupelo, MS 38801-7129		
Name of Employer (Required) Life at Tupelo FPC		
Occupation (Required) Senior Pastor	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee

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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, Year)	Amount of each receipt this period
Full Name Thomas M. Duff	10/15/2019	\$5,000.00
Mailing Address 73 Tidewater Rd		
City, State, Zip Code Hattiesburg, MS 39402-9780		
Name of Employer (Required) Duff Brothers Capital		
Occupation (Required) Executive	Aggregate Year-to-date	\$15,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <i>Campaign committee</i>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Friends of Mike Ezell	10/09/2019	\$1,000.00
Mailing Address 1624 Roswell St		
City, State, Zip Code Pascagoula, MS 39581-2440		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name American Property Casualty Insurance Association	10/08/2019	\$5,000.00
Mailing Address 8700 W Bryn Mawr Ave Ste 1200S		
City, State, Zip Code Chicago, IL 60631-3512		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
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
Full Name Stewart Gammill IV	10/17/2019	\$500.00
Mailing Address 3702 Hardy Ste 2		
City, State, Zip Code Hattiesburg, MS 39402-1579		
Name of Employer (Required) Crosby-Mississippi Resources, Ltd		
Occupation (Required) Petroleum Engineer	Aggregate Year-to-date	\$500.00

Name of Candidate or Committee

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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, Year)	Amount of each receipt this period
Full Name Charles R. Porter	10/10/2019	\$5,000.00
Mailing Address 1037 Lake Village Circle STE A		
City, State, Zip Code Brandon, MS 39047-6725		
Name of Employer (Required) GuidePoint LLC		
Occupation (Required) Partner	Aggregate Year-to-date	\$10,000.00
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
Full Name Morris Miley	10/21/2019	\$250.00
Mailing Address 1061 Lakeshire Dr.		
City, State, Zip Code Tupelo, MS 38804-1125		
Name of Employer (Required) Melissa's Mattress		
Occupation (Required) Owner	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <i>Campaign Committee</i>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Friends of Angela Burks Hill	10/18/2019	\$1,000.00
Mailing Address 54 Watts Rd		
City, State, Zip Code Picayune, MS 39466-7846		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name Charlene Ramey	10/03/2019	\$2,500.00
Mailing Address 622 Highway 589		
City, State, Zip Code Purvis, MS 39475-4101		
Name of Employer (Required) CBR Property Management, Inc.		
Occupation (Required) President	Aggregate Year-to-date	\$2,500.00

Name of Candidate or Committee

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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, Year)	Amount of each receipt this period
Full Name Mark E. Power Jr.	10/15/2019	\$1,000.00
Mailing Address 113 Bella Vista Drive		
City, State, Zip Code Brandon, MS 39042-8252		
Name of Employer (Required) Community Bank		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00
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
Full Name Devere McLennan	10/01/2019	\$1,000.00
Mailing Address 210 Marketridge Drive		
City, State, Zip Code Ridgeland, MS 39157-6021		
Name of Employer (Required) Ward Mechanical Equipment		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,000.00
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
Full Name Arthur Mason	10/08/2019	\$250.00
Mailing Address 3302 Rolling Road		
City, State, Zip Code Chevy Chase, MD 20815-4034		
Name of Employer (Required) Cassidy and Associates		
Occupation (Required) Government Relations	Aggregate Year-to-date	\$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
Full Name M. Michele Forbes	10/18/2019	\$10,000.00
Mailing Address 8815 Island Road		
City, State, Zip Code Ventress, LA 70783-3122		
Name of Employer (Required) LSU Law		
Occupation (Required) Director of Student Affairs	Aggregate Year-to-date	\$10,000.00

Name of Candidate or Committee

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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>Campaign Committee</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Friends of Steven Utroska	10/18/2019	\$1,003.82
Mailing Address 8 Windlass Dr		
City, State, Zip Code Hattiesburg, MS 39402-9525		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,503.82
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
Full Name Louis P. Skrmetta	10/07/2019	\$1,000.00
Mailing Address 520 Beach Blvd Unit 608		
City, State, Zip Code Biloxi, MS 39530-4468		
Name of Employer (Required) Ship Island Excursions		
Occupation (Required) Ferry Pilot	Aggregate Year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George R. Rea Jr.	10/16/2019	\$100.00
Mailing Address 509 N Hills St		
City, State, Zip Code Meridian, MS 39305-2038		
Name of Employer (Required) RSG&S, LLP		
Occupation (Required) CPA	Aggregate Year-to-date	\$850.00
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
Full Name F. Cliff Kirkland	10/09/2019	\$250.00
Mailing Address 136 Thomas St.		
City, State, Zip Code Biloxi, MS 39530-4134		
Name of Employer (Required) City of Biloxi		
Occupation (Required) Civic Innovation and Development Officer	Aggregate Year-to-date	\$250.00

Name of Candidate or Committee Tate for Governor
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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, Year)	Amount of each receipt this period
Full Name Leslie Dane	10/13/2019	\$2,000.00
Mailing Address 11638 Bluff Lane		
City, State, Zip Code Gulfport, MS 39503-6151		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$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
Full Name Hu Meena	10/16/2019	\$2,500.00
Mailing Address 4764 E Massena Drive		
City, State, Zip Code Jackson, MS 39211-4930		
Name of Employer (Required) C Spire		
Occupation (Required) CEO	Aggregate Year-to-date	\$2,500.00

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barry Rhoads	10/02/2019	\$1,000.00
Mailing Address 6973 Father John Court		
City, State, Zip Code McLean, VA 22101		
Name of Employer (Required) Cassidy & Associates		
Occupation (Required) Government Relations	Aggregate Year-to-date	\$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
Full Name Blake Tartt III	10/15/2019	\$5,000.00
Mailing Address 514 Longmont		
City, State, Zip Code Houston, TX 77056		
Name of Employer (Required) New Regional Planning		
Occupation (Required) President & CEO	Aggregate Year-to-date	\$5,000.00

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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, Year)	Amount of each receipt this period
Full Name BRJ, Inc.	10/23/2019	\$500.00
Mailing Address 7048 U.S. Hwy 49		
City, State, Zip Code Hattiesburg, MS 39402-9159		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Duane Stevens	10/02/2019	\$250.00
Mailing Address 106 Cherry Cv		
City, State, Zip Code Madison, MS 39110-8557		
Name of Employer (Required) Stevens Mechanical Systems, Inc.		
Occupation (Required) Owner	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cindy Stevens	10/15/2019	\$500.00
Mailing Address 424 North Alfred Street		
City, State, Zip Code Alexandria, VA 22314-2225		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hassell Franklin	10/08/2019	\$1,000.00
Mailing Address 203 Susan Drive		
City, State, Zip Code Houston, MS 38851-2420		
Name of Employer (Required) Franklin Corp.		
Occupation (Required) CEO	Aggregate Year-to-date	\$3,000.00

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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, Year)	Amount of each receipt this period
Full Name Kelley Hudak	10/03/2019	\$250.00
Mailing Address 1301 M Street NW, APT 710		
City, State, Zip Code Washington, DC 20005-4226		
Name of Employer (Required) Cassidy & Associates		
Occupation (Required) Vice President	Aggregate Year-to-date	\$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
Full Name Richard M. McGuire	10/09/2019	\$250.00
Mailing Address 13200 Westminister Blvd.		
City, State, Zip Code Gulfport, MS 39503-4386		
Name of Employer (Required) Reynolds American, Inc.		
Occupation (Required) Sr. Division Manager	Aggregate Year-to-date	\$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
Full Name Jonathan Tate Reeves	10/21/2019	\$300,000.00
Mailing Address 110 Oakridge Trail		
City, State, Zip Code Flowood, MS 39232-8687		
Name of Employer (Required) State of Mississippi		
Occupation (Required) Lt Governor	Aggregate Year-to-date	\$300,000.00
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, Year)	Amount of each receipt this period
Full Name Chancellor Construction, LLC	10/24/2019	\$3,000.00
Mailing Address 1228 W 5th St.		
City, State, Zip Code Laurel, MS 39440-3808		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$3,000.00

Name of Candidate or Committee Tate for Governor
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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, Year)	Amount of each receipt this period
Full Name My Hospitality Services, LLC	10/14/2019	\$1,000.00
Mailing Address P.O. Box 2148		
City, State, Zip Code Mandeville, LA 70470-2148		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name John M. Lovorn Jr.	10/09/2019	\$1,000.00
Mailing Address 1925 Allyson Drive		
City, State, Zip Code Tupelo, MS 38804-1045		
Name of Employer (Required) The Pace Group, Inc.		
Occupation (Required) President	Aggregate Year-to-date	\$1,000.00
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
Full Name Kathryn B. Stewart	10/08/2019	\$1,000.00
Mailing Address 119 Shore Line Drive		
City, State, Zip Code Madison, MS 39110-6829		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada		
Occupation (Required) Government Relations	Aggregate Year-to-date	\$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
Full Name J. Scott Newton	10/17/2019	\$1,000.00
Mailing Address 206 Bellewether Pass		
City, State, Zip Code Ridgeland, MS 39157-8763		
Name of Employer (Required) Baker, Donelson, Bearman, Caldwell & Berkowitz		
Occupation (Required) Attorney	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Mitchell Todd Hairston	10/09/2019	\$2,500.00
Mailing Address 12 Cedarwood Ln		
City, State, Zip Code Gulfport, MS 39503-6221		
Name of Employer (Required) Covington Civil & Env.		
Occupation (Required) Managing Partner	Aggregate Year-to-date	\$3,000.00
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, Year)	Amount of each receipt this period
Full Name Monsanto Company	10/14/2019	\$1,000.00
Mailing Address 800 N Lindbergh Boulevard		
City, State, Zip Code Saint Louis, MO 63167-1000		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name Donna E. Roberts	10/15/2019	\$5,000.00
Mailing Address 503 N Lamar Boulevard		
City, State, Zip Code Oxford, MS 38655-3205		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$10,000.00
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
Full Name Guy Boyll	10/13/2019	\$1,000.00
Mailing Address 913 Montrose Drive		
City, State, Zip Code Ridgeland, MS 39157-1394		
Name of Employer (Required) BankPlus		
Occupation (Required) Banker	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Ben H. Stone	10/09/2019	\$1,000.00
Mailing Address PO Box 130		
City, State, Zip Code Gulfport, MS 39502-0130		
Name of Employer (Required) Balch & Bingham LLP		
Occupation (Required) Attorney	Aggregate Year-to-date	\$3,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Terry W. Green	10/09/2019	\$2,500.00
Mailing Address PO Box 2788		
City, State, Zip Code Sugar Land, TX 77487-2788		
Name of Employer (Required) Island View Casino Resort		
Occupation (Required) Owner	Aggregate Year-to-date	\$12,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Cormaci	10/08/2019	\$1,041.98
Mailing Address 516 East Rutland Street		
City, State, Zip Code Covington, LA 70433-3219		
Name of Employer (Required) Watch Systems		
Occupation (Required) President	Aggregate Year-to-date	\$1,041.98
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) PLLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jason Papania DMD, PLLC	10/09/2019	\$250.00
Mailing Address 410 Security Square		
City, State, Zip Code Gulfport, MS 39507-1952		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Colin Maloney	10/24/2019	\$2,700.00
Mailing Address PO Box 1366		
City, State, Zip Code Tupelo, MS 38802-1366		
Name of Employer (Required) Maloney Glass/Century Construction & Realty		
Occupation (Required) Owner	Aggregate Year-to-date	\$6,200.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name General Motors Company PAC	10/02/2019	\$5,000.00
Mailing Address 25 Massachusetts Ave NW Ste 400		
City, State, Zip Code Washington, DC 20001-1427		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
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, Year)	Amount of each receipt this period
Full Name Zurich American Insurance Company	10/11/2019	\$1,000.00
Mailing Address 1299 Zurich Way		
City, State, Zip Code Schaumburg, IL 60196-5870		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name Betty Lou Jones	10/18/2019	\$100.00
Mailing Address 3637 Parkway Boulevard		
City, State, Zip Code Meridian, MS 39305-3869		
Name of Employer (Required) MDOC		
Occupation (Required) Social Worker	Aggregate Year-to-date	\$672.40

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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, Year)	Amount of each receipt this period
Full Name Ali Bhatti	10/17/2019	\$500.00
Mailing Address 5614 Thornberry Place		
City, State, Zip Code Meridian, MS 39305-2716		
Name of Employer (Required) Heritage Hospitality Group		
Occupation (Required) Executive VP	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Smith	10/02/2019	\$1,041.98
Mailing Address 1080 Augusta Drive		
City, State, Zip Code Oxford, MS 38655-8142		
Name of Employer (Required) Mercury, LLC		
Occupation (Required) Consultant	Aggregate Year-to-date	\$1,041.98

Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Baker Donelson Mississippi PAC	10/17/2019	\$5,000.00
Mailing Address PO Box 14167		
City, State, Zip Code Jackson, MS 39236-4167		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$6,000.00

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
Full Name James W. Rayner	10/15/2019	\$3,000.00
Mailing Address 6 Oak Place		
City, State, Zip Code Oxford, MS 38655-2704		
Name of Employer (Required) Self		
Occupation (Required) Opthmologist	Aggregate Year-to-date	\$3,000.00

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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, Year)	Amount of each receipt this period
Full Name <u>Epic Amusement, LLC</u>	<u>10/18/2019</u>	<u>\$2,500.00</u>
Mailing Address <u>2260 Jonesboro Road</u>		
City, State, Zip Code <u>McDonough, GA 30253-5913</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	<u>\$2,500.00</u>
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
Full Name <u>Skip Cooper</u>	<u>10/26/2019</u>	<u>\$1,000.00</u>
Mailing Address <u>PO Box 131387</u>		
City, State, Zip Code <u>Birmingham, AL 35213-6387</u>		
Name of Employer (Required) <u>AmWins Group</u>		
Occupation (Required) <u>Executive</u>	Aggregate Year-to-date	<u>\$1,000.00</u>
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
Full Name <u>Mathew W. Lipscomb III</u>	<u>10/15/2019</u>	<u>\$500.00</u>
Mailing Address <u>1900 Baldwin Road</u>		
City, State, Zip Code <u>Lake Cormorant, MS 38641-9619</u>		
Name of Employer (Required) <u>Lipscomb & Pitts Insurance</u>		
Occupation (Required) <u>CEO</u>	Aggregate Year-to-date	<u>\$500.00</u>
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
Full Name <u>Otis Johnson Jr.</u>	<u>10/19/2019</u>	<u>\$400.00</u>
Mailing Address <u>110 Summers Bay Drive</u>		
City, State, Zip Code <u>Ridgeland, MS 39157-9209</u>		
Name of Employer (Required) <u>Biggs, Ingram & Solop, PLLC</u>		
Occupation (Required) <u>Attorney</u>	Aggregate Year-to-date	<u>\$400.00</u>

Name of Candidate or Committee

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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, Year)	Amount of each receipt this period
Full Name Johnny Morgan	10/15/2019	\$5,000.00
Mailing Address PO Box 309		
City, State, Zip Code Oxford, MS 38655-0309		
Name of Employer (Required) Morgan White Group		
Occupation (Required) President	Aggregate Year-to-date	\$27,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Garry V. Hughes	10/14/2019	\$250.00
Mailing Address PO Box 30		
City, State, Zip Code Louisville, MS 39339-0030		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Prentiss Club Museum, LLC	10/22/2019	\$2,500.00
Mailing Address 312 Main Street		
City, State, Zip Code Natchez, MS 39120-3462		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ralph Skinner	10/03/2019	\$500.00
Mailing Address 6201 County Road 700		
City, State, Zip Code Blue Mountain, MS 38610-9667		
Name of Employer (Required) Ralph J. Skinner Enterprises, LLC		
Occupation (Required) Owner	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Lynn Oglesby	10/03/2019	\$205.00
Mailing Address 514 Bunkley Road SW		
City, State, Zip Code Meadville, MS 39653-9185		
Name of Employer (Required) Self		
Occupation (Required) Contractor	Aggregate Year-to-date	\$205.00
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
Full Name Ralph H. Doxey Sr.	10/02/2019	\$500.00
Mailing Address P.O. Box 667		
City, State, Zip Code Holly Springs, MS 38635-0667		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <i>Campaign Committee</i>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dennis Debar Campaign	10/12/2019	\$1,000.00
Mailing Address PO Box 1090		
City, State, Zip Code Leakesville, MS 39451-1090		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name James M. Currie	10/14/2019	\$250.00
Mailing Address 27020 Road 221		
City, State, Zip Code Picayune, MS 39466-8515		
Name of Employer (Required) Self		
Occupation (Required) Farmer	Aggregate Year-to-date	\$1,250.00

Name of Candidate or Committee Tate for Governor
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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, Year)	Amount of each receipt this period
Full Name Benjamin J Spraggins	10/09/2019	\$250.00
Mailing Address 12114 Kent Avenue		
City, State, Zip Code Gulfport, MS 39503-2604		
Name of Employer (Required) Mississippi Department of Marine Resources		
Occupation (Required) Executive Director	Aggregate Year-to-date	\$750.00
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
Full Name Buddy Mortimer	10/18/2019	\$250.00
Mailing Address PO Box 215		
City, State, Zip Code Kilmichael, MS 39747-0215		
Name of Employer (Required) Bank Of Kilmichael		
Occupation (Required) Banker	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi Strong	10/22/2019	\$500,000.00
Mailing Address 1747 Pennsylvania Ave NW Ste 250		
City, State, Zip Code Washington, DC 20006-4643		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,629,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jamie Holder	10/21/2019	\$1,000.00
Mailing Address 523 Highway 528		
City, State, Zip Code Bay Springs, MS 39422-4825		
Name of Employer (Required) Hol-Mac Corporation		
Occupation (Required) Manager	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee

Tate for Governor

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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, Year)	Amount of each receipt this period
Full Name W.L. Walters, CPA's	10/15/2019	\$1,000.00
Mailing Address P.O. Box 896		
City, State, Zip Code Clarksdale, MS 38614-0896		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name Charles M. Harker	10/20/2019	\$500.00
Mailing Address 1150 Foothill Blvd Ste D		
City, State, Zip Code La Canada Flintridge, CA 91011-3269		
Name of Employer (Required) Charles Harker & Company, CPA		
Occupation (Required) CPA	Aggregate Year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Conduent Incorporated PAC	10/24/2019	\$5,000.00
Mailing Address 1800 M St NW North Tower, Ste 525N		
City, State, Zip Code Washington, DC 20036-5802		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
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
Full Name Carol A. Friedman	10/08/2019	\$4,000.00
Mailing Address 43503 Butler Place		
City, State, Zip Code Leesburg, VA 20176		
Name of Employer (Required) Homemaker		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$4,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Waypoint Consulting, LLC	10/11/2019	\$1,000.00
Mailing Address 601 Pennsylvania Ave. Nw STE 900 SOUTH BUILDING		
City, State, Zip Code Washington, DC 20004-3647		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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
Full Name Joey Fillingane	10/16/2019	\$1,000.00
Mailing Address 8 Westbrook Drive		
City, State, Zip Code Sumrall, MS 39482-7903		
Name of Employer (Required) Fillingane Law Firm		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00

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
Full Name Clyde X. Copeland III	10/04/2019	\$1,000.00
Mailing Address 106 Glenwood Bend		
City, State, Zip Code Madison, MS 39110-6575		
Name of Employer (Required) Harris Jernigan & Geno		
Occupation (Required) Attorney	Aggregate Year-to-date	\$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
Full Name W.C. Deviney Jr.	10/15/2019	\$1,000.00
Mailing Address PO Box 6717		
City, State, Zip Code Jackson, MS 39282-6717		
Name of Employer (Required) Deviney Construction Company, Inc.		
Occupation (Required) CEO	Aggregate Year-to-date	\$4,500.00

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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, Year)	Amount of each receipt this period
Full Name Kevin Stump	10/09/2019	\$250.00
Mailing Address 312 London Cove		
City, State, Zip Code Brandon, MS 39047-6900		
Name of Employer (Required) Mississippi Organ Recovery Agency		
Occupation (Required) CEO	Aggregate Year-to-date	\$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
Full Name Andy Morris	10/23/2019	\$104.48
Mailing Address 1085 CR 25		
City, State, Zip Code Myrtle, MS 38650-9312		
Name of Employer (Required) Southern Corrosion		
Occupation (Required) Sales	Aggregate Year-to-date	\$204.48

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name US Medical Management, LLC	10/01/2019	\$30,000.00
Mailing Address 500 Kirts Blvd.		
City, State, Zip Code Troy, MI 48084-4134		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$30,000.00

Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name TransCanada USA Services, Inc. PAC	10/02/2019	\$5,000.00
Mailing Address 1250 I St NW Ste 225		
City, State, Zip Code Washington, DC 20005-5977		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00

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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, Year)	Amount of each receipt this period
Full Name William Chad McMahan	10/17/2019	\$1,000.00
Mailing Address 1537 Hwy 145		
City, State, Zip Code Guntown, MS 38849-7940		
Name of Employer (Required) State of MS		
Occupation (Required) Senator	Aggregate Year-to-date	\$1,000.00
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
Full Name H.L. Williams Jr.	10/03/2019	\$500.00
Mailing Address PO Box 239		
City, State, Zip Code Corinth, MS 38835-0239		
Name of Employer (Required) Coca-Cola Bottling		
Occupation (Required) Executive	Aggregate Year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC In-kind office space	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 4 River Bend Place LLC	10/01/2019	\$1,988.29
Mailing Address 4 River Bend Pl. suite 210		
City, State, Zip Code Flowood, MS 39232-7619		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$19,882.90
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
Full Name Haley Barbour	10/08/2019	\$5,000.00
Mailing Address 648 Dogwood Drive		
City, State, Zip Code Yazoo City, MS 39194-8205		
Name of Employer (Required) BGR Group		
Occupation (Required) Executive	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Jason S. Dean	10/08/2019	\$500.00
Mailing Address 195 Reunion Blvd		
City, State, Zip Code Madison, MS 39110-8095		
Name of Employer (Required) Tenax Aerospace		
Occupation (Required) Vice President of Program Development	Aggregate Year-to-date	\$1,750.00
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
Full Name Ronald G. Wanek	10/03/2019	\$5,000.00
Mailing Address 1205 Snell Isle Boulevard NE		
City, State, Zip Code St Petersburg, FL 33704-3035		
Name of Employer (Required) Ashley Furniture		
Occupation (Required) Chairman	Aggregate Year-to-date	\$5,000.00
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
Full Name Tom Kline	10/02/2019	\$500.00
Mailing Address 7050 Highway 25 North		
City, State, Zip Code Fulton, MS 38843-7561		
Name of Employer (Required) Kline Mechanical Systems, Inc.		
Occupation (Required) President	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anna Marie Barnes	10/16/2019	\$100.00
Mailing Address 3980 Council Circle		
City, State, Zip Code Jackson, MS 39206-5811		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Jordan Bernstein	10/01/2019	\$500.00
Mailing Address 9336 Castle Hill Road		
City, State, Zip Code Springfield, VA 22153-3900		
Name of Employer (Required) Cassidy and Associates		
Occupation (Required) Government Relations	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Fisher	10/08/2019	\$500.00
Mailing Address 205 Audubon Point Dr		
City, State, Zip Code Brandon, MS 39047-6408		
Name of Employer (Required) Butler Snow		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <u>In-kind office space</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barry W. Bridgforth	10/01/2019	\$850.00
Mailing Address 3606 Bridgeforth Road		
City, State, Zip Code Olive Branch, MS 38654-6924		
Name of Employer (Required) Bridgforth Realty, Inc.		
Occupation (Required) President, Director	Aggregate Year-to-date	\$4,250.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name MS Hospitality & Restaurant Association PAC	10/01/2019	\$1,000.00
Mailing Address 11 Northtown Dr Ste 125		
City, State, Zip Code Jackson, MS 39211-3619		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ferraiez Lamar Holdings, LLC	10/24/2019	\$1,000.00
Mailing Address 601 East Central Ave		
City, State, Zip Code Petal, MS 39465-2974		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name Gary Chism	10/05/2019	\$2,500.00
Mailing Address PO Box 2343		
City, State, Zip Code Columbus, MS 39704-2343		
Name of Employer (Required) Columbus Insurance Services, Inc.		
Occupation (Required) Insurance Agent	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hometown Storage & Moving Supply Center, LLC	10/15/2019	\$5,000.00
Mailing Address 425 Hwy 6 West		
City, State, Zip Code Oxford, MS 38655-9527		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
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
Full Name Bradley E. Williams	10/18/2019	\$250.00
Mailing Address 2074 Brecon Drive		
City, State, Zip Code Jackson, MS 39211-5838		
Name of Employer (Required) Self		
Occupation (Required) Attorney	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Alfred McNair Jr.	10/07/2019	\$1,000.00
Mailing Address 2953 Bienville Blvd #142		
City, State, Zip Code Ocean Springs, MS 39564-4305		
Name of Employer (Required) Digestive Health Center PA		
Occupation (Required) Physician	Aggregate Year-to-date	\$3,000.00
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, Year)	Amount of each receipt this period
Full Name Deviney Brothers, Inc.	10/15/2019	\$1,000.00
Mailing Address PO Box 6717		
City, State, Zip Code Jackson, MS 39282-6717		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name Jaimie Patel	10/11/2019	\$500.00
Mailing Address 104 Carlton Place		
City, State, Zip Code Vicksburg, MS 39180-1824		
Name of Employer (Required) Self		
Occupation (Required) Interior Designer	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Stroud	10/24/2019	\$100.00
Mailing Address 593 Glendale Rd.		
City, State, Zip Code New Albany, MS 38652-2609		
Name of Employer (Required) Self		
Occupation (Required) Insurance Agent	Aggregate Year-to-date	\$1,096.15

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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, Year)	Amount of each receipt this period
Full Name Massey Glass, LLC	10/04/2019	\$500.00
Mailing Address 905 Meadow Hill Court		
City, State, Zip Code Brandon, MS 39047-5167		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00

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, Year)	Amount of each receipt this period
Full Name Third Lake Capital, LLC	10/08/2019	\$20,000.00
Mailing Address 1513 East 8th Ave.		
City, State, Zip Code Tampa, FL 33605-3707		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$25,000.00

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
Full Name S. L. Sethi	10/16/2019	\$2,000.00
Mailing Address 100 Trey Cove		
City, State, Zip Code Madison, MS 39110-7869		
Name of Employer (Required) Jackies International		
Occupation (Required) Owner	Aggregate Year-to-date	\$2,501.00

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, Year)	Amount of each receipt this period
Full Name Salute Italian, LLC	10/09/2019	\$250.00
Mailing Address 1712 15th Street Ste 100		
City, State, Zip Code Gulfport, MS 39501-2140		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Elisa Fuller	10/08/2019	\$500.00
Mailing Address 828 W Briar Lake Drive		
City, State, Zip Code Starkville, MS 39759-2970		
Name of Employer (Required) Federal Solutions LLC		
Occupation (Required) CFO	Aggregate Year-to-date	\$1,000.00
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
Full Name Don E. Mason	10/09/2019	\$250.00
Mailing Address 5 Colonel Wink Drive		
City, State, Zip Code Gulfport, MS 39507-4252		
Name of Employer (Required) Seermann Composites, LLC		
Occupation (Required) Government Relations	Aggregate Year-to-date	\$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
Full Name Phillip Bowman	10/15/2019	\$500.00
Mailing Address 250 Commerce Park Drive		
City, State, Zip Code Jackson, MS 39213-7052		
Name of Employer (Required) Specialty Metals Supply, Inc.		
Occupation (Required) Owner	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Monica Sethi Harrigill	10/16/2019	\$2,500.00
Mailing Address 106 Gabriel Place		
City, State, Zip Code Madison, MS 39110-8532		
Name of Employer (Required) Jackie's International		
Occupation (Required) President	Aggregate Year-to-date	\$7,500.00

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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, Year)	Amount of each receipt this period
Full Name Lesley Davis	10/13/2019	\$1,000.00
Mailing Address 200 Bent Tree Cv		
City, State, Zip Code Flowood, MS 39232-8689		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$7,000.00
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
Full Name Howard Fisackerly	10/10/2019	\$50.00
Mailing Address 2738 Canterbury Rd.		
City, State, Zip Code Columbus, MS 39705-1931		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$300.00
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
Full Name Scott Hambleton	10/18/2019	\$52.40
Mailing Address 174 Northshore Way		
City, State, Zip Code Madison, MS 39110-7177		
Name of Employer (Required) MSMA		
Occupation (Required) Physician	Aggregate Year-to-date	\$209.60
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
Full Name Larry Newsom Jr.	10/26/2019	\$100.00
Mailing Address 1831 Mount Pleasant Road		
City, State, Zip Code Hernando, MS 38632-1602		
Name of Employer (Required) Somner Express		
Occupation (Required) CEO	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Don Newcomb	10/07/2019	\$5,000.00
Mailing Address 1108 S Lamar Boulevard		
City, State, Zip Code Oxford, MS 38655-4732		
Name of Employer (Required) Self		
Occupation (Required) Dentist	Aggregate Year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bully Bloc	10/01/2019	\$25,000.00
Mailing Address PO Box 1591		
City, State, Zip Code Jackson, MS 39215-1591		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$25,000.00
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, Year)	Amount of each receipt this period
Full Name Custom Alloys Corp.	10/24/2019	\$500.00
Mailing Address P.O. Box 554		
City, State, Zip Code New Albany, MS 38652-0554		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sidney P. Allen Jr.	10/15/2019	\$1,000.00
Mailing Address 200 Brae Burn Dr		
City, State, Zip Code Jackson, MS 39211-2504		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada		
Occupation (Required) Government Relations	Aggregate Year-to-date	\$2,500.00

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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, Year)	Amount of each receipt this period
Full Name Ted Foster	10/11/2019	\$250.00
Mailing Address 3263 Mississippi 341		
City, State, Zip Code Pontotoc, MS 38863		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny L. Crane Jr.	10/02/2019	\$2,000.00
Mailing Address 116 Francis Dr.		
City, State, Zip Code Fulton, MS 38843-8434		
Name of Employer (Required) F.L. Crane and Sons Construction		
Occupation (Required) President	Aggregate Year-to-date	\$4,500.00
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, Year)	Amount of each receipt this period
Full Name J & N Timber, Inc.	10/15/2019	\$700.00
Mailing Address P.O. Box 527		
City, State, Zip Code Liberty, MS 39645-0527		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$700.00
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
Full Name C. W. Chapman	10/14/2019	\$5,000.00
Mailing Address PO Box 550		
City, State, Zip Code Oxford, MS 38655-0550		
Name of Employer (Required) Cornerstone Capital Corporation		
Occupation (Required) Treasurer	Aggregate Year-to-date	\$6,000.00

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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, Year)	Amount of each receipt this period
Full Name Robert Schaeffer Dane	10/09/2019	\$250.00
Mailing Address 11622 Bluff Ln		
City, State, Zip Code Gulfport, MS 39503-6151		
Name of Employer (Required) United States Marine, Inc.		
Occupation (Required) Vice President	Aggregate Year-to-date	\$3,250.00
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
Full Name Kenneth Windham	10/10/2019	\$100.00
Mailing Address 94 Grandview Circle		
City, State, Zip Code Brandon, MS 39047-7398		
Name of Employer (Required) iHeart Media		
Occupation (Required) Market President	Aggregate Year-to-date	\$400.00
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
Full Name Robert L. Smith Jr.	10/17/2019	\$100.00
Mailing Address 7 E Commerce Street		
City, State, Zip Code Hernando, MS 38632-2215		
Name of Employer (Required) Self		
Occupation (Required) Dentist	Aggregate Year-to-date	\$621.34
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
Full Name William Russell King	10/07/2019	\$500.00
Mailing Address 8525 Georgetown Pike		
City, State, Zip Code Mc Lean, VA 22102-1204		
Name of Employer (Required) Freeport-McMoran		
Occupation (Required) Senior Vice President International Relations	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name B.J. Canup	10/03/2019	\$500.00
Mailing Address 102 Francis Drive		
City, State, Zip Code Fulton, MS 38843-8434		
Name of Employer (Required) Tremont Floral		
Occupation (Required) President	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew M. Gilich Jr.	10/09/2019	\$1,000.00
Mailing Address 2026 Tuilleries Cove		
City, State, Zip Code Biloxi, MS 39531-2423		
Name of Employer (Required) City of Biloxi		
Occupation (Required) Mayor	Aggregate Year-to-date	\$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
Full Name Ronnie Gibson II	10/24/2019	\$1,500.00
Mailing Address 47 Monarch Blvd		
City, State, Zip Code Hattiesburg, MS 39402-7200		
Name of Employer (Required) Southeast Aviation		
Occupation (Required) Manager	Aggregate Year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ricky J. Cox	10/09/2019	\$500.00
Mailing Address 21 Colonel Wink Drive		
City, State, Zip Code Gulfport, MS 39507-4252		
Name of Employer (Required) Balch & Bingham		
Occupation (Required) Managing Partner	Aggregate Year-to-date	\$1,500.00

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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, Year)	Amount of each receipt this period
Full Name Mike James	10/05/2019	\$500.00
Mailing Address 204 ESPLANADE DR		
City, State, Zip Code Brandon, MS 39047-8782		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Boyce Delashmit	10/15/2019	\$5,000.00
Mailing Address 557 A. Gilmer Road		
City, State, Zip Code Waterford, MS 38685-9727		
Name of Employer (Required) Contract Fabricators, Inc.		
Occupation (Required) President	Aggregate Year-to-date	\$5,000.00

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
Full Name William B. Rayburn	10/15/2019	\$5,000.00
Mailing Address 9 Industrial Park Drive Ste 114		
City, State, Zip Code Oxford, MS 38655-9332		
Name of Employer (Required) CMDC, Inc.		
Occupation (Required) Vice President	Aggregate Year-to-date	\$10,000.00

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
Full Name Manisha Sethi	10/16/2019	\$2,000.00
Mailing Address 120 Woodland Hills Boulevard		
City, State, Zip Code Madison, MS 39110-7820		
Name of Employer (Required) Self		
Occupation (Required) Physician	Aggregate Year-to-date	\$2,000.00

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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, Year)	Amount of each receipt this period
Full Name William Alias Jr.	10/16/2019	\$5,000.00
Mailing Address PO Box 1544		
City, State, Zip Code Oxford, MS 38655-1544		
Name of Employer (Required) Security Holdings, LLC		
Occupation (Required) Owner	Aggregate Year-to-date	\$10,000.00
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
Full Name C. Scott Baker	10/01/2019	\$250.00
Mailing Address 111 Ashley Drive		
City, State, Zip Code Brandon, MS 39042-2371		
Name of Employer (Required) MDWFP		
Occupation (Required) Wildlife Biologist	Aggregate Year-to-date	\$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
Full Name N. Brad Carter Jr.	10/17/2019	\$500.00
Mailing Address 6205 Semmes Road		
City, State, Zip Code Meridian, MS 39305		
Name of Employer (Required) Carter Miller Sansing, LTD		
Occupation (Required) Senior Principal	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bill Russell	10/08/2019	\$1,500.00
Mailing Address PO Box 9180		
City, State, Zip Code Columbus, MS 39705-0016		
Name of Employer (Required) Bill Russell Ford		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,500.00

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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, Year)	Amount of each receipt this period
Full Name Muljibhai N. Patel	10/03/2019	\$500.00
Mailing Address 1004 Top Street		
City, State, Zip Code Flowood, MS 39232-9579		
Name of Employer (Required) Prema, LLC		
Occupation (Required) Manager	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Vipin S. Patel	10/09/2019	\$250.00
Mailing Address 735 Country Place Drive		
City, State, Zip Code Pearl, MS 39208-6619		
Name of Employer (Required) Central Nephrology Clinic		
Occupation (Required) Physician	Aggregate Year-to-date	\$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
Full Name Rhonda L. Dunaway	10/03/2019	\$250.00
Mailing Address 10673 Oakcrest Drive N.		
City, State, Zip Code Biloxi, MS 39532-8305		
Name of Employer (Required) Coastal Family Health Center		
Occupation (Required) Pharmacist	Aggregate Year-to-date	\$350.00
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
Full Name Chip Crane II	10/02/2019	\$1,000.00
Mailing Address PO Box 428		
City, State, Zip Code Fulton, MS 38843-0428		
Name of Employer (Required) F.L. Crane & Sons, Inc.		
Occupation (Required) CEO	Aggregate Year-to-date	\$1,000.00

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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, Year)	Amount of each receipt this period
Full Name CDG Properties, Inc.	10/18/2019	\$500.00
Mailing Address P.O. Box 398		
City, State, Zip Code Port Gibson, MS 39150-0398		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steve Bolin	10/04/2019	\$500.00
Mailing Address 530 Highway 15		
City, State, Zip Code Blue Mountain, MS 38610-9720		
Name of Employer (Required) JNS Biofuel, LLC		
Occupation (Required) Owner	Aggregate Year-to-date	\$500.00
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, Year)	Amount of each receipt this period
Full Name Weyerhaeuser NR Company	10/17/2019	\$1,000.00
Mailing Address 220 Occidental Ave S		
City, State, Zip Code Seattle, WA 98104-3120		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name B. Keith Heard	10/04/2019	\$250.00
Mailing Address 1822 Stinson Creek Road		
City, State, Zip Code Columbus, MS 39705-9352		
Name of Employer (Required) Key Impact Strategies		
Occupation (Required) Lobbyist	Aggregate Year-to-date	\$6,250.00

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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, Year)	Amount of each receipt this period
Full Name Douglas Wesley Rouse Jr.	10/13/2019	\$500.00
Mailing Address 111 Bedford Rd		
City, State, Zip Code Hattiesburg, MS 39402-2302		
Name of Employer (Required) Southern Bone and Joint Specialists		
Occupation (Required) Orthopedic Surgeon	Aggregate Year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Chan Patel	10/15/2019	\$5,000.00
Mailing Address 5009 Bluff Cv		
City, State, Zip Code Oxford, MS 38655-5978		
Name of Employer (Required) Hampton Inn		
Occupation (Required) Owner	Aggregate Year-to-date	\$6,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pascagoula Bar Pilots Association, LLC	10/10/2019	\$1,000.00
Mailing Address Po Box 2156		
City, State, Zip Code Pascagoula, MS 39569-2156		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name Carson M. Hughes	10/08/2019	\$500.00
Mailing Address 20 Carriage Court Place		
City, State, Zip Code Brandon, MS 39047-8776		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,521.15

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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, Year)	Amount of each receipt this period
Full Name Pete Johnson	10/15/2019	\$5,000.00
Mailing Address 405 Court Street		
City, State, Zip Code Clarksdale, MS 38614-2715		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Land Holdings I, LLC	10/09/2019	\$2,000.00
Mailing Address 9380 Central Ave		
City, State, Zip Code Diberville, MS 39540-5302		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$10,000.00
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
Full Name Thomas Schmidt	10/09/2019	\$260.73
Mailing Address 536 Dynsmore Place		
City, State, Zip Code Long Beach, MS 39560-3143		
Name of Employer (Required) AVL Wealthcare		
Occupation (Required) Investment advisor/Wealth Manager	Aggregate Year-to-date	\$260.73
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
Full Name Johnny Morgan	10/15/2019	\$5,000.00
Mailing Address PO Box 309		
City, State, Zip Code Oxford, MS 38655-0309		
Name of Employer (Required) Morgan White Group		
Occupation (Required) President	Aggregate Year-to-date	\$20,000.00

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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, Year)	Amount of each receipt this period
Full Name Chad Blalack	10/09/2019	\$1,500.00
Mailing Address 3 Bayou Place		
City, State, Zip Code Gulfport, MS 39503-6202		
Name of Employer (Required) Care In Home Health		
Occupation (Required) COO	Aggregate Year-to-date	\$2,500.00
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, Year)	Amount of each receipt this period
Full Name Circle J Enterprises, Inc.	10/16/2019	\$500.00
Mailing Address 405 Ashtead Ct.		
City, State, Zip Code Ridgeland, MS 39157-4137		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold W. Hankins	10/03/2019	\$250.00
Mailing Address 106 Forest Gate Road		
City, State, Zip Code Ripley, MS 38663-9051		
Name of Employer (Required) Hankins, Inc.		
Occupation (Required) Owner	Aggregate Year-to-date	\$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
Full Name Jim Haffey	10/23/2019	\$260.73
Mailing Address 204 Fairway Lane		
City, State, Zip Code Kosciusko, MS 39090-4603		
Name of Employer (Required) Holmes Community College		
Occupation (Required) President	Aggregate Year-to-date	\$260.73

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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, Year)	Amount of each receipt this period
Full Name Boyce Adams Sr.	10/08/2019	\$500.00
Mailing Address 11 Scotland Yard		
City, State, Zip Code West Point, MS 39773-8221		
Name of Employer (Required) Banktel		
Occupation (Required) Chairman	Aggregate Year-to-date	\$8,000.00

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
Full Name Jason Overstreet	10/09/2019	\$250.00
Mailing Address 53 Walton Road		
City, State, Zip Code Wiggins, MS 39577-9228		
Name of Employer (Required) Overstreet and Associates		
Occupation (Required) Owner	Aggregate Year-to-date	\$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
Full Name Jim Sneed	10/07/2019	\$1,041.98
Mailing Address 1121B Bienville St		
City, State, Zip Code Tupelo, MS 38801-2403		
Name of Employer (Required) Affordable Furniture Inc.		
Occupation (Required) Founder and CEO	Aggregate Year-to-date	\$1,241.98

Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnson & Johnson PAC	10/09/2019	\$500.00
Mailing Address 1350 I St NW Ste 1210		
City, State, Zip Code Washington, DC 20005-3305		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name George H. Collins III	10/14/2019	\$250.00
Mailing Address 112 Monica Way		
City, State, Zip Code Lucedale, MS 39452-6248		
Name of Employer (Required) George County Sheriffs Office		
Occupation (Required) Sheriff Deputy	Aggregate Year-to-date	\$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
Full Name Thomas Shipman	10/08/2019	\$500.00
Mailing Address 7300 Gordons Rd		
City, State, Zip Code Falls Church, VA 22043-3032		
Name of Employer (Required) Cornerstone Government Affairs Inc.		
Occupation (Required) Principal	Aggregate Year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carl L. Boyanton	10/09/2019	\$250.00
Mailing Address 425 S. Woodlake Way		
City, State, Zip Code Pearl River, LA 70452-6322		
Name of Employer (Required) Farm Fresh Produce		
Occupation (Required) President	Aggregate Year-to-date	\$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
Full Name Carson M. Hughes	10/26/2019	\$50.00
Mailing Address 20 Carriage Court Place		
City, State, Zip Code Brandon, MS 39047-8776		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,571.15

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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, Year)	Amount of each receipt this period
Full Name Robert Yarber	10/23/2019	\$1,000.00
Mailing Address 3030 Orchid Circle		
City, State, Zip Code Tupelo, MS 38801-8210		
Name of Employer (Required) ENT Physicians of North MS		
Occupation (Required) Physician	Aggregate Year-to-date	\$2,200.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <u>Rebate</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trustmark National Bank Credit Card Center	10/22/2019	\$0.40
Mailing Address P.O. Box 143		
City, State, Zip Code Jackson, MS 39205-0143		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$233.80
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, Year)	Amount of each receipt this period
Full Name D & C Limited Investments, LLC	10/15/2019	\$1,000.00
Mailing Address 1059 Deviney Drive		
City, State, Zip Code Raymond, MS 39154-8387		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name Hunter Lipscomb	10/08/2019	\$250.00
Mailing Address 605 Arbour Ct.		
City, State, Zip Code Ridgeland, MS 39157-4187		
Name of Employer (Required) U.S. House of Representatives		
Occupation (Required) Chief of Staff	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee

Tate for Governor

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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, Year)	Amount of each receipt this period
Full Name Donald Clark	10/07/2019	\$1,000.00
Mailing Address PO Box 6010		
City, State, Zip Code Ridgeland, MS 39158-6010		
Name of Employer (Required) Butler Snow O'mara Stevens & Cannada		
Occupation (Required) Attorney	Aggregate Year-to-date	\$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
Full Name Gary A. Blair	10/21/2019	\$500.00
Mailing Address 810 Greenbriar St		
City, State, Zip Code Starkville, MS 39759-4379		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name North American Coal PAC	10/18/2019	\$5,000.00
Mailing Address 5340 Legacy Dr Ste 300		
City, State, Zip Code Plano, TX 75024-3141		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
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
Full Name Wendy Richens Hill	10/07/2019	\$25.00
Mailing Address 107 Bella Cima Dr		
City, State, Zip Code Austin, TX 78734-2651		
Name of Employer (Required) Self		
Occupation (Required) Interior Designer	Aggregate Year-to-date	\$231.15

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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, Year)	Amount of each receipt this period
Full Name James Keegan	10/01/2019	\$1,041.98
Mailing Address 2250 Tully Farms Cove		
City, State, Zip Code Memphis, TN 38119-6642		
Name of Employer (Required) Adams Keegan, Inc.		
Occupation (Required) CEO	Aggregate Year-to-date	\$1,041.98
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
Full Name Joseph D. Austin	10/07/2019	\$500.00
Mailing Address 100 Maxwell Dr		
City, State, Zip Code Vicksburg, MS 39180-4476		
Name of Employer (Required) Vicksburg Womens Care		
Occupation (Required) Physician	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Brant Pettis	10/09/2019	\$1,000.00
Mailing Address 46 54th St.		
City, State, Zip Code Gulfport, MS 39507-4609		
Name of Employer (Required) Balch & Bingham LLP		
Occupation (Required) Attorney	Aggregate Year-to-date	\$3,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Lemon	10/09/2019	\$1,000.00
Mailing Address 126 Holcomb Boulevard		
City, State, Zip Code Ocean Springs, MS 39564-5030		
Name of Employer (Required) Lemon-Mohler Insurance Agency		
Occupation (Required) Partner	Aggregate Year-to-date	\$2,000.00

Name of Candidate or Committee

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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, Year)	Amount of each receipt this period
Full Name Alben Norris Hopkins Sr.	10/24/2019	\$500.00
Mailing Address 2701 24th Avenue		
City, State, Zip Code Gulfport, MS 39501-4941		
Name of Employer (Required) Hopkins Barvie & Hopkins		
Occupation (Required) Attorney	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles W. Rigdon	10/02/2019	\$115.00
Mailing Address PO Box 2182		
City, State, Zip Code Columbus, MS 39704-2182		
Name of Employer (Required) Columbus Nissan		
Occupation (Required) Owner	Aggregate Year-to-date	\$3,615.00

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
Full Name Don Underwood	10/17/2019	\$250.00
Mailing Address 987 S. Church St.		
City, State, Zip Code Brookhaven, MS 39601-4003		
Name of Employer (Required) Metis Services, LLC		
Occupation (Required) Principal	Aggregate Year-to-date	\$250.00

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kumar Leasing, LLC	10/16/2019	\$2,000.00
Mailing Address 2037 Blocker Road		
City, State, Zip Code Crystal Springs, MS 39059-9237		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,000.00

Name of Candidate or Committee Tate for Governor
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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, Year)	Amount of each receipt this period
Full Name <u>Anthony L. Smith</u>	10/09/2019	\$250.00
Mailing Address <u>1011 South Allen St.</u>		
City, State, Zip Code <u>Poplarville, MS 39470-3101</u>		
Name of Employer (Required) <u>The City of Poplarville</u>		
Occupation (Required) <u>Alderman</u>	Aggregate Year-to-date	\$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
Full Name <u>Charles W. Rigdon</u>	10/15/2019	\$500.00
Mailing Address <u>PO Box 2182</u>		
City, State, Zip Code <u>Columbus, MS 39704-2182</u>		
Name of Employer (Required) <u>Columbus Nissan</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	\$4,115.00

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>In-kind</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Southern State Police Benevolent Association</u>	10/17/2019	\$2,806.25
Mailing Address <u>2155 Highway 42S</u>		
City, State, Zip Code <u>McDonough, GA 30252-7636</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,806.25

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, Year)	Amount of each receipt this period
Full Name <u>M & T of Pascagoula, LLC</u>	10/03/2019	\$500.00
Mailing Address <u>P.O. Drawer 1509</u>		
City, State, Zip Code <u>Pascagoula, MS 39568-1509</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00

Name of Candidate or Committee

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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, Year)	Amount of each receipt this period
Full Name Timothy B. Smith	10/03/2019	\$5,000.00
Mailing Address 4704 N Harper Rd.		
City, State, Zip Code Corinth, MS 38834-7070		
Name of Employer (Required) CEO Express		
Occupation (Required) Auctus Healthcare	Aggregate Year-to-date	\$12,000.00
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
Full Name Charles T. Moseley	10/06/2019	\$500.00
Mailing Address 601 Pennsylvania Ave., Nw STE 900 SOUTH BUILDING		
City, State, Zip Code Washington, DC 20004-3647		
Name of Employer (Required) Waypoint Consulting, LLC		
Occupation (Required) President	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James H. Clayton	10/10/2019	\$2,000.00
Mailing Address 103 E Gresham Street		
City, State, Zip Code Indianola, MS 38751-2422		
Name of Employer (Required) Planters Bank		
Occupation (Required) Banker	Aggregate Year-to-date	\$4,000.00
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
Full Name Kathryn M. Symmes	10/09/2019	\$250.00
Mailing Address 11512 Briarstone Pl		
City, State, Zip Code Gulfport, MS 39503-6170		
Name of Employer (Required) Homemaker		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Alex B. Weddington	10/14/2019	\$500.00
Mailing Address 1209 40th Ct.		
City, State, Zip Code Meridian, MS 39305-3457		
Name of Employer (Required) General Supply & Machine Company, Inc.		
Occupation (Required) Vice President	Aggregate Year-to-date	\$500.00
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, Year)	Amount of each receipt this period
Full Name Grantham Bros. Logging, Inc.	10/15/2019	\$1,000.00
Mailing Address P.O. Box 1094		
City, State, Zip Code Philadelphia, MS 39350-1094		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name Larry W. Clark	10/14/2019	\$5,000.00
Mailing Address PO Box 789		
City, State, Zip Code Amory, MS 38821-0789		
Name of Employer (Required) Larry Clark Chevrolet-Cadillac, Inc.		
Occupation (Required) Owner	Aggregate Year-to-date	\$5,000.00
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
Full Name John Regan Kane	10/09/2019	\$1,000.00
Mailing Address 504 N Beach Blvd		
City, State, Zip Code Bay Saint Louis, MS 39520-4603		
Name of Employer (Required) John McDonald Realty		
Occupation (Required) Broker	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Tim Hales	10/03/2019	\$201.00
Mailing Address 2519 SCR 135		
City, State, Zip Code Morton, MS 39117-5118		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$201.00
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
Full Name Kenneth F. Martin	10/15/2019	\$1,000.00
Mailing Address 951 Cato Road		
City, State, Zip Code Mendenhall, MS 39114-4450		
Name of Employer (Required) MarCal, Inc.		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,000.00
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
Full Name Avichal Aggarwal	10/16/2019	\$500.00
Mailing Address 107 Bristol Dr		
City, State, Zip Code Madison, MS 39110-5028		
Name of Employer (Required) UMMC		
Occupation (Required) Pediatric Cardiologist	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raytheon PAC	10/09/2019	\$5,000.00
Mailing Address 1100 Wilson Blvd Ste 1500		
City, State, Zip Code Arlington, VA 22209-3900		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$10,000.00

Name of Candidate or Committee Tate for Governor
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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, Year)	Amount of each receipt this period
Full Name John Dane III	10/24/2019	\$5,000.00
Mailing Address 11638 Bluff Lane		
City, State, Zip Code Gulfport, MS 39503-6151		
Name of Employer (Required) United States Marine, Inc.		
Occupation (Required) Chairman	Aggregate Year-to-date	\$30,000.00

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Integrated Legislative Strategies, LLC	10/09/2019	\$5,000.00
Mailing Address 701 8th Street NW Ste 500		
City, State, Zip Code Alexandria, VA 22307		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,500.00

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Engineering Support Services, LLC	10/08/2019	\$250.00
Mailing Address 9162 Highway 145 North		
City, State, Zip Code Quitman, MS 39355-8843		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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
Full Name Kathy L. Batson	10/06/2019	\$250.00
Mailing Address 10 Wire Road West		
City, State, Zip Code Perkinston, MS 39573-5700		
Name of Employer (Required) GreenForest Nursery, Inc.		
Occupation (Required) Accounting	Aggregate Year-to-date	\$250.00

Name of Candidate or Committee

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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, Year)	Amount of each receipt this period
Full Name Rigdon & Street Properties, LLC	10/15/2019	\$500.00
Mailing Address P.O. Box 2568		
City, State, Zip Code Columbus, MS 39704-2568		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$3,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Judy Steckler	10/09/2019	\$250.00
Mailing Address 12148 Skeet Hunt Rd		
City, State, Zip Code Biloxi, MS 39532-9177		
Name of Employer (Required) Land Trust for the Mississippi Coastal Plain		
Occupation (Required) Executive Director	Aggregate Year-to-date	\$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
Full Name Mary E. Copeland	10/17/2019	\$200.00
Mailing Address PO Box 122		
City, State, Zip Code Braxton, MS 39044-0122		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$400.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <u>Rebate</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trustmark National Bank Credit Card Center	10/22/2019	\$2.27
Mailing Address P.O. Box 143		
City, State, Zip Code Jackson, MS 39205-0143		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$233.40

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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, Year)	Amount of each receipt this period
Full Name Callie B. Mounger	10/16/2019	\$2,000.00
Mailing Address 4781 E Massena Drive		
City, State, Zip Code Jackson, MS 39211-4931		
Name of Employer (Required) Cypress Tree, LLC		
Occupation (Required) Co Owner	Aggregate Year-to-date	\$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
Full Name Bruce R. Bartley	10/22/2019	\$1,000.00
Mailing Address 245 Calumet Drive		
City, State, Zip Code Madison, MS 39110-8686		
Name of Employer (Required) Paragon Consulting, LLC		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,000.00
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
Full Name Joe W. Stedman	10/18/2019	\$5,000.00
Mailing Address 114 Main Street		
City, State, Zip Code Natchez, MS 39120-3458		
Name of Employer (Required) Natchez - Crye*Leike Stedman Realtors		
Occupation (Required) Broker	Aggregate Year-to-date	\$7,000.00
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
Full Name Bradford Dye III	10/15/2019	\$1,500.00
Mailing Address 904 S 11th Street		
City, State, Zip Code Oxford, MS 38655-4316		
Name of Employer (Required) ENT Consultants of North Mississippi		
Occupation (Required) Physician	Aggregate Year-to-date	\$2,000.00

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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, Year)	Amount of each receipt this period
Full Name Charles Sydnor	10/01/2019	\$250.00
Mailing Address 723 Forest Ridge Drive		
City, State, Zip Code Great Falls, VA 22066-2909		
Name of Employer (Required) Cassidy & Associates		
Occupation (Required) Attorney	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi Forest Sustainability PAC	10/08/2019	\$7,500.00
Mailing Address 6311 Ridgewood Rd Ste W405		
City, State, Zip Code Jackson, MS 39211-2035		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$7,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sampat S. Shivangi	10/16/2019	\$500.00
Mailing Address 104 Summer Lake Drive		
City, State, Zip Code Ridgeland, MS 39157-8630		
Name of Employer (Required) US Info Systems of Mississippi, LLC		
Occupation (Required) President	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Daniel A. Cash	10/24/2019	\$5,000.00
Mailing Address 129 Woodbridge Drive		
City, State, Zip Code Saltillo, MS 38866-7267		
Name of Employer (Required) Cash Properties LLC		
Occupation (Required) Tree Farmer	Aggregate Year-to-date	\$6,000.00

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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, Year)	Amount of each receipt this period
Full Name J. R. Carter Sr.	10/09/2019	\$2,500.00
Mailing Address PO Box 1600		
City, State, Zip Code Gulfport, MS 39502-1600		
Name of Employer (Required) Island View Casino Resort		
Occupation (Required) Owner	Aggregate Year-to-date	\$10,000.00
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
Full Name Rodney C. Richardson	10/25/2019	\$100.00
Mailing Address 1609 24th Ave		
City, State, Zip Code Meridian, MS 39301-3112		
Name of Employer (Required) Self		
Occupation (Required) Dentist	Aggregate Year-to-date	\$1,250.00
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
Full Name William L. Freeman Jr.	10/03/2019	\$250.00
Mailing Address 114 Shady Grove Avenue		
City, State, Zip Code Newton, MS 39345-2856		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name PSP Medical Clinic, LLC	10/16/2019	\$1,500.00
Mailing Address P.O. Box 607		
City, State, Zip Code Canton, MS 39046-0607		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,500.00

Name of Candidate or Committee

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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, Year)	Amount of each receipt this period
Full Name C. T. Switzer	10/02/2019	\$5,000.00
Mailing Address 75 Golden Pines Road		
City, State, Zip Code Perkinston, MS 39573-5500		
Name of Employer (Required) Coast Waterworks, Inc.		
Occupation (Required) CEO	Aggregate Year-to-date	\$5,000.00
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
Full Name Ronnie Bagwell	10/13/2019	\$50.00
Mailing Address 213 Bradley Ln		
City, State, Zip Code Brandon, MS 39047-6768		
Name of Employer (Required) Marty's Pharmacy		
Occupation (Required) Pharmacist	Aggregate Year-to-date	\$350.00
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>PLLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scialdone Law Firm, PLLC	10/07/2019	\$2,500.00
Mailing Address P.O. Box 4080		
City, State, Zip Code Gulfport, MS 39502-4080		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny Morgan	10/15/2019	\$2,500.00
Mailing Address PO Box 309		
City, State, Zip Code Oxford, MS 38655-0309		
Name of Employer (Required) Morgan White Group		
Occupation (Required) President	Aggregate Year-to-date	\$22,500.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name The Presidential Coalition, LLC	10/08/2019	\$10,000.00
Mailing Address 1006 Pennsylvania Ave SE		
City, State, Zip Code Washington, DC 20003-2142		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$40,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name BBR Biloxi, LLC	10/09/2019	\$2,500.00
Mailing Address 18167 E. Petroleum Drive		
City, State, Zip Code Baton Rouge, LA 70809-6104		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Epic Strategies, LLC	10/03/2019	\$250.00
Mailing Address P.O. Box 802		
City, State, Zip Code New Albany, MS 38652-0802		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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
Full Name David B. Hall	10/15/2019	\$500.00
Mailing Address 7091 Poplar Springs Drive		
City, State, Zip Code Meridian, MS 39305-9337		
Name of Employer (Required) Hall Timberlands		
Occupation (Required) CEO	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Rakesh Sabharwal	10/10/2019	\$250.00
Mailing Address 106 WOODLAND HILLS BLVD		
City, State, Zip Code Madison, MS 39110-7820		
Name of Employer (Required) Village Wine & Spirits		
Occupation (Required) Executive	Aggregate Year-to-date	\$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
Full Name Robert B. Nance	10/16/2019	\$5,000.00
Mailing Address 703 Muirfield Drive		
City, State, Zip Code Oxford, MS 38655-2605		
Name of Employer (Required) Beale Street Blues Company		
Occupation (Required) Principal	Aggregate Year-to-date	\$5,000.00
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
Full Name Rhonda Keenum	10/14/2019	\$1,041.98
Mailing Address 155 Morrill Road		
City, State, Zip Code Starkville, MS 39759-7676		
Name of Employer (Required) Self		
Occupation (Required) Public Relations	Aggregate Year-to-date	\$2,083.96
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name La Terre Farms, LLC	10/09/2019	\$500.00
Mailing Address 216 North Beach Blvd.		
City, State, Zip Code Bay Saint Louis, MS 39520-4549		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00

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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, Year)	Amount of each receipt this period
Full Name KC Construction, Inc	10/02/2019	\$400.00
Mailing Address 401 Access Rd		
City, State, Zip Code Fulton, MS 38843-6608		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$400.00
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, Year)	Amount of each receipt this period
Full Name Shuqualak Lumber Company	10/10/2019	\$1,000.00
Mailing Address P.O. Box 25		
City, State, Zip Code Shuqualak, MS 39361-0025		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name Kimberly J. Fritz	10/09/2019	\$250.00
Mailing Address 765 Destiny Plantation Blvd.		
City, State, Zip Code Biloxi, MS 39532-4603		
Name of Employer (Required) Fritz Development		
Occupation (Required) Contractor	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <i>Campaign Committee</i>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Friends Of Mike	10/23/2019	\$10,000.00
Mailing Address 115 Henry Rd		
City, State, Zip Code Vicksburg, MS 39183-9567		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$11,000.00

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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, Year)	Amount of each receipt this period
Full Name William L. Smith	10/18/2019	\$250.00
Mailing Address 1200 Meadowbrook Road Apt. 18		
City, State, Zip Code Jackson, MS 39206-6109		
Name of Employer (Required) Balch & Bingham		
Occupation (Required) Partner	Aggregate Year-to-date	\$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
Full Name Joel Carter Jr.	10/09/2019	\$1,000.00
Mailing Address 387 Fly Away Ct.		
City, State, Zip Code Biloxi, MS 39531-6302		
Name of Employer (Required) J. Carter & Co. Real Estate & Development		
Occupation (Required) Owner	Aggregate Year-to-date	\$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
Full Name Sunilkumar Patel	10/17/2019	\$500.00
Mailing Address 2263 Highway 80 West		
City, State, Zip Code Jackson, MS 39204-2311		
Name of Employer (Required) Self		
Occupation (Required) Hotelier	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Van Devender	10/22/2019	\$1,000.00
Mailing Address PO Box 5327		
City, State, Zip Code Jackson, MS 39296-5327		
Name of Employer (Required) Claw Forestry Services LLC		
Occupation (Required) CEO	Aggregate Year-to-date	\$16,000.00

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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>Limited Partnership</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Shoemaker Family Partners, LP	10/03/2019	\$1,000.00
Mailing Address PO Box 986		
City, State, Zip Code Ridgeland, MS 39158-0986		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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>Campaign Committee</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Weddle For District Attorney	10/02/2019	\$500.00
Mailing Address 133 Courtland Dr		
City, State, Zip Code Savannah, MS 38866-6003		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan S. Lebatard	10/01/2019	\$1,000.00
Mailing Address 311 Eastview Drive		
City, State, Zip Code Biloxi, MS 39531-2601		
Name of Employer (Required) Lebatard Architecture		
Occupation (Required) Registered Architect	Aggregate Year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jayantilal Patel	10/16/2019	\$1,500.00
Mailing Address 125 Dunleith Way		
City, State, Zip Code Clinton, MS 39056-5456		
Name of Employer (Required) Self		
Occupation (Required) Hotelier	Aggregate Year-to-date	\$1,500.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Columbus Hyundai, LLC	10/15/2019	\$500.00
Mailing Address P.O. Box 2568		
City, State, Zip Code Columbus, MS 39704-2568		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert H. Dunlap	10/07/2019	\$10,000.00
Mailing Address PO Box 720		
City, State, Zip Code Batesville, MS 38606-0720		
Name of Employer (Required) Dunlap & Kyle Co, Inc.		
Occupation (Required) Chairman	Aggregate Year-to-date	\$25,000.00
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
Full Name David B. Blackburn	10/14/2019	\$5,000.00
Mailing Address 114 Pin Oak Dr		
City, State, Zip Code Oxford, MS 38655-6052		
Name of Employer (Required) The Blackburn Group, LLC		
Occupation (Required) CEO	Aggregate Year-to-date	\$5,200.00
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
Full Name David Ayers	10/16/2019	\$250.00
Mailing Address 400 East Capitol Street		
City, State, Zip Code Jackson, MS 39201-2610		
Name of Employer (Required) Watkins & Eager, PLLC		
Occupation (Required) Attorney	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Susan Sweat	10/08/2019	\$1,000.00
Mailing Address 1518 Night Shade Ct		
City, State, Zip Code Vienna, VA 22182-7301		
Name of Employer (Required) Cornerstone Government Affairs Inc.		
Occupation (Required) Vice President	Aggregate Year-to-date	\$1,000.00
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
Full Name Wicker For Senate	10/15/2019	\$5,000.00
Mailing Address PO Box 64		
City, State, Zip Code Jackson, MS 39205-0064		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
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
Full Name Michael Dees	10/03/2019	\$5,000.00
Mailing Address PO Box 98		
City, State, Zip Code Ripley, MS 38663-0098		
Name of Employer (Required) Dees Oil Company		
Occupation (Required) Owner	Aggregate Year-to-date	\$5,000.00
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
Full Name James Chustz	10/11/2019	\$500.00
Mailing Address 349 Sundial Road		
City, State, Zip Code Madison, MS 39110-8773		
Name of Employer (Required) BankPlus		
Occupation (Required) CRE Lending	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Brian Sullivan	10/09/2019	\$250.00
Mailing Address 11518 Hillcrest Rd.		
City, State, Zip Code Gulfport, MS 39503-6114		
Name of Employer (Required) State of Mississippi		
Occupation (Required) Agent	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kendall Davis	10/15/2019	\$5,000.00
Mailing Address 835 Maplewood Drive		
City, State, Zip Code Oxford, MS 38655-5447		
Name of Employer (Required) Nix-Tann and Associates		
Occupation (Required) Realtor	Aggregate Year-to-date	\$5,000.00
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
Full Name Christa Bounds Bowman	10/16/2019	\$500.00
Mailing Address 120 Morrell Circle		
City, State, Zip Code Hattiesburg, MS 39402-8132		
Name of Employer (Required) Homemaker		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roy Anderson III	10/09/2019	\$1,000.00
Mailing Address PO Box 520		
City, State, Zip Code Gulfport, MS 39502-0520		
Name of Employer (Required) Roy Anderson Corp		
Occupation (Required) CEO	Aggregate Year-to-date	\$13,000.00

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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, Year)	Amount of each receipt this period
Full Name Terry Paul	10/01/2019	\$500.00
Mailing Address 733 10th Street Northwest 400		
City, State, Zip Code Washington, DC 20001-4884		
Name of Employer (Required) Cassidy & Associates		
Occupation (Required) Consultant	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew McNulty	10/13/2019	\$1,000.00
Mailing Address P.O. Box 13275		
City, State, Zip Code Portland, OR 97213-0275		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,000.00
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
Full Name Robert Franco	10/18/2019	\$100.00
Mailing Address 66 Grandview Circle		
City, State, Zip Code Brandon, MS 39047-7398		
Name of Employer (Required) Self		
Occupation (Required) Consultant	Aggregate Year-to-date	\$1,600.00
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>Campaign Committee</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Duncan For Georgia	10/16/2019	\$5,000.00
Mailing Address 2155 Cascading Creek Ct		
City, State, Zip Code Cumming, GA 30041-7697		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00

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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>Campaign Committee</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Friends of Billy Hewes	10/07/2019	\$1,000.00
Mailing Address PO Box 1842		
City, State, Zip Code Gulfport, MS 39502-1842		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name MAE-PAC	10/08/2019	\$5,000.00
Mailing Address 1629 McFarland Blvd N Ste 401		
City, State, Zip Code Tuscaloosa, AL 35406-2239		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$10,000.00
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
Full Name Jack Muirhead	10/16/2019	\$500.00
Mailing Address 516 Silverstone Drive		
City, State, Zip Code Madison, MS 39110-7647		
Name of Employer (Required) Stribling Equipment		
Occupation (Required) Sales	Aggregate Year-to-date	\$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)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Goode	10/22/2019	\$300.00
Mailing Address 610 Northlake Ave		
City, State, Zip Code Ridgeland, MS 39157-1708		
Name of Employer (Required) Clearwater Group		
Occupation (Required) Executive	Aggregate Year-to-date	\$2,500.00

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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, Year)	Amount of each receipt this period
Full Name David Joseph Hardy	10/09/2019	\$2,500.00
Mailing Address 481 Jordan Drive		
City, State, Zip Code Biloxi, MS 39531-2312		
Name of Employer (Required) Eley Guild Hardy Architects PA		
Occupation (Required) Architect	Aggregate Year-to-date	\$5,000.00
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
Full Name Hugh D. Keating	10/08/2019	\$1,000.00
Mailing Address 26 Greenbriar Drive		
City, State, Zip Code Gulfport, MS 39507-4215		
Name of Employer (Required) Self		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00
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
Full Name Yogesh Purohit	10/16/2019	\$1,001.00
Mailing Address 1692 Exeter Road		
City, State, Zip Code Germantown, TN 38138-2964		
Name of Employer (Required) PGC Management Group		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,001.00
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, Year)	Amount of each receipt this period
Full Name Xcavators, Inc.	10/03/2019	\$250.00
Mailing Address 20831A Highway 15		
City, State, Zip Code Falkner, MS 38629-9123		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Benjamin E. Shirley	10/24/2019	\$10,000.00
Mailing Address 961 Carl Harper Road		
City, State, Zip Code Meridian, MS 39301-8946		
Name of Employer (Required) Bonita Auto Sales, LLC		
Occupation (Required) Executive	Aggregate Year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLP	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jones Walker, LLP	10/17/2019	\$2,500.00
Mailing Address PO Box 427		
City, State, Zip Code Jackson, MS 39205-0427		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
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
Full Name Tyrone F. James	10/09/2019	\$500.00
Mailing Address P.O. Box 781		
City, State, Zip Code Ridgeland, MS 39158-0781		
Name of Employer (Required) JHI, LLC		
Occupation (Required) Owner	Aggregate Year-to-date	\$500.00
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, Year)	Amount of each receipt this period
Full Name Continental Casualty Company	10/15/2019	\$1,000.00
Mailing Address P.O. Box 2944		
City, State, Zip Code Chicago, IL 60690-2944		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee

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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) <u>In-kind office space</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Bordeaux	10/01/2019	\$1,000.00
Mailing Address 11633 Bluff Lane		
City, State, Zip Code Gulfport, MS 39503-6150		
Name of Employer (Required) Stewart Sneed Hewes		
Occupation (Required) Insurance	Aggregate Year-to-date	\$13,968.00
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
Full Name Colin Maloney	10/01/2019	\$2,500.00
Mailing Address PO Box 1366		
City, State, Zip Code Tupelo, MS 38802-1366		
Name of Employer (Required) Maloney Glass/Century Construction & Realty		
Occupation (Required) Owner	Aggregate Year-to-date	\$3,500.00
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, Year)	Amount of each receipt this period
Full Name Contract Fabricators, Inc.	10/01/2019	\$1,000.00
Mailing Address PO Box 758		
City, State, Zip Code Holly Springs, MS 38635-0758		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name John Dane III	10/13/2019	\$10,000.00
Mailing Address 11638 Bluff Lane		
City, State, Zip Code Gulfport, MS 39503-6151		
Name of Employer (Required) United States Marine, Inc.		
Occupation (Required) Chairman	Aggregate Year-to-date	\$25,000.00

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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, Year)	Amount of each receipt this period
Full Name Rhonda Keenum	10/25/2019	\$500.00
Mailing Address 155 Morrill Road		
City, State, Zip Code Starkville, MS 39759-7676		
Name of Employer (Required) Self		
Occupation (Required) Public Relations	Aggregate Year-to-date	\$2,583.96
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Legacy Land and Financial Consulting, LLC	10/20/2019	\$500.00
Mailing Address 223 Deer Run Trl NE		
City, State, Zip Code Brookhaven, MS 39601-3672		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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
Full Name Patrick Ryan Beckett	10/06/2019	\$1,000.00
Mailing Address 4166 Dogwood Drive		
City, State, Zip Code Jackson, MS 39211-6520		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada		
Occupation (Required) Attorney	Aggregate Year-to-date	\$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
Full Name Leigh Ann Underwood	10/21/2019	\$500.00
Mailing Address 3688 Veterans Memorial Drive		
City, State, Zip Code Hattiesburg, MS 39401-8246		
Name of Employer (Required) Southern Bone and Joint Specialists		
Occupation (Required) Public Relations Director	Aggregate Year-to-date	\$500.00

Name of Candidate or Committee Tate for Governor
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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, Year)	Amount of each receipt this period
Full Name Loren L. Monroe	10/02/2019	\$500.00
Mailing Address 1513 Highwood Drive		
City, State, Zip Code Mc Lean, VA 22101-5800		
Name of Employer (Required) BGR Group		
Occupation (Required) Principal	Aggregate Year-to-date	\$2,500.00

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Robert Ridgway IV	10/15/2019	\$500.00
Mailing Address 4662 Trawick Drive		
City, State, Zip Code Jackson, MS 39211-5834		
Name of Employer (Required) Ridgway Realty, Inc.		
Occupation (Required) Realtor	Aggregate Year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bruce Patel	10/10/2019	\$1,000.00
Mailing Address 2749 Bayhill Woods Cove		
City, State, Zip Code Collierville, TN 38017-9021		
Name of Employer (Required) Fusion Hospitality		
Occupation (Required) Hotelier	Aggregate Year-to-date	\$1,000.00

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
Full Name Jason Craft	10/24/2019	\$1,000.00
Mailing Address 10 Sheffield Place		
City, State, Zip Code Jackson, MS 39211-5747		
Name of Employer (Required) Mississippi Sports Medicine		
Occupation (Required) Physician	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Mark Cumbest	10/24/2019	\$500.00
Mailing Address 17725 MS-63		
City, State, Zip Code Moss Point, MS 39562		
Name of Employer (Required) Cumbest Realty Inc.		
Occupation (Required) Owner	Aggregate Year-to-date	\$750.00

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
Full Name David West	10/20/2019	\$220.00
Mailing Address P.O. Box 365		
City, State, Zip Code Shubuta, MS 39360-0365		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$220.00

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, Year)	Amount of each receipt this period
Full Name P. Holman, Inc.	10/16/2019	\$1,000.00
Mailing Address 5430 Charter Oak Pl.		
City, State, Zip Code Jackson, MS 39211-4617		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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
Full Name Michael F. Milligan	10/10/2019	\$250.00
Mailing Address 208 Longwood Drive		
City, State, Zip Code Clinton, MS 39056-5436		
Name of Employer (Required) Mississippi Development Authority		
Occupation (Required) Chief Economic Development Officer	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Nicholas J Correnti	10/15/2019	\$5,000.00
Mailing Address 530 Fazio Ext		
City, State, Zip Code Oxford, MS 38655-2771		
Name of Employer (Required) Nicholas Air		
Occupation (Required) President & CEO	Aggregate Year-to-date	\$6,041.98
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
Full Name Edwin E. Meek	10/15/2019	\$5,000.00
Mailing Address 1 Oak Pl.		
City, State, Zip Code Oxford, MS 38655-2519		
Name of Employer (Required) Hottytoddy.com		
Occupation (Required) Owner	Aggregate Year-to-date	\$5,000.00
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
Full Name Rodney Mortimer	10/17/2019	\$250.00
Mailing Address 545 Waverly Drive		
City, State, Zip Code West Point, MS 39773-9187		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$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
Full Name B. Craig Anderson	10/07/2019	\$250.00
Mailing Address 1721 Medical Park Drive, Ste 201		
City, State, Zip Code Biloxi, MS 39532-2105		
Name of Employer (Required) South MS Endodontics		
Occupation (Required) Endodontist	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Snehal Patel	10/23/2019	\$2,604.48
Mailing Address 3011 Grand Way Avenue		
City, State, Zip Code Baton Rouge, LA 70810-0436		
Name of Employer (Required) Self		
Occupation (Required) Investor	Aggregate Year-to-date	\$2,604.48
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
Full Name W.C. Deviney Jr.	10/15/2019	\$1,000.00
Mailing Address PO Box 6717		
City, State, Zip Code Jackson, MS 39282-6717		
Name of Employer (Required) Deviney Construction Company, Inc.		
Occupation (Required) CEO	Aggregate Year-to-date	\$3,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kempton Batia	10/13/2019	\$1,000.00
Mailing Address 1902 15th St. Ste 101		
City, State, Zip Code Gulfport, MS 39501-2111		
Name of Employer (Required) Blackline Corp		
Occupation (Required) President	Aggregate Year-to-date	\$1,000.00
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, Year)	Amount of each receipt this period
Full Name Rolling Hills Ranch	10/15/2019	\$1,000.00
Mailing Address P.O. Box 7179		
City, State, Zip Code Jackson, MS 39282-7179		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$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, Year)	Amount of each receipt this period
Full Name Heath Hall	10/11/2019	\$250.00
Mailing Address 303 Long Cove Drive		
City, State, Zip Code Madison, MS 39110-9113		
Name of Employer (Required) Strategic Marketing Group, LLC		
Occupation (Required) President	Aggregate Year-to-date	\$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
Full Name John W. Shinn	10/02/2019	\$1,000.00
Mailing Address 1886 Courtney Ln		
City, State, Zip Code Biloxi, MS 39532-5324		
Name of Employer (Required) A Brite Mind		
Occupation (Required) President	Aggregate Year-to-date	\$1,000.00
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
Full Name Marie Sanderson	10/07/2019	\$1,000.00
Mailing Address 312 Washington Avenue		
City, State, Zip Code Ocean Springs, MS 39564-4628		
Name of Employer (Required) 50 State		
Occupation (Required) Consultant	Aggregate Year-to-date	\$1,000.00