2023 ELECTION CYCLE

REPORT OF RECEIPTS AND DISBURSEMENT 2023 Flection

JUL 10 2023

Campaign Finance
Secretary of State

Michael Watson

Name of Candidate Committee to Elect Chris Mo	Daniel
Address 506 Court Street	City/Zip Ellisville, 39437
Telephone (Work) 715-338-8544 (Home	
Contact Name Thomas Datwyler	Email Address tcdatwyler@gmail.com
Office Sought_Lieutenant Governor	Political Party (if any) Republican
☐ Check here if above is different from p	revious report
<u>T</u>	YPE OF REPORT
May 10, 2023 Periodic Report (January 1, 2023 thr	ough April 30, 2023)
	h May 31, 2023)
July 10, 2023 Periodic Report (June 1, 2023 through	th June 30, 2023)
August 1, 2023 Primary Pre-Election Report (July	1, 2023 through July 29, 2023)
August 22, 2023 Primary Pre-Runoff Report (July	30, 2023 through August 19, 2023)Runoff Candidates Only
October 10, 2023 Periodic Report (July 1, 2023 thr	ough September 30, 2023)
October 31, 2023 Pre-Election Report (October 1,	2023 through October 29, 2023)
November 21, 2023 Pre-Runoff Report (October 3	0, 2023 through November 19, 2023)Runoff Candidates Only
January 10, 2024 Periodic Report (October 1, 2023	3 through December 31, 2023)
Termination Report (Committee will no longer acceexpenditures, has no outstand	ept contributions, make campaign ling campaign debt obligation) 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.
- 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).
- 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"

- candidates and officeholders for any campaign contributions held prior to Jan. 1, 2018, disbursements made therefrom and contributions earned thereon in the form of interest or dividends.
- (5) The receiving office must be in actual receipt of the required reports by 5:00 p.m. on the 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, 2023 CASH ON HAND BALAN				\$
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$	\$	\$	\$
A Section of the sect				
TOTAL AMT OF DISBURSEMENTS	\$	\$	\$	\$
CASH ON HAND BALANCE				\$

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

JAN. 1, 2023 CASH ON HAND BALANCE				\$335,946.06
				William Transfer
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$97,511.00	\$0.00	\$97,511.00	\$882,645.77
TOTAL AMT OF DISBURSEMENTS	\$146,375.07	\$0.00	\$146,375.07	\$792,979,08
CASH ON HAND BALANCE				\$337,675.74

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

Chris McDaniel

7/10/2023

Signature of Candidate

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

Name of Candidate or Committee Committee to Elect Chris McDaniel

Reporting period June 1, 2023

through June 30, 2023

Date (Mo., Day, Year)	Amount of each receipt
	\$500
'	\$
//	\$
//	\$
Aggregate vear-to-date	^{\$} 500
Date (Mo., Day, Year)	Amount of each receipt this period
6/1/2023	^s 1000
//	\$
//	\$
//	\$
Aggregate vear–to-date	\$1000
Date (Mo., Day, Year)	Amount of each receipt this period
6/1/202,3	^{\$} 100
//	\$
//	\$
//	\$
Aggregate vear-to-date	\$100
Date (Mo., Day, Year)	Amount of each receipt this period
6/1/202/3	\$25
//	\$
//	\$
//	\$
Aggregate year–to-date	^{\$} 25
	(Mo., Day, Year) 6/1/202/3 // Aggregate year-to-date Date (Mo., Day, Year) 6/1/202/3 // Aggregate year-to-date

Name of Candidate or Committee Committee to Elect Chris McDaniel

Reporting period June 1, 2023

through June 30, 2023

A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)		this period
Full name Kerry Williams	6/1/2023	\$25
Mailing Address 383 Dogwood Hill Rd	//	S
City, State, Zip Code Ashland MS 38603	'	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 25
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Nathan Babb	6/2/2023	^{\$} 100
751 hwy 9W	//	\$
City, State, Zip Code Bruce, MS 38915	//	\$
Name of Employer (Required) Self Employed	//	\$
Occupation (Required) Tile Guy	Aggregate year-to-date	\$100
C. Source: OCorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Billy Marlow	6/2/202/3	^{\$} 1000
Mailing Address 143 Lili Lane		\$
City, State, Zip Code Ruleville, MS 38771	//	S
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 1000
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Roger Brokaw	6/2/202/3	\$250
Mailing Address 245 Venetian Gdns	//	\$
City, State, Zip Code Gulfport MS 39507	//	\$
Name of Employer (Required) retired		\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 800

Reporting period June 1, 2023

through June 30, 2023

	- -	
A. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Lanny Glover	6/2/2023	^{\$} 100
Mailing Address 995 Luckney	//	\$
City, State, Zip Code Brandon, MS 39047		\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 100
B. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Mike Allmon	6/2/2023	^{\$} 1000
491 Bethel Church Rd	//	\$
City, State, Zip Code Seminary, MS 39479		\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 1000
C. Source: Ocorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Joe Felder	6/2/2023	^{\$} 25
Mailing Address 511 W Georgia Ave	//	\$
City, State, Zip Code Mccomb, MS 39648		\$
Name of Employer (Required) Field Family Dentistry	//	\$
Occupation (Required) Director	Aggregate year–to-date	^{\$} 125
D. Source: Corporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Carson Graham	6/2/2023	\$250
Mailing Address 333 highway 590	//	\$
City, State, Zip Code Flijsville MS 39437	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 250

through June 30, 2023

	10	
A. Source: Corporation PAC Individual Loan	Date (Ma Par Vara)	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Willie McCain	6/2/2023	^{\$} 25
Mailing Address 1373 Dogwood Hollow Dr		\$
City, State, Zip Code Nesbit, MS 38651		\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 81
B. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Martha Watts	6/2/2023	^{\$} 199
Mailing Address 335 E Broad St.		\$
Monticello, MS 39654	//	\$
Name of Employer (Required) Town of Monticello	//	\$
Occupation (Required) Mayor	Aggregate year–to-date	^{\$} 199
C. Source: Ocorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Chester Smith	6/2/202/3	^{\$} 50
Mailing Address 340 Argile Smith Rd	//	\$
City, State, Zip Code Poplarville, MS 39470	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 50
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Chris McDaniel	6/3/2023	\$100
Mailing Address 414 West Oak	//	\$
City, State, Zip Code Laurel, MS 39440	//	\$
Name of Employer (Required) Mississippi	//	\$
Occupation (Required) Senator	Aggregate year–to-date	^{\$} 43600

through June 30, 2023

	10	
A. Source: Corporation PAC Individual Loan	Date (M - D - V	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Deborah Odom	6/3/2023	^{\$} 50
Mailing Address 41657 hwy 8 east	//	\$
City, State, Zip Code Aberdeen, MS 39730	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 250
B. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
David Cass	6/3/2023	^{\$} 25
2563 DESERT HILLS DR.		\$
City, State, Zip Code Alamogordo, NM 88310		\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 25
C. Source: OCorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Mitchell Westberry	6/3/202/3	^{\$} 100
Mailing Address 28 Calvin purvis rd	//	\$
Purvis MS 39475	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 400
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Charles Borum	6/3/2023	\$1000
Mailing Address 20 Trails End Rd	//	\$.
City, State, Zip Code Natchez. MS 39120	//	\$
Name of Employer (Required) Self Employed	//	\$
Occupation (Required) physician	Aggregate year–to-date	^{\$} 1000

through June 30, 2023

	10	
A. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Wayne Greer	6/3/2023	^{\$} 100
Mailing Address 3955 Primitive Dr SE		\$
City, State, Zip Code Ruth, MS 39665	/	\$
Name of Employer (Required) retired		\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 510
B. Source: Corporation PAC Individual Loan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Michael Matthews	6/3/2023	^{\$} 250
Mailing Address 35 GRAND BLVD	//	s
City, State, Zip Code Hattiesburg, MS 39402	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 600
C. Source: OCorporation OPAC Individual OLoan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name Kevin Poole	6/4/202/3	^{\$} 10
Mailing Address 1721 Highway 11	//	\$
Petal, MS 39465	//_	\$
Name of Employer (Required) Channel Control Merchants	//	\$
Occupation (Required) Analyst	Aggregate year–to-date	^{\$} 165
D. Source: Corporation OPAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Steve Jennings	6/4/202/3	\$25
Mailing Address 12 Mary Russell Rd.	//	\$
Ellisville, MS 39437	//	\$
Name of Employer (Required) Tillery Properties, LLC	//	\$
Occupation (Required) CFO	Aggregate year–to-date	^{\$} 150

ITEMIZED RECEIPTS

A. Source: Corporation PAC Individual Loan Amount of each Date receipt (Mo., Day, Year) Other (please specify) this period Full name Andrea Lowrie ^{\$}25 6/4/2023 Mailing Address 621 Water Oak Dr City, State, Zip Code Madison, MS 39110 Name of Employer (Required) University of MS Medical Center Occupation (Required) Speech-language pathologist Aggregate ^{\$}125 year-to-date B. Source: Corporation PAC Individual Loan Amount of each Date receipt Other (please specify) (Mo., Day, Year) this period Full name Katherine Hampton ^{\$}25 6/4/2023 Mailing Address 2814 lawnwood dr City, State, Zip Code Ocean Springs, MS 39564 Name of Employer (Required) Harrison County School District Occupation (Required) Teacher ^{\$}125 Aggregate year-to-date C. Source: Ocorporation OPAC Individual OLoan Amount of each Date receipt (Mo., Day, Year) Other (please specify) this period Full name Brad Rebers ^{\$}15 6/4/2023 Mailing Address 10115 w 25th ave, 12, 12 City, State, Zip Code Denver, CO 80215 Name of Employer (Required) retired \$ Occupation (Required) retired Aggregate ^{\$}15 vear-to-date D. Source: Corporation PAC Individual Loan Amount of each Date receipt (Mo., Day, Year) Other (please specify)_ this period Full name Stephen Oglesby 6/5/2023 \$25 Mailing Address 5625 Hwy 84 W \$ City, State, Zip Code Meadville, MS 39653 \$ Name of Employer (Required) USDA \$ Occupation (Required) FORESTER Aggregate ^{\$}50 year-to-date

	ID	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Richard Ashley	6/5/2023	\$100
Mailing Address 3868 Highway 589	//	\$
City, State, Zip Code Sumrall, MS 39482	/	\$
Name of Employer (Required) retired		\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 100
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Brent Warren	6/5/2023	^{\$} 60
580 Bill Smith Road	//	^{\$} 250
Mendenhall, MS 39114	//	\$
Name of Employer (Required) Koch	//	\$
Occupation (Required) Tech	Aggregate year-to-date	^{\$} 310
C. Source: OCorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Steve Armour	6/5/202/3	^{\$} 5000
Mailing Address 109 Reagan Ranch Rd	//	\$
Laurel. MS 39443	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate yearto-date	^{\$} 5000
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Nicolas Rausch	6/6/202/3	\$100
Mailing Address 1915 Greeno Drive	//	\$
City, State, Zip Code Horn Lake MS 38637	//	\$
Name of Employer (Required) retired		\$
Occupation (Required) retired	Aggregate yearto-date	^{\$} 100

through June 30, 2023

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name Larry McDaniel	6/8/2023	\$300
Mailing Address PO Box 133		\$
City, State, Zip Code Malcolm Al 36556		\$
Name of Employer (Required)		\$
Occupation (Required) retired	Aggregate year–to-date	\$300
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
George Stuart	6/8/2023	^{\$} 100
26319 Highway 35 N	//	\$
Raleight, MS 39153	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 100
C. Source: OCorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Thomas Datwyler	6/8/2023	^{\$} 100
Mailing Address PO Box 183	//	\$
City, State, Zip Code Hudson WI 54016	//	\$
Name of Employer (Required) AxCapital	/	\$
Occupation (Required) Campaign Finance	Aggregate year-to-date	^{\$} 100
D. Source: Corporation OPAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name F Lee Horn	6/9/2023	\$50
Mailing Address PO Box 352		\$
City, State, Zip Code Houston, MS 38851	//	\$
Name of Employer (Required) Monroe Regional Hospital	/	\$
Occupation (Required) Physician	Aggregate year–to-date	^{\$} 50

Name of Candidate or Committee Committee to Elect Chris McDaniel

Reporting period JUne 1, 2023

through June 30, 2023

Date (Mo., Day, Year)	Amount of each receipt
6/9/2023	\$100
//	\$
//_	\$
//	\$
Aggregate	^{\$} 100
Date (Mo., Day, Year)	Amount of each receipt this period
6/9/2023	^s 100
'	\$
	\$
//	\$
Aggregate vear–to-date	^{\$} 200
Date (Mo., Day, Year)	Amount of each receipt this period
6/9/202/3	^{\$} 25
//	\$
//	S
//	\$
Aggregate vear-to-date	^{\$} 25
Date (Mo., Day, Year)	Amount of each receipt this period
6/9/202/3	\$25
//	\$
//	\$
//	\$
Aggregate year–to-date	^{\$} 25
	(Mo., Day, Year) 6/9/2023 //

through June 30, 2023

A. Source: Corporation OPAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name Conor Storey	6/9/2023	this period \$25
Mailing Address 340 ARBOR DR APT 2337	//	\$
City, State, Zip Code Ridgeland, MS 39157	//	\$
Name of Employer (Required) Ergon, Inc	//	\$
Occupation (Required) Consultant	Aggregate year–to-date	^{\$} 25
B. Source: Corporation PAC Individual Cloan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Mandy Hamil	6/9/2023	^{\$} 25
540 White Oak Road	//	\$
City, State, Zip Code Florence, MS 39073		\$
Name of Employer (Required) Rankin County Schools	//_	\$
Occupation (Required) Teacher	Aggregate year-to-date	^{\$} 25
C. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name William Smith	6/10/20/23	^{\$} 50
Mailing Address 44 Charleston Circle	//	\$
City, State, Zip Code Brandon, MS 39047	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 50
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Roger Gregory	6/12/2023	\$6
Mailing Address 116 Green Forest Drive	//	\$25
City, State, Zip Code Clinton, MS 39056	//	\$
Name of Employer (Required) GREGORY CHIROPRACTIC	//	\$
Occupation (Required) Chiropractor	Aggregate year–to-date	^{\$} 31

Name of Candidate or Committee Committee to Elect Chris McDaniel

Reporting period June 1, 2023 through June 30, 2023

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Joni McNeese	6/13/2023	^{\$} 25
Mailing Address 340 Stump Ridge Rd	//	\$
City, State, Zip Code Brandon, MS 39047	//	\$
Name of Employer (Required) Lockheed Martin		\$
Occupation (Required) HRBP	Aggregate year–to-date	\$ 50
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Neil McIntyre	6/1/3/2023	^{\$} 1000
Mailing Address 176 Allan Dr		\$
City, State, Zip Code Gulf Port, MS 39507		\$
Name of Employer (Required) Self-Employed	//	\$
Occupation (Required) Physician	Aggregate year-to-date	^{\$} 1000
C. Source: Ocorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Janice Cook	6/13/20/23	^{\$} 25
Mailing Address 6155 Somerset Dr	//	\$
City, State, Zip Code Horn Lake, MS 38637	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 55
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Brad Ramey	6/13/2023	\$2500
Mailing Address 622 Highway 589	//	\$
City, State, Zip Code Purvis, MS 39475	//	\$
Name of Employer (Required) Ramey Grocery	//	\$
Occupation (Required) Owner	Aggregate year-to-date	^{\$} 2500

Name of Candidate or Committee Committee to Elect Chris McDaniel

Reporting period June 1, 2023

through June 30, 2023

A. Source: Corporation OPAC OIndividual CLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name William Bruce Prewett	6/13/2023	\$25000
Mailing Address PO Box 386	//	\$
City, State, Zip Code Southaven, MS 38671		\$
Name of Employer (Required) Prewett Services LLC		\$
Occupation (Required) Prewett Services LLC	Aggregate	\$25000
B. Source: Corporation OPAC OIndividual OLoan Other (please specify)	year-to-date Date (Mo., Day, Year)	Amount of each receipt
Full name Steven Jackson	6/13/2023	\$10000
Mailing Address 2281 Stateline Rd W		\$
City, State, Zip Code Southaven, MS 38671	//	\$
Name of Employer (Required) American Services LLC	//	\$
Occupation (Required) American Services LLC	Aggregate year–to-date	^{\$} 10000
C. Source: OCorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Jimmy Riley	6/13/20/23	^{\$} 1000
Mailing Address 662 W Poplar	//	\$
Collierville, TN 38017	//	\$
Name of Employer (Required) Self-Employed	//	\$
Occupation (Required) Pharmicst	Aggregate year–to-date	\$1000
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name James Shannon	6/1/3/20/23	this period
Mailing Address 100 W Gallatin St		\$1000
City, State, Zip Code Hazlehurst, MS 39083		\$
Name of Employer (Required)	''	\$
Name of Employer (Required) Self-Employed Occupation (Required)	/	\$
Occupation (Required) Attorney	Aggregate year–to-date	^{\$} 1000

Name of Candidate or Committee Committee to Elect Chris McDaniel

Reporting period June 1, 2023 through June 30, 2023

	10	
A. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify) Full name	(Mo., Day, Year)	this period
lammy Herrington	6/13/2023	^{\$} 100
Mailing Address 11238 Brown Rd	//	\$
City, State, Zip Code Collinsville, MS 39325		\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 100
B. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Betty Aden	6/13/2023	^{\$} 25
1208 Magnolia		\$
Greenwood, MS 38930		\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate yearto-date	^{\$} 25
C. Source: Ocorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Jim Tackett	6/13/20/23	^{\$} 1000
Mailing Address 1012 Grand Blvd	//	\$
City, State, Zip Code Greenwood, MS 38930	//	\$
Name of Employer (Required) Self-Employed	//	\$
Occupation (Required) Farm Professional	Aggregate year–to-date	^{\$} 1000
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Thomas Datwyler	6/13/2023	\$1500
Mailing Address PO Box 183	//	\$
City, State, Zip Code Hudson, WI 54016	//	\$
Name of Employer (Required) AxCapital	//	\$
Occupation (Required) Campaign Finance	Aggregate year–to-date	^{\$} 1500

Name of Candidate or Committee Committee to Elect Chris McDaniel

Reporting period June 1, 2023 through June 30, 2023

	10	
A. Source: Corporation PAC Individual Loan	Date (Mo. Poy. Veer)	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
christopher garbacz	6/14/2023	^{\$} 100
588 Cedar Hill Rd		\$
City, State, Zip Code Flora, MS 39071		\$
Name of Employer (Required) MPUS	//	\$
Occupation (Required) Director, Economist	Aggregate year–to-date	^{\$} 200
B. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Ruby Ainsworth	6/15/2023	^{\$} 100
POB22		\$
City, State, Zip Code Braxton, MS 39044		\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 450
C. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name David Allen	6/1/4/20/23	^{\$} 100
Mailing Address 680 Utah Rd	//	\$
City, State, Zip Code Lena. MS 39094	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 200
D. Source: Corporation OPAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Sarah Allen	6/20/2023	\$25
Mailing Address 157 Cloverdale Rd	//	\$
City, State, Zip Code Natchez MS 39120	//	\$
Name of Employer (Required) Lost Prevention Services	//	\$
Occupation (Required) CSR	Aggregate yearto-date	^{\$} 25

Reporting period June 1, 2023 through June 30, 2023

	1 5	
A. Source: Corporation PAC Individual Loan	Date (Mo. Day Voor)	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Curtis Ammons	6/20/2023	^{\$} 25
4186 Green Hill Dr		\$
City, State, Zip Code Hernando, MS 38632		S
Name of Employer (Required) retired		\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 25
B. Source: Corporation PAC Individual Loan	Date Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Rita Anderson	6/20/2023	^{\$} 25
1859 Clinton Raymond Rd	6/22/2023	^{\$} 100
City, State, Zip Code Bolton, MS 39041	//	\$
Name of Employer (Required)	//	S
Occupation (Required) retired	Aggregate year–to-date	^{\$} 475
C. Source: OCorporation OPAC Individual OLoan	-	Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Robert Anderson Jr	6/15/20/23	^{\$} 200
Mailing Address 6463 Hwy 467	//	\$
Edwards, MS 39066	//	\$
Name of Employer (Required) Denbury Exploration	//	\$
Occupation (Required) Landman	Aggregate year–to-date	^{\$} 300
D. Source: OCorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
James Avance	6/27/2023	\$100
Mailing Address 1 Assembly St N	//	\$
City, State, Zip Code Natchez, MS 39120	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 100

	10	
A. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Bruce Barber	6/22/2023	^{\$} 50
Mailing Address 209 Z C Rushing Rd	//	\$
Tylertown, MS 39667		\$
Genesis Energy, LLC	//	\$
Occupation (Required) Warehouseman	Aggregate year-to-date	^{\$} 50
B. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Marilyn Barfoot	6/20/2023	^{\$} 10
Mailing Address 11420 D Coit Avenue		\$
City, State, Zip Code Gulfport, MS 39503	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 62
C. Source: OCorporation OPAC OIndividual OLoan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name Sandra Barnett	6/22/2023	^{\$} 50
Mailing Address 55 Shady Grove-Moss Rd	//	\$
Laurel MS 39443	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 50
D. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Regial Barrett	6/14/2023	\$100
Mailing Address 66 Bob Tyner Rd	//	\$
Lumberton MS 39455	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 450

	15	
A. Source: OCorporation OPAC Individual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name Elizabeth Bee		this period
Mailing Address	6/27/2023	\$500
Mailing Address 895 Hutchins Landing Rd	//	\$
City, State, Zip Code Natchez, MS 39120	/	S
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 500
B. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Stephen Kenn Beeman	6/20/2023	^{\$} 25
107 Bellwood	//	\$
City, State, Zip Code Starkville, MS 39759	//	\$
Retired		\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 75
C. Source: Ocorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Lawrence P. Benfield	6/26/2023	^{\$} 25
Mailing Address 146 Shenandoah Rd	//	\$
City, State, Zip Code Poplarville MS 39470	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 25
D. Source: Corporation OPAC Individual Cloan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
JoAnn Bishop	6/20/20/23	\$25
Mailing Address 2847 Laverne Rd	//	\$
City, State, Zip Code Neshit MS 38651	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 25

through June 30, 2023

	. 10	
A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name Marty Blackledge		this period
M-22 4 1 1	6/14/2023	^{\$} 100
887 Service Road		\$
City, State, Zip Code Laurel, MS 39443	//_	\$
Name of Employer (Required) Self-Employed	//	\$
Education (Required)	Aggregate year-to-date	^{\$} 200
B. Source: OCorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Sue Bohnen	6/14/2023	^{\$} 250
Mailing Address 5065 Warner Dr		\$
City, State, Zip Code Brandon, MS 39042		S
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 380
C. Source: Ocorporation OPAC Individual OLoan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name Alicia Bowie	6/20/20/23	\$25
Mailing Address 101 Shadow Lawn Dr	//	\$
City, State, Zip Code Florence, MS 39073	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 25
D. Source: OCorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Richard Boyanton	6/20/2023	\$25
7323 Hwy 90 Bay Saint Louis.		\$
Bay Saint Louis MS 39520	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 125

Other (please specify) Full name Roger Brokaw Mailing Address 245 Venetian Gdns City, State, Zip Code Gulfport, MS 39507 Name of Employer (Required) retired Occurretic Classics Procedular Control of the Control	unt of each receipt is period
Full name Roger Brokaw Mailing Address 245 Venetian Gdns City, State, Zip Code Gulfport, MS 39507 Name of Employer (Required) retired Processing (Required) retired State of Employer (Required) retired The full name of End (Parish) to the full name of Employer (Required) state of Employer (Required) retired	
245 Venetian Gdns City, State, Zip Code Gulfport, MS 39507 Name of Employer (Required) retired -/_/_ \$ -/_/_ \$	
City, State, Zip Code Gulfport, MS 39507 Name of Employer (Required) retired/_/_ \$ Overation (Provided)	
Occuration (Demise)	
Occuration (Demise)	
retired Aggregate year-to-date \$850)
B. Source: Corporation PAC Individual Loan Other (please specify) Date (Mo., Day, Year)	unt of each eceipt s period
Full name Kathyryn M Bryant 6/18/2023 \$10	0
4 Bruce Bryant Rd'' \$,,,,
City, State, Zip Code Laurel, MS 39443	
Name of Employer (Required) retired\$	
Occupation (Required) retired Aggregate year-to-date \$120	0
C. Source: Ocorporation OPAC Individual OLoan Other (please specify) Other (please specify) Other (please specify) Other (please specify)	int of each eceipt s period
Full name Andrew Clair Burkhart 6/20/2023 \$25	
Mailing Address PO.BX. 113	<u> </u>
City, State, Zip Code Mendenhall MS 39114 / / \$	
retired , / / \$	
Occupation (Required) retired Aggregate year-to-date \$25	
D. Source: Corporation PAC Individual Loan Date (Mo. Day Vear) Amou	nt of each eceipt period
Jackie Butler 6/20/2023 \$25	
Mailing Address 4144 hollingsworth cv// \$	
City, State, Zip Code Olive Branch MS 38654	
Name of Employer (Required) Gps// \$	
Occupation (Required) Programmer Aggregate year-to-date \$25	

Name of Candidate or Committee Committee to Elect Chris McDaniel Reporting period June 1, 2023

through June 30, 2023

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A. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Pull name Debra Cabrera	6/20/2023	^{\$} 25
Mailing Address 1750 Pass Road		\$
City, State, Zip Code Biloxi, MS 39531	//	\$
Name of Employer (Required) Jacked Up	//	\$
Occupation (Required) Kitchen	Aggregate year-to-date	^{\$} 25
B. Source: OCorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Mark Carroll	6/16/2023	^{\$} 1
Mailing Address 3847 Jefferson St # STR5	//	\$
City, State, Zip Code Macon, MS 39341	//	\$
Name of Employer (Required) Magnolia Bottle water	//	\$
Occupation (Required) Delivery driver	Aggregate year-to-date	\$ 1
C. Source: Ocorporation OPAC OIndividual OLoan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name Webb Carter	6/27/20/23	^{\$} 100
Mailing Address 16 Morgantown Rd		\$
Natchez MS 39120	//	\$
Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 100
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Jim Casey	6/16/2023	\$1000
Mailing Address 9 Canyon Crest Drive	//	\$
Corona Del Mar CA 92625	//	\$
Name of Employer (Required) Self	'	\$
Occupation (Required) Software Sales	Aggregate year-to-date	^{\$} 1000

through June 30, 2023

A. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify) Full name 11 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	(Mo., Day, Year)	this period
Full name Michael Castle	6/28/2023	^{\$} 1000
Mailing Address 142 Seagrove Village Dr	//	\$
City, State, Zip Code Santa Rosa Beach, FL 32459		\$
Name of Employer (Required) retired		S
Occupation (Required) retired	Aggregate year-to-date	^{\$} 2000
B. Source: OCorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Wanda Chandler	6/22/2023	^{\$} 500
Mailing Address 1165 Wellington Ridge Dr	//	\$
City, State, Zip Code Grenada, MS 38901		\$
Name of Employer (Required) Manager Sunset Cardio	//	\$
Occupation (Required) Manager	Aggregate year–to-date	^{\$} 500
C. Source: Ocorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Walter Chataginer	6/2/1/20/23	^{\$} 100
Mailing Address 189 St. Paul st.	//	\$
City, State, Zip Code Biloxi MS 39530	//	\$
Name of Employer (Required)	//	\$
Pecupation (Required) retired	Aggregate year-to-date	^{\$} 100
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Keith Clifford	6/28/2023	\$25
Mailing Address 7382 Old Country Club Place	//	\$
Meridian, MS 39305	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 50

Name of Candidate or Committee Committee to Elect Chris McDaniel Reporting period June 1, 2023 through June 30, 2023

	10	
A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)		this period
Cleveland Coleman	6/26/2023	^{\$} 25
Mailing Address 29124 hwy 14 east	6/26/2023	^{\$} 10
City, State, Zip Code Macon, MS 39341		\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 35
B. Source: Corporation OPAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Stephanie Collum	6/20/2023	^{\$} 25
175 Woodbridge Dr	//_	S
City, State, Zip Code Saltillo, MS 38866		S
Name of Employer (Required) Housewife	//	\$
Occupation (Required) Housewife	Aggregate year-to-date	^{\$} 25
C. Source: OCorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Carlos Conde	6/19/20/23	^{\$} 100
Mailing Address 1972 OAKVIEW DR	//	\$
Tupelo, MS 38804	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 100
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Robert Cox	6/15/2023	\$100
Mailing Address 1344 Merryhill Ranch Road	//	\$
Senatobia MS 38668	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	\$300

_through June 30, 2023

ITEMIZED RECEIPTS

	10	
A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name Shelley Crampton	6/2/1/20/23	\$10
Mailing Address 1794 Woodside Circle	6/2/1/20/23	^{\$} 50
City, State, Zip Code Tupelo, MS 38801		\$
Name of Employer (Required) Self-Employed	//	\$
Occupation (Required) Tax preparer	Aggregate year–to-date	^{\$} 110
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Bobby Creel	6/15/2023	^{\$} 50
129 Berry Street		\$
Newhebron MS 39140		\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 81
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Jody Dye	6/20/20/23	^{\$} 25
Mailing Address 117 Cowtown Road		\$
City, State, Zip Code Senatobia MS 38668	//	\$
Name of Employer (Required) At your service	//	\$
Occupation (Required) Caregiver provider	Aggregate year–to-date	^{\$} 25
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Lonnie Earls	6/20/20/23	\$25
Mailing Address 2476 Rye Road	//	\$
City, State, Zip Code Shannon MS 38868	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 25

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through June 30, 2023

	· -	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name James Edwards	6/29/2023	\$250
Mailing Address 801 South Garner Street		\$
City, State, Zip Code State College, PA 16801	/	\$
Name of Employer (Required) USACS		\$
Occupation (Required) Physician	Aggregate year-to-date	^{\$} 250
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Bret Fisackerly	6/19/2023	^{\$} 25
1600 Southern Ridge Trail	//	\$
Olive Branch MS 38654	//	\$
Name of Employer (Required) SH Systems	//	\$
Occupation (Required) Project manager	Aggregate year–to-date	^{\$} 150
C. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Brant Frost	6/27/20/23	^{\$} 250
Mailing Address 27 Velma Drive	//	\$
City, State, Zip Code Newnan GA 30263	//	\$
Name of Employer (Required) FLC	//	\$
Occupation (Required) Loan Officer	Aggregate year–to-date	^{\$} 250
D. Source: Corporation OPAC Individual CLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Joyce Fulton	6/14/2023	\$50
Mailing Address 207 Learning Oak Cv	//	\$
City, State, Zip Code Brandon MS 39047	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate yearto-date	^{\$} 75

through June 30, 2023

10	
Date (Mo., Day, Year)	Amount of each receipt
6/20/2023	\$25
	\$
//	\$
//	S
Aggregate vear-to-date	^{\$} 25
Date (Mo., Day, Year)	Amount of each receipt this period
6/14/2023	^{\$} 25
//	\$
	\$
//	\$
Aggregate vear-to-date	^{\$} 25
Date (Mo., Day, Year)	Amount of each receipt this period
6/22/2023	^{\$} 100
//	\$
//	\$
//	\$
Aggregate	^{\$} 100
Date (Mo., Day, Year)	Amount of each receipt this period
6/20/20/23	\$25
//	\$
//	\$
//	\$
Aggregate year–to-date	^{\$} 25
	Date (Mo., Day, Year) 6/20/2023 //

through June 30, 2023

	. 15	
A. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify) Full name	(Mo., Day, Year)	this period
Charles Harrigill	6/27/2023	^{\$} 300
Mailing Address 623 Highway 61 N	//	\$
City, State, Zip Code Natchez MS 39120	//	\$
Name of Employer (Required) Deptartment	//	\$
Occupation (Required) Sheriff	Aggregate year-to-date	^{\$} 300
B. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Grace Harrison	6/16/2023	^{\$} 100
Mailing Address P O Box 5324	//	\$
Vancleave MS 39565		\$
Name of Employer (Required) Self Employed	//	\$
Occupation (Required) The Encore Group, Inc.	Aggregate year-to-date	^{\$} 500
C. Source: OCorporation OPAC OIndividual OLoan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
James Harwood	6/25/20/23	^{\$} 25
Mailing Address 284 Winterfield Ct	//	\$
City, State, Zip Code Brandon MS 39042	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 25
D. Source: Corporation OPAC Individual Loan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name Constance Henderson	6/27/2023	\$200
Mailing Address 4027 Highway 37	//	\$
City, State, Zip Code Taylors ville MS 39168	//	\$
Name of Employer (Required) retired		\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 200

through June 30, 2023

	10	
A. Source: OCorporation OPAC Individual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name Wayne hodges	6/15/2023	this period
	0/10/20/23	\$25
Mailing Address 254 Lawrence Dr		\$
City, State, Zip Code Eupora MS 39744	//	\$
Self- Employed	//	\$
Occupation (Required) auto repair	Aggregate year–to-date	^{\$} 75
B. Source: Corporation OPAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Rebecca Holley	6/20/2023	^{\$} 25
856 Richland East Drive	//_	\$
City, State, Zip Code Richland MS 39218		\$
Name of Employer (Required) MDOR	//	\$
Occupation (Required) Printer	Aggregate year-to-date	^{\$} 25
C. Source: Ocorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Robert Hood	6/20/2023	^{\$} 50
Mailing Address 167 Reunion Blvd	//	\$
City, State, Zip Code Madison MS 39110	//	\$
Name of Employer (Required) MSEMA	//	\$
Occupation (Required) Director	Aggregate year–to-date	^{\$} 50
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Kelly Hooker	6/20/2023	\$100
Mailing Address 2420 Hwy 341	//	\$
City, State, Zip Code Pontotoc MS 38863	//	\$
Name of Employer (Required) Self-Employed	//	\$
Occupation (Required) Dog trainer	Aggregate year–to-date	^{\$} 100

through June 30, 2023

A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name Sandra F Inman	6/18/2023	this period
Mailing Address C 4 C A A A L L L	0/10/2023	\$50 \$
Mailing Address 318-A Avondale Dr.	'	20
City, State, Zip Code Clinton MS 39056	//	\$
Name of Employer (Required) retired		\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 75
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Geneva Jennings	6/22/2023	\$100
Mailing Address 18 Mullican Rd		\$
City, State, Zip Code Laurel MS 39443		\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 100
C. Source: Ocorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Patricia Jones	6/16/20/23	^{\$} 25
Mailing Address 218 S. 25th Avenue	//	\$
City, State, Zip Code Hattiesburg MS 39401		\$
Name of Employer (Required) Senior Helpers	//	\$
Occupation (Required) Caregiver	Aggregate year–to-date	^{\$} 150
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Terry Jones	6/20/2023	\$100
Mailing Address 2664 Highway 305 North	//	\$
Olive Branch MS 38654	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate yearto-date	^{\$} 100

ITEMIZED RECEIPTS

A. Source: Corporation PAC Individual Loan Amount of each Date receipt (Mo., Day, Year) Other (please specify) this period Full name Sonny Jones ^{\$}100 6/26/2023 Mailing Address 82 Twin Oaks trace City, State, Zip Code Hattiesburg MS 39402 Name of Employer (Required) retired Occupation (Required) retired Aggregate ^{\$}100 year-to-date B. Source: Corporation PAC Individual Loan Amount of each Date receipt (Mo., Day, Year) Other (please specify) this period Full name Kathy Jones ^{\$}1000 6/27/2023 Mailing Address **PO Box 307** City, State, Zip Code Natchez MS 39121 Name of Employer (Required) Dozer LLC Occupation (Required) Self Aggregate ^{\$}1000 year-to-date C. Source: OCorporation OPAC OIndividual OLoan Amount of each Date receipt (Mo., Day, Year) Other (please specify) this period Full name T.H. Kendall, III 6/14/2023 ^{\$}100 Mailing Address PO Box 96 City, State, Zip Code Bolton MS 39041 Name of Employer (Required) retired Occupation (Required) retired ^{\$} 100 Aggregate year-to-date D. Source: Corporation PAC Individual Loan Amount of each Date receipt (Mo., Day, Year) Other (please specify) this period Full name Cynthia Kovach 6/14/2023 \$50 Mailing Address 116 Shoreline Dr \$ City, State, Zip Code Madison MS 39110 Name of Employer (Required) retired S Occupation (Required) retired ^{\$}250

Aggregate year-to-date

through June 30, 2023

	_ · _	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Wayne Lagrone	6/26/2023	\$1000
Mailing Address 5098 Wright Spur Road	//	\$
City, State, Zip Code Toomsuba MS 39364	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	\$1000
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
jennifer landry	6/20/2023	^{\$} 25
Mailing Address 195 Hwy 528		\$
City, State, Zip Code Bay Springs MS 39422		\$
retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 55
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Janis Lane	6/29/20/23	^{\$} 50
Mailing Address 350 Byram Dr Apt 1304	6/29/2023	^{\$} 10
Byram MS 39272	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 210
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Lynda Lawrence	6/22/2023	\$10
Mailing Address 1442 David Rd		\$
City, State, Zip Code Coldwater MS 38618	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 10

through June 30, 2023

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name Aaron Lunt	6/15/2023	\$50
Mailing Address 117 Remington rd	//_	\$
City, State, Zip Code Poplarville MS 39470		\$
retired		\$
Occupation (Required) retired	Aggregate yearto-date	^{\$} 50
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Amy Martin	6/20/2023	^{\$} 25
Mailing Address 105 Martin Way		\$
City, State, Zip Code Brandon MS 39042		\$
Name of Employer (Required) Homemaker	//	\$
Occupation (Required) Homemaker	Aggregate year-to-date	^{\$} 25
C. Source: OCorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Willie McCain	6/26/20/23	^{\$} 25
Mailing Address 1373 Dogwood Hollow Dr	6/26/2023	^{\$} 6
City, State, Zip Code Nesbit MS 38651		\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 81
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Dixie McCarty	6/27/2023	\$500
Mailing Address 109 Burne Run	_/_/_	\$
City, State, Zip Code Madison MS 39110	//	\$
Name of Employer (Required) retired		\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 750

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name David McCulloch	6/21/2023	^{\$} 6
Mailing Address 4230 Weir Salem Rd	6/2/1/20/23	^{\$} 25
Ackerman MS 39735	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 31
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
James McEiroy, II	6/15/2023	^{\$} 500
Mailing Address 19 Joy Dr	//_	\$
City, State, Zip Code Hattiesburg MS 39402	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 500
C. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Johnnie McInnis	6/15/2023	^{\$} 25
Mailing Address 226 Road 2878	//	\$
City, State, Zip Code Baldwyn MS 38824	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 175
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name Joni McNeese	6/26/2023	this period
Mailing Address 340 Stump Ridge Rd	/_/	\$
City, State, Zip Code Brandon MS 39047	//	\$
Name of Employer (Required) Lockheed Martin		\$
Occupation (Required) HRBP	Aggregate year–to-date	^{\$} 50

through June 30, 2023

	10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name Ryan Merchant	6/22/2023	\$1600
Mailing Address 223 Guide Dr	//	\$
City, State, Zip Code Brandson MS 39042	//	\$
Name of Employer (Required) Self	//	S
Occupation (Required) Crop So Products	Aggregate year–to-date	\$2100
B. Source: OCorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Barbara Miller	6/20/2023	^{\$} 25
163 Bernis Hill Road	//	\$
City, State, Zip Code Soso MS 39480	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 25
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name Dennis Murphy	6/22/2023	\$100
Mailing Address 828 County Road 54	//	\$
City, State, Zip Code New Albany MS 38652	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 100
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Binford Nash, Jr.	6/15/20/23	\$50
Mailing Address 284 Buttonwood Ln	//	\$
City, State, Zip Code CANTON MS 39046	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 50

Reporting period June 1, 2023

through June 30, 2023

	. 10	
A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name Robbie Nichols	6/15/2023	\$100
Mailing Address 105 Walthall Street		\$
City, State, Zip Code Greenwood MS 38930		\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 200
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Brian Nottingham	6/19/2023	^{\$} 50
17439 Doc Lizana Rd	//	\$
City, State, Zip Code Gulfport MS 39503	//	\$
Name of Employer (Required) U.S. Navy		\$
Occupation (Required) Management	Aggregate year–to-date	^{\$} 150
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Steve Odom	6/20/20/23	^{\$} 100
Mailing Address 1107 Corinne Street	//	\$
City, State, Zip Code Hattiesburg MS 39401	//	\$
Name of Employer (Required) USPS	//	\$
Occupation (Required) City Letter Carrier	Aggregate year–to-date	^{\$} 100
D. Source: Corporation PAC Individual Cloan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Glenn Olson	6/27/2023	\$250
Mailing Address 1833 Keenlan Drive	6/27/2023	\$250
City, State, Zip Code Hernando MS 38632	//	\$
Name of Employer (Required) Garratt-Callahan	//	\$
Occupation (Required) Engineer	Aggregate year–to-date	^{\$} 500

Reporting period June 1, 2023

through June 30, 2023

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A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name Ken Overstreet	6/21/2023	\$6
Mailing Address POB 6543	6/2/1/20/23	^s 25
City, State, Zip Code DMHD MS 39525	//_	\$
Name of Employer (Required) Overstreet Enterprises	//	\$
Occupation (Required) Engineering	Aggregate year–to-date	^{\$} 106
B. Source: OCorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Samuel Owens	6/20/2023	^{\$} 50
P.O. Box 6373	//	\$
Vancleave MS 39565		\$
Name of Employer (Required) Jackson County School District	//	\$
Occupation (Required) Bus Driver	Aggregate year-to-date	^{\$} 50
C. Source: OCorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Larry Paxton	6/16/20/23	\$25
Mailing Address 1004 CLUBHOUSE CT		\$
City, State, Zip Code Pearl MS 39208	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 25
O. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Cheryl Peeples	6/20/2023	\$50
Pobox 1030	//	\$
Pontotoc MS 38863	//	\$
vame of Employer (Required) retired	//	\$
Decupation (Required) retired	Aggregate yearto-date	^{\$} 50

Name of Candidate or Committee Committee to Elect Chris McDaniel

Reporting period June 1, 2023 through June 30, 2023

	- ~	
A. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Shawn Pennock	6/20/2023	^{\$} 25
Mailing Address 1046 Horse Shoe Circle		\$
City, State, Zip Code Byram MS 39272		S
Name of Employer (Required)		\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 25
B. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Wade Perkins	6/29/2023	^{\$} 200
Mailing Address 171 CR 198		\$
City, State, Zip Code Oxford MS 38655	//	S
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 200
C. Source: Ocorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Kevin Poole	6/26/2023	^{\$} 10
Mailing Address 1721 Highway 11	//	\$
City, State, Zip Code Petal MS 39465		\$
Name of Employer (Required) Channel Control Merchants	//	\$
Occupation (Required) Analyst	Aggregate year–to-date	^{\$} 165
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Vera Potter	6/14/2023	\$100
Mailing Address 486 HIGHWAY 590	//	\$
City, State, Zip Code Ellisville MS 39437	//	\$
Name of Employer (Required) retired		\$
Occupation (Required) retired	Aggregate yearto-date	\$100

Reporting period June 1, 2023

through June 30, 2023

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Robert Praino	6/28/2023	\$10
Mailing Address 11515 Azalea Trce		\$
City, State, Zip Code Gulfport MS 39503	//	\$
Name of Employer (Required) retired	//_	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 20
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Richard Przybelski	6/29/2023	^s 100
59 Beverly Hills Loop		s
City, State, Zip Code Petal MS 39465		\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 100
C. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Angela Ray	6/26/2023	^{\$} 100
7854 cottonlane	//	\$
Southaven MS 38671	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 100
D. Source: Corporation OPAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
John Redwine	6/1/4/20/23	\$100
Mailing Address 54 Thomas Cir	//	\$
City, State, Zip Code Columbus MS 39705	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 200

Reporting period June 1, 2023 through June 30, 2023

A. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Inomas Rogers	6/14/2023	^{\$} 50
Mailing Address 44 HUCKLEBERRY ROAD	//	\$
City, State, Zip Code Ellisville MS 39437	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 350
B. Source: Corporation OPAC Individual Cloan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Frank Rogowski	6/15/2023	^{\$} 50
204 Culpepper Blvd	//	\$
Madison MS 39110	//	\$
Name of Employer (Required)		\$
Occupation (Required) Engineer	Aggregate year–to-date	^{\$} 200
C. Source: Ocorporation OPAC OIndividual OLoan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name Thomas Rolleigh	6/20/20/23	^{\$} 50
Mailing Address Po box 1096	//	\$
City, State, Zip Code luka MS 38852	//	\$
Name of Employer (Required) Puckett Trucking	//	\$
Occupation (Required) Truck Driver	Aggregate yearto-date	^{\$} 50
D. Source: Corporation OPAC Individual Cloan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Carol Sadler	6/20/20/23	\$25
Mailing Address 1239-2 CR 141	//	\$
City, State, Zip Code Blue Mountain MS 38610		\$
Name of Employer (Required) New Albany School District	//_	\$
Occupation (Required) Bookkeeper	Aggregate year–to-date	^{\$} 25

Name of Candidate or Committee Committee to Elect Chris McDaniel

Reporting period June 1, 2023 through June 30, 2023

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A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Michelle Sander	6/20/2023	\$50
Mailing Address 15 Longwood Dr	//_	\$
City, State, Zip Code Picayune MS 39466		\$
Name of Employer (Required) HW		\$
Occupation (Required) Financial	Aggregate year-to-date	^{\$} 50
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Connie Sanford	6/20/2023	^{\$} 250
780 Old Rifle Range Rd		\$
City, State, Zip Code Petal MS 39465		\$
Name of Employer (Required) Self	//	\$
Occupation (Required) Greg Sanford Trucking	Aggregate year-to-date	^{\$} 450
C. Source: Ocorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
joe sansing	6/27/2023	^{\$} 100
Mailing Address 725 Country Road 230	//	\$
Bay City TX 77414		\$
Name of Employer (Required) AVEVA Software	//	\$
Occupation (Required) Accountant	Aggregate year-to-date	^{\$} 500
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Edward Schmidt	6/16/20/23	\$100
Mailing Address po box 866	//	\$
City, State, Zip Code Saucier MS 39574	//	\$
Name of Employer (Required) Harvey Gulf International	//	\$
Occupation (Required) chief engineer	Aggregate year–to-date	^{\$} 400
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A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name Coults On the Country of the Coun		this period
Full name Kathy Schwend	6/20/2023	^{\$} 25
Mailing Address 5821 Shannon Drive	//	\$
City, State, Zip Code Horn Lake MS 38637	//	\$
Name of Employer (Required) West Cancer Ctr		\$
Occupation (Required) Research coordinator	Aggregate year–to-date	^{\$} 25
B. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Wanda Shoemake	6/20/2023	^{\$} 25
4 Tallahalla Rd		\$
City, State, Zip Code Petal MS 39465	//	\$
Name of Employer (Required) RUD	//	\$
Occupation (Required) Office manager	Aggregate year–to-date	^{\$} 25
C. Source: Ocorporation OPAC Individual OLoan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name Kathaleen Simmons	6/20/2023	^{\$} 25
Mailing Address 1879 Jaybird Road	//	\$
Hernando MS 38632	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 25
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Anthony Smit	6/27/20/23	\$100
Mailing Address 302 Mulberry	//	\$
Purvis MS 39475	//	\$
Name of Employer (Required) Targa Resources	//	\$
Occupation (Required) Mechanic	Aggregate year–to-date	^{\$} 100

through June 30, 2023

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A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Robert Smith	6/15/20/23	\$25
Mailing Address 22 Sandway Ct.	//	\$
Brandon MS 39042	//_	\$
retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 25
B. Source: Corporation OPAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Kelvin Smith	6/16/2023	^{\$} 25
Mailing Address 66 Lake Eddins 1638	//	\$
City, State, Zip Code Pachuta MS 39347		\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 25
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Tina Smith	6/22/2023	^{\$} 50
Mailing Address 66 Lake Eddins 1638	//	\$
Pachuta MS 39347	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 50
O. Source: OCorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Carl Smith	6/30/2023	\$50
730 Phillips Rd	//	\$
City, State, Zip Code Morton MS 91173	//	\$
ame of Employer (Required)	//	\$
retired (Required)	Aggregate year–to-date	^{\$} 50
· · · · · · · · · · · · · · · · · · ·		

Tull name Brian Stanley Mailing Address 4500 PECAN MEADOW CT City, State, Zip Code Fort Worth TX 76140 Name of Employer (Required) American Airlines Occupation (Required) Pilot B. Source: Corporation PAC Individual Cloan Other (please specify) Other (please specify) Mino., Day, Year) Source: Moo., Day, Year) this p this p this p this p 6/19/2023 \$300	eipt
Full name Brian Stanley Mailing Address 4500 PECAN MEADOW CT City, State, Zip Code Fort Worth TX 76140 Name of Employer (Required) American Airlines Occupation (Required) Pilot B. Source: Ocorporation PAC Individual Loan Other (please specify) Aggregate year-to-date Other (please specify) Aggregate (Mo., Day, Year) Amount rece this method.	eriod
Mailing Address 4500 PECAN MEADOW CT City, State, Zip Code Fort Worth TX 76140 Name of Employer (Required) American Airlines Occupation (Required) Pilot B. Source: Ocrporation OPAC Individual OLoan Other (please specify) S Aggregate year-to-date Mo., Day, Year) Amount rece (Mo., Day, Year)	
A500 PECAN MEADOW CT City, State, Zip Code Fort Worth TX 76140 Name of Employer (Required) American Airlines Occupation (Required) Pilot B. Source: Ocorporation OPAC Individual OLoan Other (please specify) A500 PECAN MEADOW CT -/_/ \$ Aggregate year-to-date Amount rece (Mo., Day, Year)	
Name of Employer (Required) American Airlines Occupation (Required) Pilot B. Source: Ocorporation OPAC OIndividual OLoan Other (please specify) Aggregate year-to-date Source: (Mo., Day, Year) Other (please specify)	
American Airlines Occupation (Required) Pilot B. Source: Ocorporation OPAC OIndividual OLoan Other (please specify) Aggregate year-to-date Source: Ocorporation OPAC OIndividual OLoan Other (please specify) Aggregate year-to-date Source: (Mo., Day, Year)	
B. Source: Corporation PAC Individual Loan Other (please specify) Date (Mo., Day, Year) (Mo., Day, Year)	
B. Source: Corporation PAC Individual Loan Other (please specify) Date (Mo., Day, Year) Other (please specify)	
Other (please specify) (Mo., Day, Year) rece	of each
Full name Ruth Steyn 6/15/2023 \$75	
3356 Whippoorwill Lane//_ s	-
City, State, Zip Code Oxford MS 38655	
Name of Employer (Required) retired// \$	
Occupation (Required) retired Aggregate year-to-date \$ 175	-
C. Source: Ocorporation OPAC Individual OLoan Date Amount	of each
Other (please specify) (Mo., Day, Year) receive this pe	•
Full name Richard Stone 6/17/2023 \$25	
Mailing Address 139 Fox Farm Rd// \$	
Tupelo MS 38801	
Name of Employer (Required) University of Mississippi// \$	
Occupation (Required) Student Aggregate year-to-date \$25	
D. Source: Corporation PAC Individual Loan Poto Amount of	
Other (please specify) (Mo., Day, Year) receifthis per	
Full name Diane Suber 6/20/2023 \$25	
Mailing Address 39 Robinson Dr/ \$	
City, State, Zip Code French Camp MS 39745	
Name of Employer (Required) FCA Occupation (Required) Manager Aggregate year—to-date \$ 25	
Occupation (Required) Manager Aggregate year-to-date \$25	

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A. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Ron Swindall	6/27/2023	^{\$} 100
Mailing Address PO Box 1283	//_	\$
City, State, Zip Code Laurel MS 39441	//_	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 100
B. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Meridith Tatum	6/14/2023	^{\$} 100
1036 Petrified Forest Road		\$
City, State, Zip Code Flora MS 39071		\$
Name of Employer (Required) NECA		\$
Occupation (Required) Manager	Aggregate year-to-date	\$200
C. Source: Ocorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Marie Thomas	6/22/2023	^{\$} 500
Mailing Address 552 Highway 314	//	\$
Oxford MS 38655	//	\$
Name of Employer (Required) Retired		\$
Occupation (Required) Retired	Aggregate yearto-date	^{\$} 500
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Chris Thompson	6/22/20/23	\$100
Mailing Address 194 Whitetail Blvd	//	\$
City, State, Zip Code Florence MS 39073	//	\$
Name of Employer (Required) International Paper	//	\$
Occupation (Required) EHS	Aggregate year–to-date	^{\$} 100

through June 30, 2023

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A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name Terry Tirrell	6/28/20/23	\$40
Mailing Address 3505 N 11TH ST		\$
City, State, Zip Code OCEAN SPRINGS MS 30564		\$
Name of Employer (Required)	_ / /	\$
Occupation (Required) retired	Aggregate	^{\$} 65
B. Source: OCorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Robin Torske	6/19/2023	^{\$} 25
Mailing Address 23 Copperhead RD		\$
Laurel MS 39443	//	\$
Name of Employer (Required) retired	//	\$
Occupation (Required) retired	Aggregate year-to-date	^{\$} 175
C. Source: Ocorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Pine Belt Truss, Inc	6/22/2023	\$1000
Mailing Address PO Box 9	//	\$
City, State, Zip Code Soso MS 39480	//	\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year-to-date	^{\$} 1000
D. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify) Full name Richard Tucker	(Mo., Day, Year)	this period
Mailing Address 1707 Clareton A	6/2/1/20/23	\$50
Mailing Address 1707 Clayton Ave City, State, Zip Code—	''	\$
City, State, Zip Code Tupelo MS 38804 Name of Employer (Required).	//	\$
Name of Employer (Required) LURE Creative	/	\$
Occupation (Required) Business Owner	Aggregate year–to-date	^{\$} 50

A. Source: Corporation PAC Individual Loan	-~	Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt
Full name Sammy Turner	6/16/2023	\$25
Mailing Address 120 Road 778		\$
City, State, Zip Code Tupelo MS 38801	//	\$
Name of Employer (Required) North Mississippi Medical Center	//	\$
Occupation (Required) Biomed Equipment Tech	Aggregate year-to-date	^{\$} 145
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name Jan Ulsteen	6/27/2023	\$100
Mailing Address 9031 Hannah Lane		\$
City, State, Zip Code Biloxi MS 39532	'	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 100
C. Source: Ocorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Clifford Welch	6/28/20/23	^{\$} 175
Mailing Address 1092 Henry Burch Rd.	//	\$
City, State, Zip Code Mccomb MS 39648	//	\$
Name of Employer (Required)	//	\$
Occupation (Required) retired	Aggregate year–to-date	^{\$} 375
D. Source: Corporation PAC Individual Loan	Date Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Brian Wells	6/20/20/23	\$25
Mailing Address 1725 Highway 80	//	\$
City, State, Zip Code Vicksburg MS 39180	//	\$
Name of Employer (Required) Entergy		\$
Occupation (Required) Relay Tech	Aggregate year–to-date	^{\$} 125

Reporting period June 1, 2023

through June 30, 2023

A. Source: Corporation PAC Individual Cloan Other (please specify) Full name James White Mailing Address 32 County Road 24143 City, State, Zip Code Newton MS 39345 Name of Employer (Required) Retired B. Source: Corporation PAC Individual Cloan Other (please specify) Full name Occupation (Required) Retired Amount of each receipt this period Full name City, State, Zip Code Natchez MS 39120 Name of Employer (Required) Retired Amount of each receipt this period Full name Occupation (Required) Retired Amount of each receipt this period Full name Occupation (Required) Retired Amount of each receipt this period Full name Occupation (Required) Retired Occupation (Required) Retired Occupation (Required) Retired City, State, Zip Code Meridian MS 39307 Name of Employer (Required) Retired Occupation Required) Retired Occupation Required Retired Aggregate Sundant Retired Aggregate Sundant Retired Occupation Required Retired Aggregate Sundant Retired Occupation Required Retired Aggregate Sundant Retired Sundant Retired Aggregate Sundant Retired Aggregate Sundant Retired		ID	*
Fell name James White Mailing Address 32 County Road 24143 City, State, Zip Code Newton MS 39345 Name of Employer (Required) Retired R			receipt
Mailing Address 32 County Road 24143	Rull name		
Name of Employer (Required) Retired Sagregate Samulation Sagregate Samulation Sagregate Samulation Sagregate Samulation Sagregate Samulation Sagregate Samulation Samulat	Mailing Address 32 County Road 24143		
Name of Employer (Required) Retired Occupation (Required) Retired Description (Pac Individual Loan Other (please specify)	City, State, Zip Code Newton MS 39345		\$
Description (Required) Retired PAC	Name of Employer (Required) Retired	//	\$
B. Source: Corporation PAC Individual Loan Other (please specify) Full name Boyd White Mailing Address 17 Wishmore Plantation Rd City, State, Zip Code Natchez MS 39120 Name of Employer (Required) Retired City, State, Zip Code Retired City, State, Zip Code Nation PAC Individual Loan Mailing Address 5246 Dr Brock Rd City, State, Zip Code Retired City, State, Zip Code Nation (Required) Retired City, State, Zip Code Nation Other (please specify) Mailing Address 5246 Dr Brock Rd City, State, Zip Code Retired City Retired City, State, Zip Code Retired Cocupation (Required) Retired Cocupation (Required) Retired Cocupation (Required) Retired Cocupation (Required) Retired City, State, Zip Code Corporation PAC Individual Cloan Other (please specify) Full name Tommie Yanik Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired City, State, Zip Code Gulfport MS 39503	Occupation (Required) Retired		^{\$} 1000
Mailing Address 17 Wishmore Plantation Rd City, State, Zip Code Natchez MS 39120 Name of Employer (Required) Retired Occupation (Required) Retired C. Source: Corporation PAC Individual Loan Other (please specify) Mailing Address 5246 Dr Brock Rd City, State, Zip Code Meridian MS 39307 Name of Employer (Required) Retired Description PAC Individual Pack Mailing Address 5246 Dr Brock Rd City, State, Zip Code Meridian MS 39307 Name of Employer (Required) Retired Description PAC Individual Pack Description PAC Individual Pack Mailing Address 5246 Pack Mailing Address 5246 Pack Meridian MS 39307 Name of Employer (Required) Retired Description PAC Individual Pack Mailing Address 9200 Amount of each receipt this period Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Mailing Address Retired	Other (please specify)	Date	Amount of each receipt
Mailing Address 17 Wishmore Plantation Rd City, State, Zip Code Natchez MS 39120 Name of Employer (Required) Retired Occupation (Required) Retired C. Source: Corporation PAC Individual Loan Other (please specify) Mailing Address 5246 Dr Brock Rd City, State, Zip Code Meridian MS 39307 Name of Employer (Required) Retired Description PAC Individual Pack Mailing Address 5246 Dr Brock Rd City, State, Zip Code Meridian MS 39307 Name of Employer (Required) Retired Description PAC Individual Pack Description PAC Individual Pack Mailing Address 5246 Pack Mailing Address 5246 Pack Meridian MS 39307 Name of Employer (Required) Retired Description PAC Individual Pack Mailing Address 9200 Amount of each receipt this period Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Mailing Address Retired	Full name Boyd White	6/27/2023	^{\$} 100
Nationez MS 39120 Name of Employer (Required) Retired Occupation (Required) Retired C. Source: Ocorporation OPAC Individual OLoan Other (please specify) Mailing Address Tommie Yanik Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Occupation (Required) Retired Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Occupation (Required) Retired Occupation (Required) Retired Occupation Other (please specify) Suppose Amount of each receipt this period this		//	
Occupation (Required) Retired C. Source: Corporation PAC Individual Loan Other (please specify) Full name Tina Williams Mailing Address 5246 Dr Brock Rd City, State, Zip Code Meridian MS 39307 Name of Employer (Required) Other (please specify) Full name Toname of Employer (Required) Retired Description Other (please specify) Full name Tommie Yanik Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Samount of each receipt this period Amount of each receipt this period Amount of each receipt this period City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Samount of each receipt this period City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Samount of each receipt this period Samount of each receipt this period City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Samount of each receipt this period	Natchez MS 39120	_'_'_	\$
C. Source: Corporation PAC Individual Loan Other (please specify) Full name Tina Williams Mailing Address 5246 Dr Brock Rd City, State, Zip Code Occupation (Required) Retired Occupation (Required) PAC Individual Cloan Other (please specify) Full name of Employer (Required) PAC Individual Cloan Other (please specify) Full name Tommie Yanik Mailing Address 5246 Dr Brock Rd City, State, Zip Code Meridian MS 39307 Aggregate year-to-date (Mo., Day, Year) Amount of each receipt this period Full name Tommie Yanik 6/26/2023 S100 Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Amount of each receipt this period Source: Corporation PAC Amount of each receipt (Mo., Day, Year) Samount of each receipt this period Amount of each receipt this period Support No., Day, Year) Support No., Da	Name of Employer (Required) Retired	//	\$
C. Source: Corporation PAC Individual Loan Other (please specify)	Occupation (Required) Retired	1	^{\$} 100
Mailing Address 5246 Dr Brock Rd City, State, Zip Code Meridian MS 39307 Name of Employer (Required) Retired Occupation (Required) Retired D. Source: Corporation PAC Individual Loan Other (please specify) Full name Tommie Yanik Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired 6/22/2023 \$100 Amount of each receipt this period \$100	Other (please specify)	Date	Amount of each receipt
Mailing Address 5246 Dr Brock Rd City, State, Zip Code Meridian MS 39307 Name of Employer (Required) Retired Occupation (Required) Retired D. Source: Corporation PAC Individual Loan Other (please specify) Full name Tommie Yanik Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired 6/22/2023 \$100 Amount of each receipt this period \$100	Full name Tina Williams	6/22/2023	^{\$} 100
City, State, Zip Code Meridian MS 39307 Name of Employer (Required) Retired Occupation (Required) Retired D. Source: Ocorporation OPAC Individual OLoan Other (please specify) Full name Tommie Yanik Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired S - / _ / _ S - / _ /	Mailing Address 5246 Dr Brock Rd	6/22/2023	
Name of Employer (Required) Retired Occupation (Required) Retired D. Source: Corporation PAC Individual Loan Other (please specify) Full name Tommie Yanik Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Occupation (Required) \$ 200 Amount of each receipt this period Full name femployer (Required) \$ 100	City, State, Zip Code Meridian MS 39307	//	
D. Source: Corporation PAC Individual Loan Other (please specify) Full name Tommie Yanik Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Amount of each receipt this period Amount of each receipt this period ### Address 100 ### Amount of each receipt this period ### Amount of each receipt this period ### \$100 ### Amount of each receipt this period ### Amount of each	Name of Employer (Required) Retired	//	\$
D. Source: Corporation PAC Individual Loan Other (please specify) Full name Tommie Yanik Mailing Address 19121 Champion Circle City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Amount of each receipt this period \$100 -/_/_ \$	Occupation (Required) Retired		^{\$} 200
Mailing Address 19121 Champion Circle	Other (please specify)	Date	Amount of each receipt
City, State, Zip Code Gulfport MS 39503 Name of Employer (Required) Retired Retired -/_/_ \$ -/_/_ \$	i ommie Yanik	6/26/2023	\$100
Name of Employer (Required) Retired// \$	1912 I Champion Circle	//	\$
Name of Employer (Required) Retired// \$	City, State, Zip Code Gulfport MS 39503	//	\$
Occupation (Required) Retired Aggregate year-to-date \$ 100	Name of Employer (Required) Retired	//	\$
	Occupation (Required) Retired	00 0	^{\$} 100

through June 30, 2023

	15	
A. Source: OCorporation OPAC Individual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Morgan Zeigler	6/20/2023	\$25
Mailing Address 571 Mockingbird Circle	//	\$
City, State, Zip Code Brandon MS 39047	'	\$
Name of Employer (Required) Dallas Printing		\$
Occupation (Required) Graphic Designer	Aggregate year-to-date	^{\$} 25
B. Source: Corporation OPAC OIndividual OLoau	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Southern Exteriors Fence Co Inc	6/22/2023	^s 1650
31023 Crane Creek Rd		S
Perkinston MS 39573		\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year-to-date	^{\$} 1650
C. Source: OCorporation OPAC OIndividual OLoan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name Gulf Coast Business Supply Company	6/22/2023	^{\$} 1000
PO Box 2116	//	\$
City, State, Zip Code Gulfport MS 39505		\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year–to-date	^{\$} 1000
D. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name South Gate Aggregates, LLC	6/22/2023	\$500
Mailing Address PO Box 673	//	\$
City, State, Zip Code Carriere MS 39426	//	\$
Name of Employer (Required)	/ /	\$
Occupation (Required)	Aggregate year-to-date	^{\$} 500

	LIF 13	
A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name Woodland Hills Management LLC		this period
Mailing Address - Mailing Address -	6/27/2023	^{\$} 500
Mailing Address 233A Deerfield Rd		\$
City, State, Zip Code Natchez MS 39120		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	^{\$} 500
B. Source: Corporation OPAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
I homas Datwyler	6/14/2023	\$200
Mailing Address PO Box 183	6/22/2023	^s 100
City, State, Zip Code Hudson, WI 54016	6/22/2023	^{\$} 700
Name of Employer (Required) AxCapital	6/27/2023	^{\$} 833
Occupation (Required) Campaign Finance	Aggregate year-to-date	^{\$} 1833
C. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Thomas Datwyler	6/27/2023	\$890
Mailing Address PO Box 183		\$
City, State, Zip Code Hudson, WI 54016	//	\$
AxCapital	//	\$
Occupation (Required) Campaign Finance	Aggregate year-to-date	\$890
D. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name	1 1	\$
Mailing Address		\$
City, State, Zip Code	/ /	\$
Name of Employer (Required)		
Occupation (Required)	Aggregate	\$ \$
	year-to-date	

	11.19	
A. Source: OCorporation OPAC Individual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Betty Carter Mailing Address CO TO CO	6/1/2023	^{\$} 100
6050 Quave Rd	//	\$
Vancleave, MS 39565		\$
Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 100
B. Source: Corporation OPAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Monica Boudreaux	6/1/1/2023	^{\$} 280
654 Savannah Estates Blvd	'	\$
City, State, Zip Code Biloxi, MS 39532	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 280
C. Source: OCorporation OPAC Individual OLoan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name Randall Love	6/1/2023	^{\$} 1750
Mailing Address 1056 Sherra Dr	//	\$
City, State, Zip Code Summit. MS 39666	//	\$
Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 1750
D. Source: Corporation PAC Individual Loan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name River Road Mercantile LLC	6/10/2023	\$400
Mailing Address 410 Larkin I Smith Dr	//	\$
City, State, Zip Code Poplarville, MS 39470	//	\$
Name of Employer (Required)	//_	\$
Occupation (Required)	Aggregate year-to-date	^{\$} 400
· · · · · · · · · · · · · · · · · · ·		

Reporting period June 1, 2023

through June 30, 2023

	- - ~	
A. Source: OCorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name Shannon Richardson	6/9/2023	\$200
Mailing Address 118 Reese Rd		\$
City, State, Zip Code Carriere, MS 39426		\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	\$200
B. Source: Corporation OPAC Individual Cloan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Monica Boudreaux	6/26/2023	^{\$} 100
654 Savannah Estates Blvd		s
City, State, Zip Code Biloxi, MS 39532	//	\$
Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 100
C. Source: OCorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name George Thurber	6/23/2023	^{\$} 300
Mailing Address 251 Lovers Lane		\$
Ocean Springs, MS 39564		\$
Name of Employer (Required) Retired	//	\$
Retired	Aggregate year–to-date	^{\$} 300
D. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Wiggins Gun & Pawn, LLC	6/10/20/23	\$300
Mailing Address 167 S First St		\$
City, State, Zip Code Wiggins, MS 39577	//	\$
lame of Employer (Required)	//	\$
Occupation (Required)	Aggregate year–to-date	^{\$} 300

Name of Candidate or Committee Committee to Elect Chris McDaniel

Reporting period June 1, 2023 through June 30, 2023

	TH ID	
A. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Kyle Pugh	6/16/2023	^{\$} 100
Mailing Address 3338 Cr 16		\$
City, State, Zip Code Louin, MS 39338	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 100
B. Source: OCorporation OPAC OIndividual OLoan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name Robert Pugh	6/16/2023	^{\$} 50
Mailing Address 3336 CR 16		\$
Louin, MS 39338	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 50
C. Source: OCorporation OPAC Individual OLoan	year to-unic	Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name Ben Moore	6/30/2023	^{\$} 200
Mailing Address 904 Beech St	//	\$
Enterprise MS 30330	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 200
D. Source: Corporation PAC Individual Loan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name Charles Hamrick	6/30/2023	\$100
Mailing Address 4613 County Road 320		\$
City, State, Zip Code Enterprise MS 39330	//	\$
Name of Employer (Required) Retired		s
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 100

	CIT 12	
A. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify) Full name_Time_Consider	(Mo., Day, Year)	this period
Tina Smith Mailing Address Co. L	6/30/2023	^{\$} 230
66 Lake Eddins	//	\$
City, State, Zip Code Pachuta, MS 39347	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate yearto-date	\$230
B. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Jack Fairchilds	6/30/2023	^{\$} 1000
Mailing Address 353 Dubose St	//_	\$
Flisville MS 39437		\$
Name of Employer (Required) Retired		\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 1000
C. Source: Ocorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Richard Conrad	6/30/2023	^{\$} 1000
Mailing Address 735 N. 7th Ave	//	^{\$} 1000
City, State, Zip Code Laurel, MS 39440		\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 2000
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Jerel Wade	6/30/2023	\$1000
Mailing Address 311 Watermill Rd		\$
City, State, Zip Code aurel MS 30//3		\$
Name of Employer (Required) Retired		\$
Occupation (Required) Retired		^{\$} 1000

Name of Candidate or Committee Committee to Elect Chris McDaniel

Reporting period June 1, 2023 through June 30, 2023

	-	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
John Adcock	6/30/2023	\$750
Mailing Address 908 Cedarbrook Dr	//	\$
City, State, Zip Code Oxford, MS 38655	//	\$
Name of Employer (Required) Retired		\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 750
B. Source: OCorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Chad Altmyer	6/28/2023	^s 5000
1968 Taylor Thurston Rd	//	\$
Columbus, MS 39701	'	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 5000
C. Source: Ocorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Ross Aldridge	6/29/2023	\$50
Mailing Address 384 Audubon Cir	//	\$
Brandon, MS 39047	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 50
O. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Ray Shores	6/29/20/23	\$200
4604 Paradise Rd	//	\$
City, State, Zip Code Bentonia, MS 39040	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate yearto-date	^{\$} 200

Reporting period June 1, 2023

through June 30, 2023

	711 1 D	
A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	· · · · · · · · · · · · · · · · · · ·	this period
Full name Wanza Anderson Mailing Address C 4 C C L L C C C C C C C C C C C C C C	6/27/2023	^{\$} 100
6463 Hwy 497	//	\$
City, State, Zip Code Edwards, MS 39066	//	\$
Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 100
B. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Cynthia Kovach	6/29/2023	^{\$} 100
Mailing Address 116 Shoreline Dr	//	s
City, State, Zip Code Madison, MS 39110		\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 100
C. Source: OCorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Larry Harvey	6/29/2023	^{\$} 100
Mailing Address PO Box 1207	//	\$
Mount Olive, MS 39119		\$
Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 100
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Charles White	6/22/20/23	\$100
Mailing Address 308 White Rd	//	\$
City, State, Zip Code Thaxton MS 38871	//	\$
Name of Employer (Required) Retired	//	\$.
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 100

Reporting period June 1, 2023

through June 30, 2023

	TI IO	
A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name Michelle Lowrie	6/29/2023	\$400
Mailing Address	GIZPIZOZ3	^{\$} 100
621 Water Oak Dr	/	
Madison MS 39110		\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate yearto-date	^{\$} 100
B. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
James Shannon	6/27/2023	\$2000
100 W. Gallatin St	//	\$
City, State, Zip Code Hazlehurst, MS 39083	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 2000
C. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Bobby Cox	6/27/2023	\$2000
Mailing Address PO Box 892	//	\$
Natchez, MS 39121	//	\$
Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 2000
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Linda Davis	6/28/20/23	\$200
Mailing Address 23 Enclave Cir	//	\$
City, State, Zip Code Ridgeland MS 39157	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 200

Reporting period June 1, 2023

through June 30, 2023

	10	
A. Source: OCorporation OPAC Individual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name Donna Boggan	6/24/2023	\$25
Mailing Address 745 SCR 132 A		\$
City, State, Zip Code Raleigh MS 39153	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 25
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Kenneth Williams	6/30/2023	^s 1500
Mailing Address 10 Colony Dr	//	S
Natchez, MS 39120	//	\$
Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 1500
C. Source: OCorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Oak Ridge Ventires LLC	6/29/20/23	^{\$} 200
Mailing Address 5014 Old Brrokhaven Rd	//	\$
City, State, Zip Code Summit, MS 39666		\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 200
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Byrne Phyfer	6/1/202/3	\$ 50
Mailing Address PO Box 776	//	\$
City, State, Zip Code New Albany, MS 38652	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 50

Reporting period June 1, 2023

through June 30, 2023

A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name R G Turnage	6/2/1/2023	this period
Mailing Address 338 Branning Dr	/ /	\$400 \$
City, State, Zip Code Monticello MS 39654		\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 400
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Byrne Phyfer	6/1/202/3	^{\$} 50
Mailing Address PO Box 776	//	\$
New Albany, MS 38652	/	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate year-to-date	^{\$} 50
C. Source: Ocorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Unitemized	6/3/0/20/23	^{\$} 159
Mailing Address Unitemized	//	\$
City, State, Zip Code Unitemized	_/_/_	\$
Name of Employer (Required) Unitemized	//	\$
Occupation (Required) Unitemized	Aggregate year-to-date	^{\$} 159
D. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	//	\$
Mailing Address	//	\$
City, State, Zip Code	//	\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year-to-date	\$

Reporting period June 1, 2023

through June 30, 2023

Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018		
A. Full name SSR Communications, Inc	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1447 F O A Rd	06/20/2023	\$ 250
City, State, Zip Code Jackson MS 39209		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 250
Strategic Media Placement, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 7669 Stagers Loop	06/27/2023	\$ 14250
City, State, Zip Code Delaware OH 43015	//	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 69171
Strategic Media Placement, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 7669 Stagers Loop	06/30/2023	\$ 54921
City, State, Zip Code Delaware OH 43015	//	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 69171
D. Full name The First Bank	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1945 Hwy. 15 North	06/05/2023	\$ 25
City, State, Zip Code Laurel, MS39440	//	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 150
E. Full name The First Bank	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1945 Hwy. 15 North	06/96/2023	\$ 25
City, State, Zip Code Laurel, MS39440	//	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 150
The First Bank	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1945 Hwy. 15 North	<u>06/14/2023</u>	\$ 25
City, State, Zip Code Laurel, MS39440		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 150

Reporting period June 1, 2023

through June 30, 2023

Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018		
A. Full name The First Bank	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1945 Hwy. 15 North	06/27/2023	\$ 25
City, State, Zip Code Laurel, MS39440		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 150
B. Full name The First Bank	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1945 Hwy. 15 North	06/30/2023	\$ 25
City, State, Zip Code Laurel, MS39440	//	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 150
C. Full name The First Bank	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1945 Hwy. 15 North	06/30/2023	\$ 25
City, State, Zip Code Laurel, MS39440		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 150
D. Full name WinRed	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1776 Wilson Blvd Suite 530	6/1/2023	\$ 1.98
City, State, Zip Code Arlington, VA 22209	_/_/_	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 989.60
E. Full name WinRed	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1776 Wilson Blvd Suite 530	06/08/2023	\$ 404.23
City, State, Zip Code Arlington, VA 22209		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 989.60
F. Full name WinRed	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1776 Wilson Blvd Suite 530	06/15/2023	\$ 114.55
City, State, Zip Code Arlington, VA 22209	//	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 989.60

Name of Candidate or Committee Outline to Lieut Office Wilder

Reporting period June 1, 2023

through June 30, 2023

Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018			
A. Full name WinRed	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 1945 Hwy. 15 North	06/22/2023	\$ 161.06	
City, State, Zip Code Laurel, MS39440	06/29/2023	\$ 169.49	
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 989.60	
B. Full name WinRed	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 1945 Hwy. 15 North	06/30/2023	\$ 138.29	
City, State, Zip Code Laurel, MS39440		\$	
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 989.60	
C. Full name Kristian Vazquez	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 13905 Harvey Ln	06/02/2023	\$ 7700	
City, State, Zip Code Riverside, CA 92503	''_	\$	
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 7700	
D. Full name Sheena East	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 1426 Highway 98 E	06/02/2023	\$ 1210	
City, State, Zip Code Columbia, MS 39429	//	\$	
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 1210	
E. Full name The Strategy Group For Media Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 7669 Stagers Loop	06/02/2023	\$ 4061	
City, State, Zip Code Delaware OH 43015		\$	
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 7949.50	
F. Full name The Strategy Group For Media Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 7669 Stagers Loop	06/14/2023	\$ 3888.50	
City, State, Zip Code Delaware OH 43015		\$	
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 7949.50	

through June 30, 2023

Disbursements from contributions accumulated Prior to January	7 1, 2018 or On or After J	anuary 1, 2018
A. Full name AxCapital, LLC	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 800 W 47th St STE 200	06/05/2023	\$ 2050
City, State, Zip Code Kansas City, MO 64112	06/06/2023	\$ 425.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 2475
Nictory Enterprises, Inc	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5200 30th St SW UNIT 7	06/02/2023	\$ 8500
City, State, Zip Code Davenport, IA 52802	06/05/2023	\$ 2500
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 43787.72
Victory Enterprises, Inc	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5200 30th St SW UNIT 7	06/17/2023	\$ 15587.72
City, State, Zip Code Davenport, IA 52802	06/17/2023	\$ 2500
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 43787.72
Victory Enterprises, Inc	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5200 30th St SW UNIT 7	06/17/2023	\$ 14700
City, State, Zip Code Davenport, IA 52802	//	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 43787.72
E. Full name Campaign Side Kick	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2846 W North Ave	06/29/2023	\$ 1500
City, State, Zip Code Chicago, IL 60647		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 1500
F. Full name 1 Vision	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5105 East 41st	06/06/2023	\$ 2592
City, State, Zip Code Denver, CO 80216	06/30/2023	\$ 1215
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 3807

Reporting period June 1, 2023

through June 30, 2023

Disbursements from contributions accumulated Prior t	o January 1, 2018 or On or After J	
A. Full name 10Six Consulting	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 55 6th St	06/26/2023	\$ 199.80
City, State, Zip Code Hudson, WI 54016		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 199.80
B. Full name T Enterprise	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 210 E Lewis PI	06/14/2023	\$ 6728.40
City, State, Zip Code Pasco, WA 99301		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 6728.40
C. Full name Susan Perkins	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 506 Court St	<u>06/15/2023</u>	\$ 62.05
City, State, Zip Code Ellisville, MS 39437		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 62.05
D. Full name Mini Warehouse of Laurel	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1213 N 1st Ave	06/13/2023	\$ 50
City, State, Zip Code Laurel, MS 39440	06/28/2023	\$ 45
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 95
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>06/p6/2p23</u>	\$
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	\$