2017 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

RECEIVED
SEP 05 2017
Campaign Finance
Secretary of State

Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
2017 Special Election
House of Representatives District 102

Name of Committee Committee to Elect Cory Ferraez

Address P.O. Box 17934 County Forrest

Telephone 601-450-1715 Fax N/A

Treasurer Andrew Dews Email Address comments@coryferraez.com

☐ Check here if above is different from previous report

TYPE OF REPORT

X **Tuesday, September 5, 2017** (January 1, 2017 through September 2, 2017) ..... **Pre-Election Report**

____ **Tuesday, September 26, 2017** (September 3, 2017 through September 23, 2017) ..... **Pre-Runoff Election Report**

____ **Wednesday, January 31, 2018** (January 1, 2017 through December 31, 2017) ..... **Annual Report**

____ **Termination Report** (Committee will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation and zero cash on hand balance.) **Required to terminate reporting obligations**

IMPORTANT

(1) **Pre-Election Reports are mandatory even if the committee has received any contributions or made any expenditures in support of, or in opposition to, a 2017 special election candidate.**

(2) **Annual Reports are mandatory if the committee has received contributions or made expenditures in support of, or opposition to, a 2017 special election candidate.**

(3) **Until a committee files a Termination Report, annual and pre-election reports must be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).**

(4) **The Secretary of State 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. Reports may be hand delivered to 401 Mississippi Street, Jackson, MS; mailed to P.O. Box 136, Jackson, MS 39205; faxed to (601)576-2545; or emailed to CampaignFinance@sos.ms.gov.**

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized	+ Non-Itemized	This Period	Calendar year-to-date
Total amount of contributions	$ 38,030.20	+ $ 2,962.34	$ 40,992.54	$ 40,992.54
Total amount of disbursements	$ 32,675.88	+ $ 1,637.61	$ 34,313.49	$ 34,313.49
Total amount of cash on hand			$ 6,679.05	

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

Andrew Dews
Signature of Director or Treasurer

September 2, 2017
Date

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

SOS 7-17

Name of Candidate or Committee: Committee to Elect Cory Ferraez

Reporting period: January 1, 2017 through September 2, 2017

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Sam McHard	6 / 15 / 17	$ 1000.00
Mailing Address: 116 Longwood Dr.	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): McHard, McHard, Anderson, PLLC	/ /	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 1000.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Charlie Southerland	6 / 15 / 17	$ 1000.00
Mailing Address: 14 Drumlin Dr.	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): L&A Construction	/ /	$
Occupation (Required): Owner/Contractor	Aggregate year-to-date	$ 1000.00

C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Robert Cornett	6 / 15 / 17	$ 300.00
Mailing Address: 115 Stellman Road	/ /	$
City, State, Zip Code: Purvis, MS 39475	/ /	$
Name of Employer (Required): Cornett Group, Inc.	/ /	$
Occupation (Required): Owner/Insurance Agent	Aggregate year-to-date	$ 300.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: P Manion Anderson	6 / 23 / 17	$ 500
Mailing Address: 108 Shadow LAke Drive	7 / 18 / 17	$ 100
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): McHard, McHard, Anderson, PLLC	/ /	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 600.00

2,900

Name of Candidate or Committee: Committee to Elect Cory Ferraez

Reporting period: January 1, 2017 through September 2, 2017

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Greg and Leigh Ann Underwood	6 / 23 / 17	$ 531.20
Mailing Address: 805 Adeline Street	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): Southern Bone & Joint/Pearl River Community College	/ /	$
Occupation (Required): HR Director/Marketing - Professor	Aggregate year-to-date	$ 531.20

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Charles Griffith	6 / 23 / 17	$ 500.00
Mailing Address: 102 Mamie STreet	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): Forrest General	/ /	$
Occupation (Required): Doctor	Aggregate year-to-date	$ 500.00

C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: William Strong Jr	6 / 23 / 17	$ 250.00
Mailing Address: 100 Fairland Dr.	/ /	$
City, State, Zip Code: HAttlesburg MS 39402	/ /	$
Name of Employer (Required): Hattiesburg Clinic	/ /	$
Occupation (Required): Doctor	Aggregate year-to-date	$ 250.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: May Dayne Gregg	6 / 23 / 17	$ 250.00
Mailing Address: 3100 Jameston Road	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): Retired	/ /	$
Occupation (Required): Retired	Aggregate year-to-date	$ 250.00

Name of Candidate or Committee: Committee to Elect Cory Ferraez

Reporting period: January 1, 2017 through September 2, 2017

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Tammy Martin	6 / 23 / 17	$ 500.00
Mailing Address: 7 Marias Ridge	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): N/A	/ /	$
Occupation (Required): N/A	Aggregate year-to-date	$ 500.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Kerri Davis	6 / 23 / 17	$ 500.00
Mailing Address: 27 Chestnut Point	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): N/A	/ /	$
Occupation (Required): N/A	Aggregate year-to-date	$ 500.00

C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Anna Rush	6 / 23 / 17	$ 250.00
Mailing Address: P.O. Box 105	/ /	$
City, State, Zip Code: Hattiesburg MS 39403	/ /	$
Name of Employer (Required): Stewart Law Firm	/ /	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 250.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Edmund Bagingito	6 / 23 / 17	$ 500.00
Mailing Address: 102 Canebrake Blvd	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): Hattiesburg Clinic	/ /	$
Occupation (Required): Doctor	Aggregate year-to-date	$ 500.00

1,750

Name of Candidate or Committee: Committee to Elect Cory Ferraez

Reporting period: January 1, 2017 through September 2, 2017

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: David Ott	6 / 23 / 17	$ 2500.00
Mailing Address: 310 S 22nd Avenue	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): Bryan Nelson	/ /	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 2500.00

B. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Browns Home Furnishings	6 / 23 / 17	$ 500.00
Mailing Address: 6062 U.S. Hwy 98	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required):	/ /	$
Occupation (Required):	Aggregate year-to-date	$ 500.00

C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Don Hinton	6 / 23 / 17	$ 250.00
Mailing Address: 810 Adeline Street	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): Cooperative Energy	/ /	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 250.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Hank Mazaleski/Kate SMith	6 / 23 / 17	$ 500.00
Mailing Address: 1010 Adeline Street	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): Self-employed/N/A	/ /	$
Occupation (Required): Attorney/Paralegal	Aggregate year-to-date	$ 500.00

3,750.00

Name of Candidate or Committee: Committee to Elect Cory Ferraez

Reporting period: January 1, 2017 through September 2, 2017

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Dale Martin	6 / 23 / 17	$ 500.00
Mailing Address: 200 Mamie Street	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): Hattiesburg Clinic	/ /	$
Occupation (Required): CRNA	Aggregate year-to-date	$ 500.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: William Waller	6 / 23 / 17	$ 500.00
Mailing Address: 404 6th Avenue	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): Dermatology South	/ /	$
Occupation (Required): Dermatologist	Aggregate year-to-date	$ 500.00

C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: John Burks	6 / 23 / 17	$ 500.00
Mailing Address: 209 Wildwood Trace	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): ICJC	/ /	$
Occupation (Required): Professor	Aggregate year-to-date	$ 500.00

D. Source: ☐ Corporation ☐ PAC ☐ Individual ☑ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Cory Ferraez	8 / 12 / 17	$ 2800
Mailing Address: 501 N. Main Street #403	8 / 17 / 17	$ 2000
City, State, Zip Code: Hattiesburg MS 39401	8 / 24 / 17	$ 1500
Name of Employer (Required): McHard, McHard, Anderson & Associates, PLLC	8 / 29 / 17	$ 1200
Occupation (Required): Attorney	Aggregate year-to-date	$ 7500.00

9,000

Name of Candidate or Committee: Committee to Elect Cory Ferraez

Reporting period: January 1, 2017 through September 2, 2017

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☑ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Cory Ferraez	8 / 31 / 17	$ 1400
Mailing Address: 501 N. Main Street #403	8 / 30 / 17	$ 2300
City, State, Zip Code: Hattiesburg MS 39401	9 / 01 / 17	$ 2000
Name of Employer (Required): McHard, McHard, Anderson & ASsociates, PLLC	8 / 21 / 17	$ 849
Occupation (Required): Attorney	Aggregate year-to-date	$ 14049.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: David Bush	6 / 23 / 17	$ 250.00
Mailing Address: 1467 Elks Lake Road	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): The First, A National Banking Association	/ /	$
Occupation (Required): Banker	Aggregate year-to-date	$ 250.00

C. Source ☐ Corporation ☐ PAC ☐ Individual ☑ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Cory Ferraez	6 / 16 / 17	$ 2000.00
Mailing Address: 501 N. Main Street #403	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): McHard, McHard, Anderson & Associates, PLLC	/ /	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 16,049.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Mary Virginia McKenzie	6 / 23 / 17	$ 500.00
Mailing Address: 9 Bellewood Drive	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): Retired	/ /	$
Occupation (Required): Retired	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee: Committee to Elect Cory Ferraez

Reporting period: January 1, 2017 through September 2, 2017

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Tim Cole	6 / 23 / 17	$ 250.00
Mailing Address: 1 Quail Hollow Road	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): Hattiesburg Clinic	/ /	$
Occupation (Required): Doctor	Aggregate year-to-date	$ 250.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: John Chain	6 / 23 / 17	$ 500.00
Mailing Address: 57 Waterford Dr.	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): Chain Electric	/ /	$
Occupation (Required): Owner/Operator	Aggregate year-to-date	$ 500.00

C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Michael Freeman	6 / 23 / 17	$ 500.00
Mailing Address: 29 Monarch Blvd	/ /	$
City, State, Zip Code: HAttiesburg MS 39402	/ /	$
Name of Employer (Required): Self-employed	/ /	$
Occupation (Required): entrepreneur	Aggregate year-to-date	$ 500.00

D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Daniel Smith	6 / 23 / 17	$ 250.00
Mailing Address: 318 40th Place	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): Hattiesburg Clinic	/ /	$
Occupation (Required): Doctor	Aggregate year-to-date	$ 250.00

Name of Candidate or Committee: Committee to Elect Cory Ferraez

Reporting period: January 1, 2017 through September 2. 2017

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Travis Bolster	6 / 23 / 17	$ 500.00
Mailing Address: 15 Jubilee Pt	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): Qdoba/Smoothie King	/ /	$
Occupation (Required): Owner/Operator	Aggregate year-to-date	$ 500.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Susan Slaughter	6 / 23 / 17	$ 250.00
Mailing Address: 1113 Adeline Street	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): Hattiesburg Clinic	/ /	$
Occupation (Required): Healthcare Administrator	Aggregate year-to-date	$ 250.00

C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Susie Folse	6 / 23 / 17	$ 250.00
Mailing Address: 3866 Veteran Memorial Drive	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): Southern Bone & Joint	/ /	$
Occupation (Required): Doctor	Aggregate year-to-date	$ 250.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Lisa Conn	7 / 3 / 17	$ 1000
Mailing Address: 312 Fourth Avenue	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): retired	/ /	$
Occupation (Required): retired	Aggregate year-to-date	$ 1000.00

Name of Candidate or Committee: Committee to Elect Cory Ferraez

Reporting period: January 1, 2017 through September 2, 2017

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Christian McQueen	6 / 23 / 17	$ 500.00
Mailing Address: 409 Fourth Avenue	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): RJM	/ /	$
Occupation (Required): Owner/Operator	Aggregate year-to-date	$ 500.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Amanda Winchester	6 / 23 / 17	$ 250.00
Mailing Address: 104 Dovercliff	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): Inventiv Health	/ /	$
Occupation (Required): Pharm sales	Aggregate year-to-date	$ 250.00

C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Julia Starrett	6 / 23 / 17	$ 250.00
Mailing Address: 906 S. 34th St	/ /	$
City, State, Zip Code: Hattiesburg MS 39402	/ /	$
Name of Employer (Required): Hattiesburg Clinic	/ /	$
Occupation (Required): Healthcare administrator	Aggregate year-to-date	$ 250.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Robyn East	8 / 22 / 17	$ 500.00
Mailing Address: 115 Vineyard Blvd	/ /	$
City, State, Zip Code: Brandon MS 39047	/ /	$
Name of Employer (Required): Retired	/ /	$
Occupation (Required): Retired	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee: Committee To Elect Cory Ferraez

Reporting period: January 1, 2017 through September 2, 2017

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Evan Nicolosi	6 / 30 / 17	$ 500.00
Mailing Address: 111 Cumberland Pass	/ /	$
City, State, Zip Code: Hattlesburg MS 39402	/ /	$
Name of Employer (Required): Trustmark	/ /	$
Occupation (Required): Banker	Aggregate year-to-date	$ 500.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Richard Taylor	7 / 1 / 17	$ 250.00
Mailing Address: 1 convention Center Plaza	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): Hattlesburg Tourism and Convention Commission	/ /	$
Occupation (Required): Director	Aggregate year-to-date	$ 250.00

C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Andrew Dews	6 / 23 / 17	$ 500.00
Mailing Address: 3011 Arlington Loop	/ /	$
City, State, Zip Code: Hattlesburg MS 39402	/ /	$
Name of Employer (Required): McArthur, Slay and Dews PLLC	/ /	$
Occupation (Required): Accountant	Aggregate year-to-date	$ 500.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Scott Schwartz	6 / 23 / 17	$ 500.00
Mailing Address: 210 6th Avenue	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): Scott J. Schwartz, Attorney at Law	/ /	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee: Committee to Elect Cory Ferraez

Reporting period: JAnuary 1, 2017 through September 2, 2017

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Oby Rogers	8 / 11 / 17	$ 1500.00
Mailing Address: 311 Main Street	/ /	$
City, State, Zip Code: Collins, MS 39428	/ /	$
Name of Employer (Required): Oby T. Rogers, PLLC	/ /	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 1500.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Troy McIntire	7 / 10 / 17	$ 1000
Mailing Address: 406 sixth avenue	/ /	$
City, State, Zip Code: Hattiesburg MS 39401	/ /	$
Name of Employer (Required): Women's Pavilion	/ /	$
Occupation (Required): OBGYN	Aggregate year-to-date	$ 1000.00

C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Larry Albert	6/ / 23 / 17	$ 250.00
Mailing Address: 514 Main St.	/ /	$
City, State, Zip Code: Hattiesburg, MS 39401	/ /	$
Name of Employer (Required): Albert & Robinson Architects, PLLC	/ /	$
Occupation (Required): Architect	Aggregate year-to-date	$ 250.00

D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ 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	$

Name of Candidate or Committee Committee to Elect Cory Ferraez

Reporting period January 1, 2017 through September 2, 2017

ITEMIZED DISBURSEMENTS

A. Full name Stacy Ahua	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 710 Corinee Street, #9	6 / 26 / 17	$ 2,500.00
City, State, Zip Code Hattiesburg, MS 39401	8 / 16 / 17	$ 2,500.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ $5,000.00
B. Full name Lamar Outdoor Advertising	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 2055 Oak Grove Road	6 / 23 / 17	$ 1,845.00
City, State, Zip Code Hattiesburg MS 39402	8 / 12 / 17	$ 2,800.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 4645.00
C. Full name Lamar Outdoor Advertising	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 2055 Oak Grove Road	8 / 31 / 17	$ 1,400.00
City, State, Zip Code Hattiesburg MS 39402	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 6,045.00
D. Full name Mississippi Power	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 420 W. Pine St.	7 / 12 / 17	$ 300.00
City, State, Zip Code Hattiesburg MS 39401	7 / 25 / 17	$ 37.45
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 337.45
E. Full name Copy Cats Printing	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 905 Hardy Street #102	7 / 10 / 17	$ 422.65
City, State, Zip Code Hattiesburg MS 39401	7 / 17 / 17	$ 83.46
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 506.11
F. Full name SNG Signs, Inc.	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 1510 4th Ave. N	7 / 18 / 17	$ 3,535.00
City, State, Zip Code Bessemer, AL 35020	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 3,535.00

Name of Candidate or Committee Committee to Elect Cory Ferraez

Reporting period January 1, 2017 through September 2, 2017

ITEMIZED DISBURSEMENTS

A. Full name Kate Dearman	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 305 S 23rd Avenue	6 / 26 / 17	$ 3,500.00
City, State, Zip Code Hattiesburg MS 39401	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 3,500.00

B. Full name Blooms	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 127 Buschman St #40	7 / 10 / 17	$ 428.00
City, State, Zip Code Hattiesburg MS 39401	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 428.00

C. Full name Keg & Barrel	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1315 Hardy St	7 / 18 / 17	$ 247.75
City, State, Zip Code Hattiesburg MS 39401	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 247.75

D. Full name STandard Office Supply	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 400 W Pine Street	7 / 19 / 17	$ 200.62
City, State, Zip Code Hattiesburg MS 39403	7 / 26 / 17	$ 147.12
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 347.74

E. Full name Mississippi Secretary of State	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 401 Mississippi Street	7 / 11 / 17	$ 250.00
City, State, Zip Code Jackson, MS 39201	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 250.00

F. Full name James Peavy d/b/a PV Campaigns	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2412 Canty Street	7 / 28 / 17	$ 1,250.00
City, State, Zip Code Pascagoula, MS 39567	8 / 8 / 17	$ 1,250.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 2,500.00

Name of Candidate or Committee Committee to Elect Cory Ferraez

Reporting period January 1, 2017 through September 2, 2017

ITEMIZED DISBURSEMENTS

A. Full name Bourne Brothers Printing	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5276 Hwy 42	7 / 21 / 17	$ 910.11
City, State, Zip Code Hattiesburg MS 39401	7 / 31 / 17	$ 738.30
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1648.41
B. Full name Bourne Brothers Printing	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 5276 Hwy 42	8 / 23 / 17	$ 1945.34
City, State, Zip Code Hattiesburg MS 39401	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 3593.75
C. Full name Shelby Thames	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 4 Willow Bend Suite 2A	7 / 1 / 17	$ 500.00
City, State, Zip Code Hattiesburg MS 39402	8 / 4 / 17	$ 500.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1,000..00
D. Full name Signs First	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 4400 Hardy St	7 / 10 / 17	$ 877.55
City, State, Zip Code Hattiesburg MS 39402	7 / 14 / 17	$ 268.84
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1146.39
E. Full name Signs First	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 4400 Hardy St	7 / 27 / 17	$ 433.35
City, State, Zip Code Hattiesburg MS 39402	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1579.74
F. Full name Hub City Spokes	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 103 N. 40th Ave	7 / 24 / 17	$ 738.00
City, State, Zip Code Hattiesburg MS 39402	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 738.00

Name of Candidate or Committee Committee to Elect Cory Ferraez

Reporting period January 1, 2017 through September 2, 2017

ITEMIZED DISBURSEMENTS

A. Full name Anna Bush	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3011 Navajo Cir.	7 / 21 / 17	$ 100.00
City, State, Zip Code Hattiesburg MS 39402	7 / 29 / 17	$ 125.00
Purpose of Disbursement (Optional) Media	Aggregate Year-to-date	$ 225.00
B. Full name Anna Bush	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 3011 Navajo Cir.	8 / 22 / 17	$ 200.00
City, State, Zip Code Hattiesburg, MS 39402	/ /	$
Purpose of Disbursement (Optional) Media	Aggregate Year-to-date	$ 425.00
C. Full name Facebook	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 1 Hacker Way	8 / 31 / 17	$ 379.30
City, State, Zip Code Menlo Park, CA 94025	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 379.30
D. Full name Levitt AMP Series	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address	7 / 30 / 17	$ 180.00
City, State, Zip Code Hattiesburg MS 39401	8 / 31 / 17	$ 120.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 300.00
E. Full name Copy Cats Printing	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 95 HArdy Street #102	7 / 31 / 17	$ 695.50
City, State, Zip Code Hattiesburg MS 39401	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1201.61
F. Full name Mississippi Power	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 420 W. Pine Street	8 / 31 / 17	$ 184.29
City, State, Zip Code Hattiesburg MS 39401	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 521.74

* 8,910.90

Name of Candidate or Committee Committee to Elect Cory Ferraez

Reporting period January 1, 2017 through September 2, 2017

ITEMIZED DISBURSEMENTS

A. Full name Play It Again Sports	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4400 Hardy ST A 12	8 / 21 / 17	$ 449.40
City, State, Zip Code Hattiesburg MS 39402	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 449.40
B. Full name Stacy Ahua	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address 710 Corrine Street #9	7 / 31 / 17	$ 633.85
City, State, Zip Code Hattiesburg MS 39401	/ /	$
Purpose of Disbursement (Optional) Reimbursement of Campaign expenses	Aggregate Year-to-date	$ 5633.85
C. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address	/ /	$
City, State, Zip Code	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$
D. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address	/ /	$
City, State, Zip Code	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$
E. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address	/ /	$
City, State, Zip Code	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$
F. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address	/ /	$
City, State, Zip Code	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$