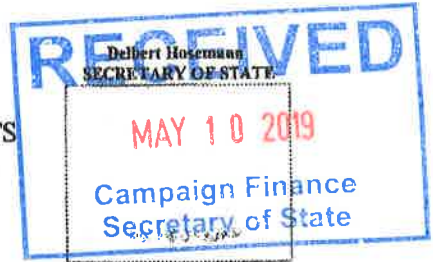




REPORT OF RECEIPTS AND DISBURSEMENTS



Name of Candidate John Caldwell  
 Address P.O. Box 167 (1550 Nesbit Road) City/Zip Nesbit, MS 38651  
 Telephone (Work) 662-469-5361 (Home) 662-429-1431 (Fax) unk  
 Contact Name Jayce Riales Email Address johnmccaldwell@gmail.com  
 Office Sought Northern Transportation Commission Political Party (if any) Republican

Check here if above 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 Pro-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 zero cash on hand balance) ..... Required to terminate reporting obligations

**IMPORTANT**

- (1) All candidates for office shall file periodic reports in the year in which they are to be elected.
- (2) Periodic Reports are mandatory, even if no expenditures were made during the period. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and/or expenditures during this period. Pre-Election Reports are mandatory if the candidate is opposed.
- (3) Until a candidate files a Termination Report, annual reports must be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (II) and (III).
- (4) Beginning on Jan. 1, 2018, candidates and officeholders may not "personally use" campaign contributions. Section 23-15-821, Miss. Code Ann., sets forth 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.

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

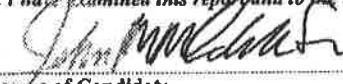
**REPORTED CONTRIBUTIONS AND DISBURSEMENTS FROM CAMPAIGN CONTRIBUTIONS  
ACCUMULATED PRIOR TO JANUARY 1, 2018**

JAN. 1, 2019 CASH ON HAND BALANCE				\$
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS <sup>1</sup>	\$	\$	\$	\$
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				\$ - 00
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$ 22,050.00	\$ 10,787.04	\$ 32,837.04	\$ 32,837.04
TOTAL AMT OF DISBURSEMENTS	\$ 2,190.00	\$ 348.83	\$ 2,648.83	\$ 2,648.83
CASH ON HAND BALANCE				\$ 30,688.21

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 Candidate

5-10-2019  
Date

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

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

Candidates for Statewide, State District or Legislative Office file this Report with the Secretary of State to 401 Mississippi Street, Jackson, MS; P. O. Box 136, Jackson, MS 39205; fax (601) 576-2545; or email CampaignFinance@tos.ms.gov.  
Candidates for county and/or county district office file this Report with their respective Circuit Clerk's Office.

<sup>1</sup> 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 John Caldwell  
 Reporting period 1-1-19 through 11-30-19

# ITEMIZED RECEIPTS

A. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>James and Myra Hannagan</u>		<u>3 11 19</u>	\$ <u>500.00</u>
Mailing Address <u>8 Cravatt Loop E</u>		<u>1 1</u>	\$
City, State, Zip Code <u>Hernando, Ms 38632-6526</u>		<u>1 1</u>	\$
Name of Employer (Required) <u>DCEDA</u>		<u>1 1</u>	\$
Occupation (Required) <u>Economic Development</u>		Aggregate year-to-date	\$ <u>500.00</u>
B. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Riverside Theatre, Inc.</u>		<u>3 11 19</u>	\$ <u>1,000.00</u>
Mailing Address <u>1283 State Hwy. 178 W.</u>		<u>1 1</u>	\$
City, State, Zip Code <u>New Albany, Ms 38652</u>		<u>1 1</u>	\$
Name of Employer (Required)		<u>1 1</u>	\$
Occupation (Required) <u>Traffic</u>		Aggregate year-to-date	\$ <u>1,000.00</u>
C. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Elmore Elmore LLC</u>		<u>1 1</u>	\$ <u>1,000.00</u>
Mailing Address <u>P.O. Box 2482</u>		<u>1 1</u>	\$
City, State, Zip Code <u>Madison, Ms 39130-2482</u>		<u>1 1</u>	\$
Name of Employer (Required)		<u>1 1</u>	\$
Occupation (Required) <u>Road construction</u>		Aggregate year-to-date	\$ <u>1,000.00</u>
D. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Talbot Brothers Grading Co., Inc.</u>		<u>3 11 19</u>	\$ <u>1,000.00</u>
Mailing Address <u>P.O. Box 364</u>		<u>1 1</u>	\$
City, State, Zip Code <u>Neshit, Ms 38651</u>		<u>1 1</u>	\$
Name of Employer (Required) <u>Talbot Brothers Grading Co., Inc.</u>		<u>1 1</u>	\$
Occupation (Required) <u>Excavation and Grading</u>		Aggregate year-to-date	\$ <u>1,000.00</u>

Name of Candidate or Committee John Caldwell  
 Reporting period 1-1-19 through 1-30-19

## ITEMIZED RECEIPTS

A. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Talbot Brothers Contracting Co. Inc.</u>	<u>3 1 11 19</u>	\$ <u>1,000<sup>00</sup></u>
Mailing Address <u>P.O. Box 361</u>	<u>1 1</u>	\$
City, State, Zip Code <u>Nesbit, Ms 38651-0361</u>	<u>1 1</u>	\$
Name of Employer (Required)	<u>1 1</u>	\$
Occupation (Required) <u>General Contractor</u>	Aggregate year-to-date	\$ <u>1,000<sup>00</sup></u>
B. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Kimes and Stone Construction Co. Inc.</u>	<u>3 1 4 19</u>	\$ <u>1,000<sup>00</sup></u>
Mailing Address <u>1841 Hwy. 143</u>	<u>1 1</u>	\$
City, State, Zip Code <u>Dooneville, Ms 38829</u>	<u>1 1</u>	\$
Name of Employer	<u>1 1</u>	\$
Occupation (Required) <u>Paving and Asphalt Service</u>	Aggregate year-to-date	\$ <u>1,000<sup>00</sup></u>
C. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Pickering Inc. PAC</u>	<u>3 1 25 19</u>	\$ <u>1,000<sup>00</sup></u>
Mailing Address <u>6775 Lenox Center CT Suite 300</u>	<u>1 1</u>	\$
City, State, Zip Code <u>Memphis, TN</u>	<u>1 1</u>	\$
Name of Employer	<u>1 1</u>	\$
Occupation (Required) <u>Construction Services</u>	Aggregate year-to-date	\$ <u>1,000<sup>00</sup></u>
D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Ken Russell</u>	<u>3 1 28 19</u>	\$ <u>1,000<sup>00</sup></u>
Mailing Address <u>1012 CR 23</u>	<u>1 1</u>	\$
City, State, Zip Code <u>Memphis, Ms 38650</u>	<u>1 1</u>	\$
Name of Employer (Required) <u>Riverside Traffic</u>	<u>1 1</u>	\$
Occupation (Required) <u>Traffic</u>	Aggregate year-to-date	\$ <u>1,000<sup>00</sup></u>

Name of Candidate or Committee John Caldwell  
 Reporting period 1-1-19 through 11-30-19

## ITEMIZED RECEIPTS

A. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>J. Cal Wilkie</u>	<u>3/14/19</u>	\$ <u>1,250.00</u>
Mailing Address <u>230 Highway 51 South</u>	_ _ _	\$
City, State, Zip Code <u>Hernando, Ms 38632</u>	_ _ _	\$
Name of Employer (Required) <u>self</u>	_ _ _	\$
Occupation (Required) <u>Developer</u>	Aggregate year-to-date	\$ <u>1,250.00</u>
B. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Jimmy D. Webster, Jr</u>	<u>3/25/19</u>	\$ <u>500<sup>00</sup></u>
Mailing Address <u>241 Green T Lk E.</u>	_ _ _	\$
City, State, Zip Code <u>Hernando, Ms 38632</u>	_ _ _	\$
Name of Employer (Required) <u>Stylcraft</u>	_ _ _	\$
Occupation (Required) <u>Wholesaler</u>	Aggregate year-to-date	\$ <u>500<sup>00</sup></u>
C. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Josh Pounds</u>	<u>3/28/19</u>	\$ <u>1,500<sup>00</sup></u>
Mailing Address <u>1923 Fogg Rd.</u>	_ _ _	\$
City, State, Zip Code <u>Nesbit, Ms 38651</u>	_ _ _	\$
Name of Employer (Required) <u>Desoto County</u>	_ _ _	\$
Occupation (Required) <u>County Coroner</u>	Aggregate year-to-date	\$ <u>1,500<sup>00</sup></u>
D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Thomas E. Caldwell</u>	<u>3/28/19</u>	\$ <u>500<sup>00</sup></u>
Mailing Address <u>1655 Elizabeth Circle</u>	_ _ _	\$
City, State, Zip Code <u>Olive Branch, Ms 38654</u>	_ _ _	\$
Name of Employer (Required) <u>Stylcraft</u>	_ _ _	\$
Occupation (Required) <u>Sales</u>	Aggregate year-to-date	\$ <u>500<sup>00</sup></u>

Name of Candidate or Committee John Caldwell  
 Reporting period 1-1-19 through 4-30-19

## ITEMIZED RECEIPTS

A. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>John Ellis Company LLC</u>	<u>3/27/19</u>	\$ <u>1,000<sup>00</sup></u>
Mailing Address <u>P.O. Box 767</u>	___/___/___	\$
City, State, Zip Code <u>Olive Branch, Ms 38651</u>	___/___/___	\$
Name of Employer _____	___/___/___	\$
Occupation (Required) <u>unknown Developer</u>	Aggregate year-to-date	\$ <u>1,000<sup>00</sup></u>
B. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>DeSoto County Electric, Inc</u>	<u>3/26/19</u>	\$ <u>500<sup>00</sup></u>
Mailing Address <u>2298 Nail Road</u>	___/___/___	\$
City, State, Zip Code <u>Hanover, Ms 38637</u>	___/___/___	\$
Name of Employer (Required) <u>DeSoto Co. Electric</u>	___/___/___	\$
Occupation (Required) <u>Electrical Contractor</u>	Aggregate year-to-date	\$ <u>500<sup>00</sup></u>
C. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Lehman-Roberts Company</u>	<u>3/27/19</u>	\$ <u>1,000<sup>00</sup></u>
Mailing Address <u>P.O. Box 1603</u>	___/___/___	\$
City, State, Zip Code <u>Memphis, TN 38101</u>	___/___/___	\$
Name of Employer (Required) <u>Lehman-Roberts</u>	___/___/___	\$
Occupation (Required) <u>Paving Contractor</u>	Aggregate year-to-date	\$ <u>1,000<sup>00</sup></u>
D. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Memphis Stone &amp; Gravel Company</u>	<u>3/27/19</u>	\$ <u>1,000<sup>00</sup></u>
Mailing Address <u>P.O. Box 1683</u>	___/___/___	\$
City, State, Zip Code <u>Memphis, TN 38101</u>	___/___/___	\$
Name of Employer (Required) <u>Memphis Stone &amp; Gravel</u>	___/___/___	\$
Occupation (Required) <u>Sand and Gravel provider</u>	Aggregate year-to-date	\$ <u>1,000<sup>00</sup></u>

Name of Candidate or Committee John Caldwell  
 Reporting period 1-1-19 through 1-30-19

# ITEMIZED RECEIPTS

A. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Mrs. Frank Macasabe</u>		<u>1 11 19</u>	\$ <u>300<sup>00</sup></u>
Mailing Address <u>2585 Treason Avenue</u>		<u>1 1</u>	\$
City, State, Zip Code <u>Greenock, Ms 38901</u>		<u>1 1</u>	\$
Name of Employer (Required) <u>Retired</u>		<u>1 1</u>	\$
Occupation (Required) <u>Retired</u>		Aggregate year-to-date	\$ <u>300<sup>00</sup></u>
B. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>William A. Jones</u>		<u>1 1 19</u>	\$ <u>250<sup>00</sup></u>
Mailing Address <u>4250 Heatherwood Lane</u>		<u>1 1</u>	\$
City, State, Zip Code <u>Memphis, TN 38117</u>		<u>1 1</u>	\$
Name of Employer (Required) <u>Cherry Tree Land Company</u>		<u>1 1</u>	\$
Occupation (Required) <u>Developer</u>		Aggregate year-to-date	\$ <u>250<sup>00</sup></u>
C. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Super Seven Drugs</u>		<u>1 1 19</u>	\$ <u>1,500<sup>00</sup></u>
Mailing Address <u>498 W. Barkhead</u>		<u>1 1</u>	\$
City, State, Zip Code <u>New Albany, Ms 38652</u>		<u>1 1</u>	\$
Name of Employer (Required) <u>Super Seven Drugs</u>		<u>1 1</u>	\$
Occupation (Required) <u>Pharmacy &amp; Drug Store</u>		Aggregate year-to-date	\$ <u>1,500<sup>00</sup></u>
D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Joe A. Wasson</u>		<u>1 22 19</u>	\$ <u>500<sup>00</sup></u>
Mailing Address <u>1156 Highland Park Dr.</u>		<u>1 1</u>	\$
City, State, Zip Code <u>Jackson Ms 39211</u>		<u>1 1</u>	\$
Name of Employer (Required) <u>Wasson Engineering</u>		<u>1 1</u>	\$
Occupation (Required) <u>Engineer</u>		Aggregate year-to-date	\$ <u>500<sup>00</sup></u>

Name of Candidate or Committee John Caldwell  
 Reporting period 1-1-19 through 4-30-19

## ITEMIZED RECEIPTS

A. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>NUCOR Steel Receptors of Ms Pac</u>	<u>4/12/19</u>	\$ <u>250.00</u>
Mailing Address <u>3630 Fourth St</u>	<u>  </u> / <u>  </u> / <u>  </u>	\$
City, State, Zip Code <u>Howard, Mo 64232-2000</u>	<u>  </u> / <u>  </u> / <u>  </u>	\$
Name of Employer (Required) <u>Nucor Steel Receptors</u>	<u>  </u> / <u>  </u> / <u>  </u>	\$
Occupation (Required) <u>Model Receptors</u>	Aggregate year-to-date	\$ <u>250.00</u>
B. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Neal Schaffer</u>	<u>4/15/19</u>	\$ <u>1,000.00</u>
Mailing Address <u>P.O. Box 22625</u>	<u>  </u> / <u>  </u> / <u>  </u>	\$
City, State, Zip Code <u>Jackson, Mo 64225-2625</u>	<u>  </u> / <u>  </u> / <u>  </u>	\$
Name of Employer (Required) <u>Neal Schaffer</u>	<u>  </u> / <u>  </u> / <u>  </u>	\$
Occupation (Required) <u>Engineering</u>	Aggregate year-to-date	\$ <u>1,000.00</u>
C. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Pam Cuccia</u>	<u>  </u> / <u>  </u> / <u>  </u>	\$ <u>700.00</u>
Mailing Address <u>603 Winthrop</u>	<u>  </u> / <u>  </u> / <u>  </u>	\$
City, State, Zip Code <u> Smyrna, TN 37167</u>	<u>  </u> / <u>  </u> / <u>  </u>	\$
Name of Employer (Required) <u>Retired</u>	<u>  </u> / <u>  </u> / <u>  </u>	\$
Occupation (Required) <u>Retired</u>	Aggregate year-to-date	\$ <u>700.00</u>
D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>W.E. Davis</u>	<u>3/28/19</u>	\$ <u>300.00</u>
Mailing Address <u>2406 Holly Springs Rd.</u>	<u>  </u> / <u>  </u> / <u>  </u>	\$
City, State, Zip Code <u>Heanards, Ms 38632</u>	<u>  </u> / <u>  </u> / <u>  </u>	\$
Name of Employer (Required) <u>Retired Chancery Clerk</u>	<u>  </u> / <u>  </u> / <u>  </u>	\$
Occupation (Required) <u>Retired Chancery Clerk</u>	Aggregate year-to-date	\$ <u>300.00</u>



Name of Candidate or Committee John Chinnick  
 Reporting period 1-1-19 through 11-30-19

## ITEMIZED RECEIPTS

A. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Tracy M. Huffman</u>	<u>11/30/19</u>	\$ <u>500.00</u>
Mailing Address <u>1413 Fountain Gate Drive</u>	_ _ _	\$
City, State, Zip Code <u>Heanando, Ms 38632</u>	_ _ _	\$
Name of Employer (Required) <u>Weggoner Engineering</u>	_ _ _	\$
Occupation (Required) <u>Engineer</u>	Aggregate year-to-date	\$ <u>500<sup>00</sup></u>
B. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Jimmy G. Riley</u>	<u>11/30/19</u>	\$ <u>500.00</u>
Mailing Address <u>875 West Poplar St.</u>	_ _ _	\$
City, State, Zip Code <u>Collierville TN 38017</u>	_ _ _	\$
Name of Employer (Required) <u>Riley Paving</u>	_ _ _	\$
Occupation (Required) <u>Riley Paving</u>	Aggregate year-to-date	\$ <u>500<sup>00</sup></u>
C. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>The Blain Companies</u>	<u>11/26/19</u>	\$ <u>1,000.00</u>
Mailing Address <u>P.O. Box 1208</u>	_ _ _	\$
City, State, Zip Code <u>Mount Olive, Ms 39119</u>	_ _ _	\$
Name of Employer (Required) <u>The Blain Companies</u>	_ _ _	\$
Occupation (Required) <u>Highway Construction</u>	Aggregate year-to-date	\$ <u>1,000<sup>00</sup></u>
D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>George Ready</u>	<u>3/20/19</u>	\$ <u>500<sup>00</sup></u>
Mailing Address <u>175 E. Commerce Street</u>	_ _ _	\$
City, State, Zip Code <u>Heanando, Ms 38632</u>	_ _ _	\$
Name of Employer (Required) <u>George Ready</u>	_ _ _	\$
Occupation (Required) <u>Attorney</u>	Aggregate year-to-date	\$ <u>500<sup>00</sup></u>

Name of Candidate or Committee John Callwell  
 Reporting period 1-1-19 through 11-30-19

## ITEMIZED DISBURSEMENTS

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

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>November, Inc</u>	<u>11/11/19</u>	\$ <u>1,750.00</u>
Mailing Address <u>P.O. Box 371553</u>		\$
City, State, Zip Code <u>Las Vegas, NV 89137</u>		\$
Purpose of Disbursement (Optional) <u>Campaign materials printed</u>	Aggregate Year-to-date	\$ <u>1,750.00</u>
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Ms. Secretary of State</u>	<u>2/21/19</u>	\$ <u>500.00</u>
Mailing Address <u>401 Ms. Street, P.O. Box 136</u>		\$
City, State, Zip Code <u>Jackson, Mo 64205</u>		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>500.00</u>
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		\$
City, State, Zip Code		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		\$
City, State, Zip Code		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		\$
City, State, Zip Code		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		\$
City, State, Zip Code		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$