# Candidate REPORT OF RECEIPTS AND DISBURSEMENTS

2021 Annual Report



Name of Candidate Brandon Presley		DARREIGER
Address 182 Verona Ave	City/State/ZipNettleton, MS 38858	
Telephone (Work)(Home)_66	2-401-3985 (Fax)_	
Contact Name Brandon Presley	Email Address brandon@brandonpresle	ey.com
Office Sought Public Service Commission, Northern District		
Check here if above information is different from previous report		
TYPE	OF REPORT	
Monday, January 31, 2022 (January 1, 2021 through Deco	ember 31, 2021)	Annual Report
Termination Report (Candidate will no longer accept cont has no outstanding campaign debt of		, Required to terminate reporting obligations

#### **IMPORTANT**

- (1) Annual Reports are mandatory for all candidates who did not run for office in 2021 filing 2021 Periodic Reports and have not filed a Termination Report prior to December 31, 2021, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and expenditures during the reporting period.
- (2) Beginning on Jan. 1, 2018, candidates and officeholders may not "personally use" campaign contributions. Section 23-15-821, Miss. Code Ann., sets forth those "personal use" expenditures which are specifically prohibited from campaign contributions and those disbursements which are not defined as "personal use" and therefore permissible from campaign contributions. Campaign contributions accepted and held prior to Jan. 1, 2018 ARE NOT subject to the "personal use" restrictions of Section 23-15-821, Miss. Code Ann. Beginning on Jan. 1, 2018, campaign contributions accepted and accumulated therefrom ARE subject to the "personal use" restrictions of Section 2-15-821, Miss. Code Ann. Separate record keeping and reporting is required for candidates and officeholders for any campaign contributions held prior to Jan. 1, 2018, disbursements made therefrom and contributions carned thereon in the form of interest or dividends.
- (3) Until a Candidate files a Termination Report, all campaign finance disclosure reports must be filed in accordance with the applicable schedule set forth by Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (4) The receiving office must be in actual receipt of the required report by 5:00 p.m. on the deadline. If the deadline falls on a weekend or legal holiday, the office must be in actual receipt of the required report by 5:00 p.m. on the first working day before the deadline. Reports may be faxed or emailed. Candidates who have previous ran for Statewide, State District or Legislative Office file with the Secretary of State's Office. County or County District Office candidates file with the County Circuit Clerk's Office. Municipal candidates file with the Municipal Clerk's Office.

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

JAN. 1, 2021 CASH ON HAND BA	ALANCE	- / HI WATER COLUMN	\$ 0.00
	Itemized (+)	Non-Itemized (=)	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$	\$	\$
TOTAL AMT OF DISBURSEMENTS	\$	\$	\$
DEC. 31, 2021 CASH ON HAND I	BALANCE		\$ 0.00

<sup>&</sup>lt;sup>1</sup> Contributions to pre-Jan. 1, 2018 campaign funds are limited to interest and dividends earned upon pre-Jan. 1, 2018 monies.

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

JAN. 1, 2021 CASH ON HAND BA	\$123,045.22		
TOTAL AMT OF CONTRIBUTIONS	Itemized (+)	Non-Itemized (=) \$9,689.00	Calendar Year-to-Date
EXPERIENCE ENTRE EN	\$ 464,700.00		\$ 474,389.00
TOTAL AMT OF DISBURSEMENTS	\$ 73,602.98	\$ 4,321.21	\$ 77,924.19
DEC. 31, 2021 CASH ON HAND I	BALANCE		\$ 519,510.03

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

Signature of Candidate

01/31/2022

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

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Name	of Cand	idate or	Committee	Brandon	Preslev
Name	or Canu	iuate vi	Commutee	Dianuon	TICGICY

through December 31, 2021

	10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Nucor Steel Recyclers of MS	01 / 22 / 21	\$ 1,000.00
Mailing Address	12 / 00 / 21	\$2,500.00
3630 Fourt St	12 / 09 / 21	2,500.00
City, State, Zip Code		\$
Flowood, MS 39232	_'_'_	
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$3,500.00
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(4.20, 2.20, 2.00.)	this period
Full name Renasant Bank Employees Voluntary Political Committee	02 / 01 / 21	\$ 1,000.00
Mailing Address		
	12 / 30 / 21	\$ <sub>1,000.00</sub>
P.O. Box 709 City, State, Zip Code		
1000	/ /	\$
Tupelo, MS 38802 Name of Employer (Required)		
Name of Employer (Required)	/	\$
Occupation (Required)	Aggregate year–to-date	\$2,000.00
C. Source: Corporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(Mon, Duy, Tear)	this period
Full name McInnis Electric	03 / 11 / 21	\$ 1,000.00
Mailing Address		s
P.O. Box 720790		Ψ
City, State, Zip Code		\$
Byram,MS 39272	/	
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$1,000.00
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Richard B. Wax	04 / 12 / 21	\$10,000.00
Mailing Address	12 / 12 / 21	
P. O. Box 60	12 / 12 / 21	\$15,000.00
City, State, Zip Code Amory, MS 38821	/	\$
Name of Employer (Required)		
The Wax Company		\$
Occupation (Required)	Aggregate	\$ 25,000,00
CEO	year-to-date	25,000.00

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Name	οf	Candidate	or	Committee	Brandon	Presley
Manne	VI.	Canuluate	U1	Committee	Dianuon	I I Colcy

through December 31, 2021

TILIVIIZED RECEII 15				
A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt		
Other (please specify) Full name		this period		
John Lovorn	05 / 05 / 21	\$ 250.00		
Mailing Address	, ,	\$		
P.O. Box 1502	//_			
City, State, Zip Code		\$		
Tupelo, MS 38802	_/_/_			
Name of Employer (Required)	1 1	\$		
The Pace Group				
Occupation (Required) Founder	Aggregate year–to-date	\$ <sub>250.00</sub>		
B. Source: Corporation PAC Individual Loan	year-to-date			
B. Source. Ocorporation OrAC Individual Ocoan	Date	Amount of each receipt		
Other (please specify)	(Mo., Day, Year)	this period		
Full name	05 / 06 / 21	\$2,500.00		
H. Scott Ross				
Mailing Address	1 1	\$		
P.O. Box 332				
City, State, Zip Code	1 1	\$		
West Point,MS 39773	·			
Name of Employer (Required)	1 1	\$		
Self-Employed				
Occupation (Required)	Aggregate	\$ 2,500.00		
Attorney	yearto-date	2,500.00		
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period		
Full name				
Casey Lott	05 / 06 / 21	\$ 5,000.00		
Mailing Address		\$		
100 S. Main Street	_'_'_	•		
City, State, Zip Code		\$		
Booneville, MS 38829	_''-			
Name of Employer (Required)	, ,	\$		
Self-Employed	//			
Occupation (Required) Attorney	Aggregate year-to-date	\$ 5,000.00		
D. Source: Corporation PAC Individual Loan		Amount of each		
Other (please specify)	Date (Mo., Day, Year)	receipt this period		
Full name	05 ( 05 ( 01	•		
Rachel Waide	05 / 07 / 21	\$ <sub>1,000.00</sub>		
Mailing Address		\$		
1110 Belledeer Dr City, State, Zip Code				
Tupelo, MS 38804	//	\$		
Name of Employer (Required)	, ,	6		
Waide and Associates		\$		
Occupation (Required)	Aggregate	\$ 1,000.00		
Attorney	year-to-date	1,000,00		

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Name	of	Candidate	or	Committee	Brandon	Preslev
T 4 PERIOD	VI	CHILDIANIC	V.	Committee		

through December 31, 2021

A. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name	05 / 08 / 21	\$5,000.00
Douglas Horne	35, 35, 21	
Mailing Address	12 / 29 / 21	\$ 5,000.00
412 N. Cedar Bluff Rd, STE 205		
City, State, Zip Code	/ /	\$
Knoxville, TN 37923	S=='/=='/==	
Name of Employer (Required)	/ /	\$
Horne Properties, Inc.		
Occupation (Required) President	Aggregate year–to-date	<b>\$</b> <sub>10,000.00</sub>
B. Source: Corporation PAC Individual Loan	year-to-date	
B. Source: Corporation OFAC Sindividual Octoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name		-
J.W. McCurdy	05 / 10 / 21	\$1,000.00
Mailing Address		\$
P.O. Box 2038	aa/a/	
City, State, Zip Code		\$
Oxford, MS 38655	<u> </u>	
Name of Employer (Required)		\$
MR Construction		Ψ
Occupation (Required)	Aggregate	\$ <sub>1,000.00</sub>
Owner	year-to-date	1,000.00
C. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each
001 (-1	(Mo., Day, Year)	receipt
Other (please specify)		this period
Full name	05 / 10 / 21	\$1,000.00
Montgomery Enterprises  Mailing Address		
P.O. Box 37		\$
City, State, Zip Code		\$
Fulton, MS 38843		<b>D</b>
Name of Employer (Required)		\$
		<b>3</b>
Occupation (Required)	Aggregate year-to-date	\$1,000.00
D. Source: Corporation PAC Individual Loan		Amount of each
	Date (Ma Day Varia)	receipt
Other (please specify) LLC	(Mo., Day, Year)	this period
Full name	05 / 10 / 21	\$ 2,000,00
Paladin Energy Strategies	05 / 10 / 21	\$ 2,000.00
Mailing Address		\$
7 Larkdale Dr. City, State, Zip Code		
Saint Louis, MO 63124		\$
Name of Employer (Required)		
		\$
Occupation (Required)	Aggregate	\$ 2,000.00
	year-to-date	2,000.00

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Name of Candidate or Committee	Brandon Presley
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through December 31, 2021

	10	
A. Source: OCorporation OPAC OIndividual OLoan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Vick Etheridge Enterprises	05 / 10 / 21	<b>\$</b> 2,500.00
Mailing Address	12 / 21 / 21	<b>\$</b> 2,500.00
4212 North Harper Road City, State, Zip Code		\$
Corinth, MS 38834		
Name of Employer (Required)	_//	\$
Occupation (Required)	Aggregate year-to-date	\$5,000.00
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name		this period
James Bryan	05 / 10 / 21	\$5,000.00
Mailing Address P.O. Box 636	/	\$
City, State, Zip Code West Point, MS 39773	//	\$
Name of Employer (Required) Pairie Wildlife		\$
Occupation (Required) Owner	Aggregate year-to-date	\$5,000.00
C. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Gene McDade	05 / 11 / 21	\$1,000.00
Mailing Address 4418 Woodview Drive	1 1	\$
City, State, Zip Code	, ,	\$
Belden, MS 38826	i=='=='==	
Name of Employer (Required) Self-Employed	//	\$
Occupation (Required) Accountant	Aggregate year–to-date	\$1,000.00
D. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Rose B, Inc.	05 / 11 / 21	\$ 1,000.00
Mailing Address 1739 University Avenue, Suite 292		\$
City, State, Zip Code Oxford, MS 38655	_/_/_	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 1,000.00

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Nama	οf	Candidata	ом	Committee	Brandon	Procley
name	OI.	Candidate	or	Committee	Diamuon	riesiey

through December 31, 2021

118 Francis Dr      //\$         City, State, Zip Code      //\$         Fulton, MS 38843      //\$		10	
Full name Roge S, Inc.    1739 University Avenue, Suite 116			receipt
Mailing Address			
1739 University Avenue, Suite 116   City, State, Zip Code	Rose S, Inc.	05 / 11 / 21	1,000.00
1730 University Avenue, Suite 116	Mailing Address		<del></del>
Oxford, MS 38655			
Name of Employer (Required)		//	\$
Decupation (Required)			0
B. Source: Corporation PAC Individual Loan Other (please specify)  Full name Engineering Solutions, Inc.  Mailing Address Tupelo, MS 38804 Name of Employer (Required)  Full name Franks, Franks, Wilcmon & Hagood, P.A.  Milling Address  City, State, Zip Code Fullon, MS 38843 Name of Employer (Required)  D. Source: Corporation PAC Individual Loan Other (please specify)  Date (Mo., Day, Year)  Solution, MS 38843 Name of Employer (Required)  D. Source: Corporation PAC Individual Loan Other (please specify)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, MS 38843 Name of Employer (Required)  D. Source: Corporation Deach Tupelo, M		_'_'	3
B. Source:   Corporation   PAC   Individual   Loan   Date (Mo, Day, Year)   Coccupation   PAC   Individual   Companies   Coccupation   PAC   Individual   Coccupation   PAC   Coccupation   PAC   Coccupation   PAC   Coccupation   PAC   P	Occupation (Required)	00 0	\$1,000.00
Full name		Date	receipt
Engineering Solutions, Inc.	00 P/OC/LOPIN/		
Mailing Address		05 / 12 / 21	\$1,000.00
324 N. Veterans Blvd			
Tupelo, MS 38804	-	· · · · · · · · · · · · · · · · · · ·	\$
Tupelo, MS 38804	City, State, Zip Code		•
Name of Employer (Required)		//_	
C. Source: Corporation PAC Individual Loan  Other (please specify) Fartnership.  Full name Franks, Franks, Wilemon & Hagood, P.A.  Malling Address P.O. Box 355  City, State, Zip Code Fulton, MS 38843  Date (Mo., Day, Year)  **Coccupation (Required)  Other (please specify)  Individual Loan  Other (please specify)  Date (Mo., Day, Year)  **Comporation PAC Individual Loan  Other (please specify)  Date (Mo., Day, Year)  **Comporation PAC Individual Loan  Other (please specify)  **Comporation PAC Individual Loan  Other (please specify)  **Comporation PAC Individual Pack (Mo., Day, Year)		1 1	\$
C. Source: Corporation PAC Individual Loan Other (please specify) Partnership.  Full name Franks, Franks, Wilemon & Hagood, P.A.  Mailing Address P.O. Box 355  City, State, Zip Code Fulton, MS 38843 P.O. Source: Corporation PAC Individual Loan Other (please specify)  Date (Mo., Day, Year)  *\$1,000.00  **Aggregate year-to-date (Mo., Day, Year)  **Double of the ployer (Required)  **Date (Mo., Day, Year)  **Date (Mo., Da	Occupation (Required)		\$ <sub>1,000.00</sub>
Full name Franks, Franks, Wilemon & Hagood, P.A.  Mailing Address P.O. Box 355  City, State, Zip Code Fulton, MS 38843  Name of Employer (Required)  D. Source: Corporation PAC Individual Loan Other (please specify)  Full name Johnny Crane  Mailing Address  118 Francis Dr  City, State, Zip Code Fulton, MS 38843  — / _ / _    Amount of each receipt this period  Full name Johnny Crane  Mailing Address  118 Francis Dr  City, State, Zip Code Fulton, MS 38843  — / _ / _    \$  Name of Employer (Required)  Cocupation (Required)  Fulton, MS 38843  — / _ / _    \$  Name of Employer (Required)  Fulton, MS 38843  — / _ / _    \$  Name of Employer (Required)  Fulton, MS 38843  — / _ / _    \$  Name of Employer (Required)  Fulton, MS 38843  — / _ / _    \$  Name of Employer (Required)  Fulton, MS 38843  — / _ / _    \$  Name of Employer (Required)  FL Crane & Sons  Occupation (Required)  Aggregate  \$  \$ 1,000.00		Date	Amount of each receipt
Franks, Franks, Wilemon & Hagood, P.A.         05 / 12 / 21         \$1,000.00           Mailing Address        /			
Mailing Address		05 / 12 / 21	\$1,000.00
P.O. Box 355			
Fulton, MS 38843  Name of Employer (Required)  Occupation (Required)  Aggregate year-to-date  Other (please specify)  Full name  Johnny Crane  Mailing Address  118 Francis Dr  City, State, Zip Code Fulton, MS 38843  Name of Employer (Required)  FL Crane & Sons  Occupation (Required)  Aggregate year-to-date  \$ 1,000.00  Amount of each receipt this period  Full name  05 / 12 / 21 \$ 1,000.00  \$ 1,000.00  \$ 1,000.00  Aggregate   \$ 1,000.00  Aggregate   \$ 1,000.00  Aggregate   \$ 1,000.00	_		<b>3</b>
Fulton, MS 38843  Name of Employer (Required)  Occupation (Required)  Aggregate year-to-date  Other (please specify)  Full name  Johnny Crane  Mailing Address  118 Francis Dr  City, State, Zip Code  Fulton, MS 38843  Name of Employer (Required)  FL Crane & Sons  Occupation (Required)  Aggregate year-to-date  \$ 1,000.00  Amount of each receipt this period  Full name  05 / 12 / 21 \$ 1,000.00  \$ 1,000.00  \$ 1,000.00  \$ 1,000.00  \$ 1,000.00  \$ 1,000.00  \$ 1,000.00  Aggregate  \$ 1,000.00  \$ 1,000.00  \$ 1,000.00  Aggregate  \$ 1,000.00	City, State, Zip Code		\$
Name of Employer (Required)  Occupation (Required)  Aggregate year-to-date  Other (please specify)  Full name  Johnny Crane  Mailing Address  118 Francis Dr  City, State, Zip Code Fulton, MS 38843  Name of Employer (Required)  FL Crane & Sons  Occupation (Required)  Aggregate year-to-date  \$ 1,000.00  Amount of each receipt this period  Function (Mo., Day, Year)  \$ 1,000.00  \$ 12 / 21 \$ 1,000.00  \$ 1,000.00  \$ 118 Francis Dr  City, State, Zip Code Fulton, MS 38843  Aggregate  \$ 1,000.00	Fulton, MS 38843	_/_/_	*
D. Source: Corporation PAC Individual Loan  Other (please specify)  Full name  Johnny Crane  Mailing Address  118 Francis Dr  City, State, Zip Code Fulton, MS 38843  Name of Employer (Required)  FL Crane & Sons  Occupation (Required)  Aggregate  \$ 1,000.00  Amount of each receipt this period  Face in the property of	the state of the s	1 1	\$
D. Source: Corporation PAC Individual Loan Other (please specify)  Full name Johnny Crane Mailing Address 118 Francis Dr City, State, Zip Code Fulton, MS 38843 Name of Employer (Required) FL Crane & Sons Occupation (Required)  Amount of each receipt this period  \$ 1,000.00  \$ 1,000.00  \$ \$ 1,000.00  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Occupation (Required)		\$1,000.00
Still name   Other (please specify)   Ithis period		Date	Amount of each receipt
Johnny Crane			this period
Mailing Address      //\$         118 Francis Dr      //\$         City, State, Zip Code      //\$         Fulton, MS 38843      //\$         Name of Employer (Required)      //\$         FL Crane & Sons      //\$         Occupation (Required)       Aggregate		05 / 12 / 21	\$ 1,000.00
City, State, Zip Code Fulton, MS 38843  Name of Employer (Required) FL Crane & Sons  Occupation (Required)  Aggregate  \$ 1000.00	Mailing Address	1 - 1	\$
Fulton, MS 38843  Name of Employer (Required)  FL Crane & Sons  Occupation (Required)  Aggregate  \$ 1000.00			:
FL Crane & Sons —/_/ \$ Occupation (Required) Aggregate \$	Fulton, MS 38843		\$
Occupation (Required)  Aggregate \$ 1,000,00	Name of Employer (Required)		•
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
			\$ 1,000.00

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Reporting period January 1, 2021

through December 31, 2021

A. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name	05 / 12 / 21	\$2,500.00
Emilee Young and Brian Camp	05 / 12 / 21	2,500.00
Mailing Address	12 / 12 / 21	\$ 500.00
1194 Hwy 370 North	12 / 13 / 21	500.00
City, State, Zip Code		\$
Dumas, MS 38625	· · · · · · · · · · · · · · · · · · ·	
Name of Employer (Required)	, ,	\$
Camp Family Farm		
Occupation (Required)	Aggregate	\$3,000.00
Owner	year-to-date	3,000.00
B. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each
	(Mo., Day, Year)	receipt
Other (please specify)	(Mon, Day, Tear)	this period
Full name	05 / 13 / 21	\$1,000.00
Evans Plumbing & Air Conditioning, Inc.	05 / 15 / 21	
Mailing Address	, ,	\$
P.O. Box 175		
City, State, Zip Code		\$
Hamilton, MS 39746		
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate	Φ.
occupation (required)	Aggregate year–to-date	\$1,000.00
C. Source: Corporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(Mo., Day, Teat)	this period
Full name	05 / 13 / 21	\$1,000.00
Hankins, Inc.	05 7 15 7 21	
Mailing Address	/ /	\$
P.O. Box 517		
City, State, Zip Code	1	\$
Ripley, MS 38663		
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate yearto-date	\$ <sub>1,000.00</sub>
D. Source: Corporation PAC Individual Loan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt
Full name		this period
Douglas Wright, Jr.	05 / 13 / 21	\$ 5,000.00
Mailing Address		
3835 Old Towne Cir	<u>12 / 22 / 21</u>	\$10,000.00
City, State, Zip Code		
Tupelo, MS 38804	//	\$
Name of Employer (Required)		
Community Eldercare Services		\$
Occupation (Required)	Aggregate	\$
CEO	year-to-date	15,000.00

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Name of Candidate or Committee Brandon President	Name	of Car	ididate	or	Committee	Brandon	Presle
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through December 31, 2021

	115	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	05 / 14 / 21	
Bell and Sons Trucking Co Inc.	05 / 14 / 21	<b>\$</b> 1,000.00
Mailing Address	, ,	\$
41029 Old Hwy 45 S.	_/_/_	
City, State, Zip Code		\$
Aberdeen, MS 39730	:	
Name of Employer (Required)	11r	\$
Occupation (Required)	Aggregate year–to-date	\$1,000.00
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Billy Crews	05 / 14 / 21	\$1,000.00
Mailing Address		\$
518 N 11th St.		3
City, State, Zip Code	11	\$
Oxford, MS 38655  Name of Employer (Required)		
University of Mississippi	//	\$
Occupation (Required)	Aggregate	\$
Development Officer	year-to-date	1,000.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Rachael Webb	05 / 14 / 21	\$1,000.00
Mailing Address		\$
P.O. Box 496	//	<b>3</b>
City, State, Zip Code		\$
Tupelo, MS 38802		
Name of Employer (Required)		\$
Self-Employed	-/-/-	Ψ
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
D. Source: Corporation OPAC Individual Cloan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name	05 / 14 / 05	
Milton Sundbeck	05 / 14 / 21	\$ 2,500.00
Mailing Address 37 Town Creek Road		\$
		\$
City, State, Zip Code West Point MS 39773	/	Φ
West Point MS 39773	'	
		\$

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Name	αf	Candidate	or	Committee	Brandon Presley
LIAILIC	UI	Canuluate	UI	Committee	Diandon Trestey

through December 31, 2021

A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name	(,,,,	this period
Francisco Sierra	05 / 14 / 21	\$5,000.00
Mailing Address		\$
12 Annabelle Cv	//	3
City, State, Zip Code		
Amory, MS 38821		\$
Name of Employer (Required)		
Cardiology Associates of North Mississippi	1 1	\$
Occupation (Required)		
Physician	Aggregate year-to-date	\$ <sub>5,000.00</sub>
B. Source: OCorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name		
David Brevard	05 / 15 / 21	\$1,000.00
Mailing Address		\$
805 Oak Grove Rd.	//	<b>T</b>
City, State, Zip Code		
Tupelo, MS 38804		\$
Name of Employer (Required)		\$
B&B Concrete Co.	_/_/_	3
Occupation (Required)	Aggregate	\$
President	year-to-date	1,000.00
C. Source: Ocorporation OPAC Individual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)		this period
Full name Jerry Kelly	05 / 16 / 21	\$2,500.00
Mailing Address		\$
P.O Box 100601	//	3
City, State, Zip Code		\$
Irondale, AL 35210	//	Φ
Name of Employer (Required)		s
Kelly Road Builders, Inc.		3
Occupation (Required) President and CEO	Aggregate year–to-date	\$2,500.00
D. Source: Corporation OPAC Individual Cloan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name		
American Controls Technology, Inc.	<u>05</u> / <u>18</u> / <u>21</u>	\$ 1,000.00
Mailing Address		Φ.
P.O. Box 153	//	\$
City, State, Zip Code Amory, MS 38821	//	\$
Name of Employer (Required)		
	//-	\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00

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Name o	f Candidate	or Committee	Brandon Presley
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\_\_through \_December 31, 2021

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	05 / 10 / 01	\$ <sub>1,000.00</sub>
Thomas Gresham	05 / 19 / 21	1,000.00
Mailing Address	1 1	\$
105 E. Gresham St.		
City, State, Zip Code	, ,	\$
Indianola, MS 38751		
Name of Employer (Required)	1 1	\$
Gresham Petroleum Co		
Occupation (Required) Founder	Aggregate	\$ <sub>1,000.00</sub>
	year-to-date	
B. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name		
BNSF Railway Company	05 / 20 / 21	\$1,000.00
Mailing Address		\$
2500 Lou Menk Drive, AOB-2	//	Φ.
City, State, Zip Code		Φ.
Fort Worth, TX 76131	11	\$
Name of Employer (Required)		d.
(Add of Employer (Addanted)	//	\$
Occupation (Required)	Aggregate year-to-date	\$1,000.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		<u> </u>
Carrie Rodgers	05 / 20 / 21	\$1,000.00
Mailing Address	, ,	\$
607 1/2 Cedar Drive		
City, State, Zip Code	, ,	\$
New Albany, MS 38652		
Name of Employer (Required)	, ,	\$
Baptist Hospital - New Albany		
Occupation (Required) Registred Nurse	Aggregate year-to-date	\$1,000.00
D. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name		this period
Willis Engineering, Inc.	05 / 19 / 21	\$ 1,000.00
Mailing Address		
P.O. Box 160		\$
City, State, Zip Code Grenada, MS 38902		\$
Name of Employer (Required)		
		\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00

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Name of Candidate or Committee	Brandon Presley
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through December 31, 2021

	1115	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Homestretch, Inc.	05 / 20 / 21	\$1,000.00
Mailing Address		\$
P.O. Box 379	—''-	
City, State, Zip Code		\$
Nettleton, MS 38858	//-	Ι Ψ
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$1,000.00
B. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name  Continue Construction Group Inc.	05 / 21 / 21	\$1,000.00
Century Construction Group, Inc.  Mailing Address		
_		\$
705 Robert E Lee Dr		
City, State, Zip Code	1 1	\$
Tupelo, MS 38801		
Name of Employer (Required)	·//	\$
Occupation (Required)	Aggregate year–to-date	\$ <sub>1,000.00</sub>
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Matthew Wesson	05 / 21 / 21	\$1,000.00
Mailing Address	, ,	\$
2445 Greenwich Park Cir		
City, State, Zip Code	, ,	\$
Tupelo, MS 38804		
Name of Employer (Required) Wesson and Mothershed Eye Center	//	\$
Occupation (Required) Ophthalmologist	Aggregate	\$1,000.00
	year-to-date	
D. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	05 / 21 / 21	
Eubank Construction Company	05 / 21 / 21	\$ 1,000.00
Mailing Address	1 1	\$
2011 North Second Street		Ψ
City, State, Zip Code Booneville, MS 38829	//	\$
Name of Employer (Required)	1 1	\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00

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Name	of	Candidate	or	Committee	Brandon F	resley

through December 31, 2021

TIENIZED RECEII		
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name	05 / 24 / 21	\$1,000.00
Claude Clayton, Jr.		
Mailing Address	1 /	\$
P.O. Box 755		
City, State, Zip Code Tupelo, MS 38802	//_	\$
Name of Employer (Required)		\$
CLAYTON O'DONNELL	l —'—'—	
Occupation (Required)	Aggregate	\$1,000.00
Attorney	year-to-date	+1,000.00
B. Source: Ocorporation OPAC Individual OLoan	Date	Amount of each receipt
Other (please specify) Full name	(Mo., Day, Year)	this period
	05 / 24 / 21	\$2,500.00
Thomas E. Childs, Jr.  Mailing Address		
-	1 1	\$
P.O. Box 1429		
City, State, Zip Code	1 1	\$
Fulton, MS 38843		
Name of Employer (Required) Self-Employed		\$
Occupation (Required)	Aggregate	\$
Attorney	year-to-date	2,500.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Martha Dalrymple	05 / 25 / 21	\$1,000.00
Mailing Address		s
P.O. Box 210	<i></i> ''-	
City, State, Zip Code		\$
Amory, MS 38821	'	
Name of Employer (Required) Self-Employed	1 1	\$
Occupation (Required)	Aggregate	
Busiesswoman	Aggregate year–to-date	\$ <sub>1,000.00</sub>
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name	05 / 26 / 21	\$ 500.00
MMHA-PAC	05 / 26 / 21	\$ 500.00
Mailing Address P.O. Box 320369 1001 Airport Rd		\$
City, State, Zip Code	/ /	\$
Flowood, MS 39232		Ψ
Name of Employer (Required)	/	\$
Occupation (Required)	Aggregate year–to-date	\$ 500.00

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Name	οf	Candidate	or	Committee	Brandon	Preslev
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through December 31, 2021

	. 10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name		this period
William Wilson	05 / 26 / 21	\$1,000.00
Mailing Address		\$
P.O. Box 2428		
City, State, Zip Code	, ,	\$
Oxford, MS 38655	''-	
Name of Employer (Required)	1 1	\$
Roberts Wilson, P.A.		
Occupation (Required)	Aggregate	\$ <sub>1,000.00</sub>
Attorney	year-to-date	
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(Mo., Day, Tear)	this period
Full name	05 / 27 / 21	\$5,000.00
Gary Ervin Mailing Address		
		\$
450 Pryor Blvd		
City, State, Zip Code	1 1	\$
Sturgis, KY 42459		
Name of Employer (Required) Ervin Cable Construction		\$
Occupation (Required)	Aggregate	s
Owner	year-to-date	5,000.00
C. Source: Ocorporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Partnership	(1701, 211, 1711)	this period
Full name Herring Chapman, PA	06 / 01 / 21	\$ <sub>1,000.00</sub>
Mailing Address		
342 N. Broadway	_''	\$
City, State, Zip Code		\$
Tupelo, MS 38804	I / /	<b>S</b>
Name of Employer (Required)		S
	//_	\$
Occupation (Required)	Aggregate year-to-date	\$1,000.00
D. Source: Corporation PAC Individual Loan		Amount of each
Other (please specify) LLC	Date (Mo., Day, Year)	receipt this period
Full name		
Behold Washington, LLC	06 / 03 / 21	\$ 1,000.00
Mailing Address	1 1	\$
P.O. Box 320369 1001 Airport Rd		Ψ
City, State, Zip Code Flowood, MS 39232		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00

Name of	Candidate	or Committee	Brandon Presley
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through December 31, 2021

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name Robert Calvert	06 / 02 / 21	\$ 250.00
Mailing Address		
	1 1	\$
P.O. Box 702		
City, State, Zip Code	1 1	\$
West Point, MS 39773		
Name of Employer (Required)	1 1	\$
Calvert-Spradling Engineers		
Occupation (Required) President	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		
Crymes Pittman	06 / 03 / 21	\$5,000.00
Mailing Address		\$
410 S. President St.	12 / 07 / 21	5,000.00
City, State, Zip Code		•
Jackson, MS 39201	//	\$
Name of Employer (Required)		\$
Pittman, Roberts & Welsh, PLLC	_/_/_	_
Occupation (Required) Attorney	Aggregate year–to-date	\$ 10,000.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name		this period
Dustin Todd	06 / 04 / 21	\$1,000.00
Mailing Address		\$
2498 Wendover Drive		
City, State, Zip Code		\$
Belden, MS 38826		
Name of Employer (Required) Amazon		\$
Occupation (Required) Executive	Aggregate year–to-date	\$1,000.00
D. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Riverside Traffic Systems, Inc.	06 / 03 / 21	\$ 1,000.00
Mailing Address	, ,	ф
1283 State Hwy. 178 West	_/_/	\$
City, State, Zip Code	1 1	•
New Albany, MS 38652	''-	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00

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Reporting period January 1, 2021

through December 31, 2021

TIEWIZED RECEIF	10	77
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Brian Atkins	06 / 06 / 21	\$1,000.00
Mailing Address		\$
40045 New Prospect Road City, State, Zip Code	/ /	\$
Hamilton, MS 39746  Name of Employer (Required)		\$
MS Peanut Supply Occupation (Required)	Aggregate	\$
Owner	year-to-date	\$1,000.00
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name	06.407.404	\$ 250.00
James Morris	06 / 07 / 21	250.00
Mailing Address 1765 Greenside Drive		\$
City, State, Zip Code Belden, MS 38826	//	\$
Name of Employer (Required) Retired	·	\$
Occupation (Required) Retired	Aggregate year–to-date	\$ \$250.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Michael Massengill	06 / 07 / 21	\$1,000.00
Mailing Address	1 1	\$
151 County Road 511 City, State, Zip Code		
Ripley, MS 38663	/_/_	\$
Name of Employer (Required)	, ,	\$
Big M Transportation		
Occupation (Required) Owner	Aggregate year–to-date	\$1,000.00
D. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Kimes & Stone Construction Co., Inc.	06 / 08 / 21	\$ 1,000.00
Mailing Address P.O. Box 550	1 1	\$
City, State, Zip Code		
Booneville, MS 38829	/_/	\$
Name of Employer (Required)	·	\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00

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through December 31, 2021

TIEMIZED RECEIP	13	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Robert Gaines	06 / 09 / 21	\$ 250.00
Mailing Address	1 1	\$
922 S. Gloster St. City, State, Zip Code		
Tupelo, MS 38801	· / /	\$
Name of Employer (Required) State Farm Insurance		\$
Occupation (Required)	Aggregata	d d
Insurance Agent	Aggregate year-to-date	\$ 250.00
B. Source: OCorporation OPAC Individual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	, , , ,	this period
Full name John Herrod	06 / 09 / 21	\$ 500.00
Mailing Address		\$
P.O. Box 176		
City, State, Zip Code		\$
Van Vleet, MS 38877  Name of Employer (Required)		_
Bank of Okolona	_'_'_	\$
Occupation (Required) President	Aggregate year–to-date	\$ 500.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name David Cole	06 / 09 / 21	\$1,000.00
Mailing Address		
3337 Mossey Cup Drive	//	\$
City, State, Zip Code		\$
Saltillo, MS 38866		
Name of Employer (Required) Retired		\$
Occupation (Required) Retired	Aggregate year–to-date	\$1,000.00
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	06 / 09 / 21	\$ 1,000.00
Jack Reed, Jr.  Mailing Address		
P.O. Box 230	I — / — / —	\$
City, State, Zip Code Tupelo, MS 38802		\$
Name of Employer (Required)		
Reed's	_/_/_	\$
Occupation (Required) President	Aggregate year–to-date	\$ 1,000.00

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Name	of $C$	andidate	or	Committee	Brandon	Preslev
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through December 31, 2021

	10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name		this period
Larry Homan	06 / 09 / 21	\$1,000.00
Mailing Address		\$
P.O. Box 39	a—	
City, State, Zip Code		\$
Fulton, MS 38843	<b>-</b> ''-	T
Name of Employer (Required)		\$
Homan Industries		
Occupation (Required)	Aggregate	\$
CEO	year-to-date	1,000.00
B. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Mississippi Medical Political Action Committee - State	06 / 09 / 21	\$1,000.00
Mailing Address		\$
P.O. Box 2548	//	J 3
City, State, Zip Code		\$
Ridgeland, MS 39158	//	3
Name of Employer (Required)		0
Traine of Employer (Required)	//	\$
Occupation (Required)	Aggregate yearto-date	\$ 1,000.00
C. Source: Ocorporation OPAC Individual OLoan	jeni to dute	
C. Source: Corporation OPAC Individual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name	52 0 10 1	\$
James Johnstone	06 / 10 / 21	\$ 250.00
Mailing Address	1 1	\$
138 W. Oxford St		
City, State, Zip Code	1 1	\$
Pontotoc, MS 38863	<del></del>	
Name of Employer (Required)	1 1	\$
Self-Employed		
Occupation (Required) Attorney	Aggregate yearto-date	\$ 250.00
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name	05 1 10 1 51	Φ
William Miles	06 / 10 / 21	\$ 250.00
Mailing Address	1 1	\$
2845 Harden Chapel Rd.	'	Ψ
City, State, Zip Code Fulton, MS 38843	_/_/_	\$
Name of Employer (Required) Retired		\$
Occupation (Required) Retired	Aggregate year–to-date	\$ 250.00
	year-to-date	

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Reporting period January 1, 2021

through December 31, 2021

	10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	06 / 10 / 21	\$ 500.00
Classic Finishes, Inc.	06 / 10 / 21	300.00
Mailing Address	1 1	\$
P.O. Box 3236		
City, State, Zip Code	/ /	\$
Tupelo, MS 38803  Name of Employer (Required)		
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$ 500.00
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(Ivio., Day, Tear)	this period
Full name	06 / 10 / 21	\$ 500.00
R.W. Whitaker	300, 10, 21	
Mailing Address 4206 Ridgemont Dr.	_'_'_	\$
City, State, Zip Code		\$
Belden, MS 38826		<b>J</b>
Name of Employer (Required) Whitaker Sales	//	\$
Occupation (Required)	Aggregate	\$
Sales	year-to-date	500.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Samuel Pace	06 / 10 / 21	\$ 500.00
Mailing Address	1 ,	\$
2013 N Parc Cir		
City, State, Zip Code	1 1	\$
<u>Tupelo, MS 38804</u>		
Name of Employer (Required) Digestive Health Specialists		\$
Occupation (Required)	Aggregate	•
Gastroenterologist	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		
Wayne Moody	06 / 10 / 21	\$ 500.00
Mailing Address 870 East Winston Road	//_	\$
City, State, Zip Code		· · · · · · · · · · · · · · · · · · ·
Louisville, MS 39339	-/-/-	\$
Name of Employer (Required) Moody Construction Company, INC.	//	\$
Occupation (Required) President	Aggregate year-to-date	\$ 500.00

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Reporting period January 1, 2021

through December 31, 2021

	10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	06 / 10 / 21	\$1,000.00
Bud Coley Mailing Address		
Mailing Address	1 1	\$
104A Road 1310		
City, State, Zip Code Tupelo, MS 38804		\$
Name of Employer (Required)		\$
Bud Coley Trucking		<b>P</b>
Occupation (Required) Owner	Aggregate year–to-date	\$ <sub>1,000.00</sub>
B. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name	06 / 10 / 21	\$1,000.00
John Bradley	06 / 10 / 21	1,000.00
Mailing Address 107 Phillip Rd.	06 / 10 / 21	\$ 500.00
City, State, Zip Code		•
Oxford, MS 38655		\$
Name of Employer (Required)		\$
Self-Employed	_/_/_	Ψ
Occupation (Required) Attorney	Aggregate year-to-date	\$ 1,500.00
C. Source: Corporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(1/201, 2 u.j., 2 cu.)	this period
Full name Moody Construction Company, Inc.	06 / 10 / 21	\$1,000.00
Mailing Address	, ,	\$
816 S Church Ave		
City, State, Zip Code	, ,	\$
Louisville, MS 39339	·	
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year-to-date	\$1,000.00
D. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		Φ
Western Auto & Appliance	06 / 10 / 21	\$ 1,000.00
Mailing Address	/ /	\$
508 West Main Street		
City, State, Zip Code Louisville, MS 39339	_/_/_	\$
Name of Employer (Required)		
		\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00

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Name of Candidate or Committee 1	Brandon	Presley
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through December 31, 2021

Date (Mo., Day, Year)	Amount of each receipt
(*****)	this period
06 / 11 / 21	\$ 250.00
	S
	,
	\$
//	, J
	<u> </u>
/	\$
Aggregate vear-to-date	\$ 250.00
Date	Amount of each receipt
(Mo., Day, Year)	this period
06 (11 (21	\$ 500.00
06 / 11 / 21	500.00
	\$
	\$
	<b>*</b>
	\$
/	•
Aggregate	\$
year-to-date	500.00
Date (Mo., Day, Year)	Amount of each receipt
	this period
06 / 11 / 21	\$1,000.00
	\$
	Φ
	\$
	\$
Aggregate year–to-date	\$1,000.00
Date (Mo., Day, Year)	Amount of each receipt this period
<u>06</u> / <u>11</u> / <u>21</u>	\$ 1,000.00
	•
	\$
1 1	©.
	\$
_/_/_	\$
Aggregate year–to-date	\$ 1,000.00
	(Mo., Day, Year)   06 / 11 / 21

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Reporting period January 1, 2021

through December 31, 2021

A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name	, , ,, ,	this period
Hassell Franklin	06 / 11 / 21	\$1,000.00
Mailing Address		\$
203 Susan Drive	·	<b>1 3</b>
City, State, Zip Code		\$
Houston, MS 38851	·	Ψ.
Name of Employer (Required)		\$
Franklin Corp.	·	J 3
Occupation (Required)	Aggregate	\$
President and CEO	year-to-date	1,000.00
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)		this period
Full name Jolee Hussey	06 / 12 / 21	\$ 250.00
Mailing Address		
		\$
209 Woodland Hills Dr. City, State, Zip Code		
Oxford, MS 38655	//	\$
Name of Employer (Required)		0
University of Mississippi	//_	\$
Occupation (Required)	Aggregate	\$
Adjunct Instructor	year-to-date	250.00
C. Source: Ocorporation OPAC Individual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name	06 / 12 / 21	\$ 300.00
Jon Ford		
Mailing Address 171 Fairoaks St.		\$
City, State, Zip Code		d)
Gadsden, AL 35901	_/_/_	\$
Name of Employer (Required)		\$
Hodges-Ford Insurance	_/_/_	J.
Occupation (Required) Owner	Aggregate year-to-date	\$ 300.00
D. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) LLC	(110i, Day, Teat)	this period
Full name Three Threads Creative Group, LLC	06 / 12 / 21	\$ 1,000.00
Mailing Address		
P.O. Box 4463	'	\$
City, State, Zip Code		
Гupelo, MS 38803	//	\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate	\$ 1,000,00
	year-to-date	1,000.00

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Nama	of (	Candidata	ΩM	Committee	Brandon Presley	
name	01.0	Candidate	or	Commuttee	Dianuon Fresiey	

through December 31, 2021

	11 13	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Billy Atwood	06 / 12 / 21	\$2,500.00
Mailing Address	, ,	\$
P.O. Box 849 City, State, Zip Code		
Kosciusko, MS 39090		\$
Name of Employer (Required)		s
Self-Employed		*
Occupation (Required)	Aggregate	\$
Businessman	year-to-date	2,500.00
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(1710., Day, Tear)	this period
Full name Michael Hartman	06 / 14 / 21	\$ 300.00
Mailing Address		0
969 Carlisle St.	_'_'_	\$
City, State, Zip Code		\$
Jackson, MS 39202		*
Name of Employer (Required)		\$
RENU Management		*
Occupation (Required)	Aggregate	\$
Division Manager	year-to-date	300.00
C. Source: Corporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name		this period
Linton Services, Inc.	06 / 14 / 21	\$ 500.00
Mailing Address		\$
2809 S Gloster St.		
City, State, Zip Code	, ,	\$
Tupelo, MS 38801	''-	
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$ 500.00
D. Source: Corporation PAC Individual Loan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
David Rumbarger	06 / 15 / 21	\$ 250.00
Mailing Address 3204 N. Hill Dr.	_'	\$
City, State, Zip Code	1 1 1	\$
Tupelo, MS 38804		*
Name of Employer (Required) CDF		\$
Occupation (Required) President and CEO	Aggregate year-to-date	\$ 250.00

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Reporting period January 1, 2021

through December 31, 2021

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	06 / 15 / 21	\$ 250.00
Katherine Grist Mailing Address		
2611 Pemberton Ave	//	\$
City, State, Zip Code		\$
Tupelo, MS 38801		, J
Name of Employer (Required)		S
American Red Cross		Ψ
Occupation (Required)	Aggregate	\$
Executive Director	year-to-date	250.00
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name	(,,,	this period
Daniel Cash	06 / 15 / 21	\$ 300.00
Mailing Address		
	1 1	\$
129 Woodbridge Drive City, State, Zip Code		
Saltillo, MS 38866	J. J	\$
Name of Employer (Required)		Φ.
Cash Properties	//	\$
Occupation (Required)	Aggregate	\$
Owner	year-to-date	300.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
William Godfrey	06 / 15 / 21	\$ 300.00
Mailing Address		\$
216 Linton Ave		
City, State, Zip Code		\$
Natchez, MS 39120		
Name of Employer (Required) Self-Employed	//	\$
Occupation (Required) Self-Employed	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	06 / 15 / 21	\$ 500.00
James Clements	06 / 15 / 21	₩ 300.00
Mailing Address	//	\$
P.O. Box 305 City, State, Zip Code		
Tupelo, MS 38802	//	\$
Name of Employer (Required)		
Self-Employed		\$
Occupation (Required) Contractor	Aggregate year–to-date	\$ 500.00

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Name	of Candida	te or Committee	Brandon Presley
Tame	oi Canuna	e or Commune	Dianaon I lostoy

through December 31, 2021

A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name	(William Day, Tear)	this period
James Plunkett	06 / 15 / 21	\$ 500.00
Mailing Address		\$
138 N. Ridge Dr.	/ /-	<b>3</b>
City, State, Zip Code		s
Saltillo, MS 38866	·/·/ ·	<b>J</b>
Name of Employer (Required)		s
Sanctuary Hospice		<b>3</b>
Occupation (Required)	Aggregate	\$
CEO	year-to-date	500.00
B. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify) LLC	(Mo., Day, Year)	this period
Full name	* 06 115 121	9
JS LLC DBA Coldwell Banker Southern Real Estate	06 / 15 / 21	<sup>\$ 500.00</sup>
Mailing Address		\$
3575 Tom Watson Dr	-/-/-	
City, State, Zip Code		\$
Saltillo, MS 38866	//-	,
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$ 500.00
C. Source: Ocorporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) LLC	(, 2 u.j, 1 cm)	this period
Full name	06 / 15 / 21	\$ 500.00
RE/Max, Elite Realtors  Mailing Address		
218 N. Gloster		\$
City, State, Zip Code		\$
Tupelo, MS 38804		J
Name of Employer (Required)	/ /	\$
Occupation (Required)		
	Aggregate year–to-date	\$ 500.00
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify) LLC	(Mo., Day, Year)	receipt this period
Full name	06 / 15 / 01	\$ 500.00
Rural Broadband Solutions	<u>06</u> / <u>15</u> / <u>21</u>	3 500.00
Mailing Address 611 Birmingham Ridge Rd		\$
City, State, Zip Code Saltillo, MS 38866	_/_/_	\$
Name of Employer (Required)	, ,	e e
		\$
Occupation (Required)	Aggregate year–to-date	\$ 500.00

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Name of	Candidate (	or Committee	Brandon Presley
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through December 31, 2021

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	06 / 15 / 21	\$ <sub>1,000.00</sub>
Elizabeth Payne	000/100/100	
Mailing Address 633 Park Dr.	12 / 12 / 21	<b>\$</b> 1,000.00
City, State, Zip Code		\$
Oxford, MS 38655	//	3
Name of Employer (Required)		\$
University of Mississippi		
Occupation (Required)	Aggregate	\$
Professor	year-to-date	2,000.00
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name		this period
Leland Husband	06 / 15 / 21	\$1,000.00
Mailing Address		
		\$
118 Autmn Hills City, State, Zip Code		
Tupelo, MS 38801	//	\$
Name of Employer (Required)		•
Premier Radiology		\$
Occupation (Required)	Aggregate	\$
Physician	year-to-date	1,000.00
C. Source: Ocorporation OPAC Individual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(Mo., Day, Tear)	this period
Full name Jak Smith	06 / 15 / 21	\$ <sub>1,000.00</sub>
Mailing Address		
P.O. Box 713	/	\$
City, State, Zip Code		\$
Tupelo, MS 38802		<b>"</b>
Name of Employer (Required)		\$
Self-Employed	_'_'_	4
Occupation (Required) Attorney	Aggregate year–to-date	<b>\$</b> 1,000.00
D. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify) LLC	(Mo., Day, Year)	this period
Full name	06 / 15 / 21	\$ 1,000.00
Nolan Brothers Motor Sales	06 / 15 / 21	\$ 1,000.00
Mailing Address		\$
1478 E Main St City, State, Zip Code		
Tupelo, MS 38804	//	\$
Name of Employer (Required)		
		\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00

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Name	of Car	ididate	or	Committee	Brandon	Preslev
T A SETTING	or car	unuut	VI	Committee	DI WIIGOII	- LODIO

through December 31, 2021

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Tommy Morgan	06 / 15 / 21	\$ <sub>1,000.00</sub>
Mailing Address		\$
210 East Main St.		3
City, State, Zip Code		Φ
Tupelo, MS 38804	111	\$
Name of Employer (Required)		
Tommy Morgan Realty	· · · · · · · · · · · · · · · · · · ·	\$
Occupation (Required) Broker	Aggregate year–to-date	\$ 1,000.00
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Travis Childers	06 / 15 / 21	\$1,000.00
Mailing Address		
100 Grand Vw	a—'—'a—	\$
City, State, Zip Code		\$
Booneville, MS 38829	_'-'-	
Name of Employer (Required) Self-Employed	_'_'_	\$
Occupation (Required) Real Estate Broker	Aggregate year-to-date	<b>\$</b> 1,000.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Johnny Mack and Martha Morrow	06 / 15 / 21	\$5,000.00
Mailing Address		\$
1895 Highway 28		
City, State, Zip Code	1	\$
Red Bay, AL 35582	I//	
Name of Employer (Required) Self-Employed	_/_/_	\$
Occupation (Required) Optometrist	Aggregate year-to-date	\$ 5,000.00
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	1	
Tremont Floral Supplies, Inc.	06 / 15 / 21	\$ 1,000.00
Mailing Address	1 , ,	
P.O. Box 37	_'-'	\$
City, State, Zip Code	, ,	6
Tremont, MS 38876	'	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00

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Name	οf	Candidate	٥r	Committee	Brandon	Preslev
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through December 31, 2021

A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	, , , , , , , , ,	this period
Martha Cheney	06 / 16 / 21	\$ 500.00
Mailing Address		•
3155 Pontocola Rd.	l =//=/	\$
City, State, Zip Code		0
	//	\$
Pontotoc, MS 38863  Name of Employer (Required)		
Retired		\$
Occupation (Required)		
Retired	Aggregate yearto-date	\$ 500.00
	year-to-date	
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name		this period
Wilbur Colom	06 / 16 / 21	\$5,000.00
Mailing Address		
	1 1	\$
P.O. Box 101		
City, State, Zip Code	, ,	\$
Columbus, MS 39703		
Name of Employer (Required) Self-Employed		\$
Occupation (Required) Attorney	Aggregate	\$ 5,000.00
	year-to-date	
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Kimberly Simoes	06 / 16 / 21	\$50,000.00
Mailing Address		\$
165 Lake Estates		4
City, State, Zip Code		\$
Nettleton, MS 38858	//	"
Name of Employer (Required)		\$
Self-Employed	_/_/_	Ψ,
Occupation (Required) Attorney	Aggregate year–to-date	\$50,000.00
D. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	` , ",,	this period
Full name Anthony Farese	06 / 17 / 21	\$ 1,000.00
Mailing Address		
P.O. Box 98		\$
City, State, Zip Code		
Ashland, MS 38603		\$
Name of Employer (Required)		
Farese, Farese & Farese, PA		\$
Occupation (Required) Attorney	Aggregate year–to-date	\$ 1,000.00

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1 460	VI.

Name o	f Candid	late or	Committee	Brandon	Preslev

through December 31, 2021

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name		this period
Farmers & Merchants Bank	06 / 17 / 21	<b>\$</b> 1,000.00
Mailing Address		\$
P.O. Box 278	//	3
City, State, Zip Code		\$
Baldwyn, MS 38824		<b>D</b>
Name of Employer (Required)		Φ.
		\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(Mo., Day, Tear)	this period
Full name MS Sierra Club PAC Account	06 / 23 / 21	\$10,000.00
Mailing Address		\$
P.O. Box 4335	//	
City, State, Zip Code		\$
Jackson, MS 39296	//	3
Name of Employer (Required)	, ,	\$
Occupation (Required)	Aggregate	\$
	year-to-date	10,000.00
C. Source: Ocorporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Partnership		this period
Full name	06 / 30 / 21	\$ 2,500.00
Entegrity Energy Partners, PLC  Mailing Address		
P.O. Box 2090		\$
City, State, Zip Code		•
Conway, AR 72033	//	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$ <sub>2,500.00</sub>
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name		tilis period
Patricia Weathers	<u>07 / 07 / 21</u>	\$ 250.00
Mailing Address		
309 Broadway Lane	_'_'_	\$
City, State, Zip Code		
Madison, AL 35757		\$
Name of Employer (Required)	, ,	6
Not Employed		\$
Occupation (Required) Not Employed	Aggregate year–to-date	\$ 250.00

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	Name of	Candidate	or	Committee	Brandon	Presley
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through December 31, 2021

	10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Jason Shelton	07 / 06 / 21	\$1,000.00
Mailing Address	, ,	\$
P.O. Box 1310		
City, State, Zip Code Tupelo, MS 38802		\$
Name of Employer (Required)		\$
Self-Employed	_/_/_	Ψ,
Occupation (Required)	Aggregate	s
Attorney	year-to-date	1,000.00
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(Moi, Day, Tear)	this period
Full name	07 / 07 / 21	\$ 250.00
William Deas	32.7 2.7 2.7	
Mailing Address 645 Highland Circle		\$
City, State, Zip Code		\$
Tupelo, MS 38804	_'_'_	J 3
Name of Employer (Required) Self		\$
Occupation (Required)	Aggregate	\$
Attorney	year-to-date	\$ 250.00
C. Source: Ocorporation OPAC Individual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(2.201, 2.23, 2.011.)	this period
Full name Roger Bell	07 / 12 / 21	\$ 500.00
Mailing Address		\$
650 Williams Rd.		<b>1</b>
City, State, Zip Code	=======================================	\$
Caledonia, MS 39740	//	Ψ
Name of Employer (Required)	·	\$
COLUMBUS & GREENVILLE RAILWAY		
Occupation (Required) President	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	/ /	0
Wey Valve Incorporated	07 / 12 / 21	\$ 1,000.00
Mailing Address 175 Bryan Blvd	_/_/_	\$
City, State, Zip Code		
Shannon, MS 38868	//	\$
Name of Employer (Required)	_'_'_	\$
Occupation (Required)	Aggregate year-to-date	<b>\$</b> 1,000.00

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through December 31, 2021

A. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Robert Walker	07 / 12 / 21	\$5,000.00
Mailing Address		\$
1517 Lambs Meadow Ln		
City, State, Zip Code	, ,	\$
Collierville, TN 38017		
Name of Employer (Required)	, ,	\$
Self-Employed Occupation (Required)		
Businessowner	Aggregate year-to-date	\$ 5,000.00
B. Source: Corporation PAC Individual Loan	year-to-date	Amount of each
D. Source. Corporation Of Ac Official Victoria	Date	receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name	07 / 28 / 21	\$ 500.00
Taylor Machine Works, Inc.	07 / 28 / 21	300.00
Mailing Address	, ,	\$
3690 N. Church Ave.	''	
City, State, Zip Code	1 1	\$
Louisville, MS 39339		
Name of Employer (Required)	/	\$
Occupation (Required)	Aggregate yearto-date	\$ 500.00
C. Source: Corporation OPAC OIndividual OLoan		Amount of each
•	Date (Mo., Day, Year)	receipt
Other (please specify)	(Mo., Day, Tear)	this period
Full name	07 / 28 / 21	\$ 1,000.00
Sudden Service, Inc.  Mailing Address		
650 Williams Rd.	//	\$
City, State, Zip Code	/	s
Louisville, MS 39339		<b>₽</b>
Name of Employer (Required)		\$
	//	<b>₽</b>
Occupation (Required)	Aggregate year-to-date	\$ <sub>1,000.00</sub>
D. Source: Corporation PAC Individual Loan		Amount of each
• • • •	Date (Mo., Day, Year)	receipt
Other (please specify)	(Mo., Day, Tear)	this period
Full name The Taylor Group, Inc.	07 / 28 / 21	\$ 1,000.00
Mailing Address		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
690 N. Church Ave.		\$
City, State, Zip Code		
	I —/—/—	\$
couisville, MS 39339		
Couisville, MS 39339 Name of Employer (Required)		\$
couisville, MS 39339	Aggregate	\$

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Name of Candidate or Committee	Brandon Presley		
Reporting period January 1, 2021	through	December 31, 2021	

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A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) LLC Full name	(,,,	this period
Affordable Employee Benefits, LLC	08 / 04 / 21	\$1,000.00
Mailing Address		\$
P.O. Box 96	12 / 31 / 21	1,250.00
City, State, Zip Code		\$
Ecru, MS 38841		
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$ 2,250.00
B. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Franklin Collection Service, Inc.	08 / 04 / 21	\$1,000.00
Mailing Address		S
P.O. Box 3910	_'_'	Φ
City, State, Zip Code		\$
Tupelo, MS 38803		Ψ
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	<b>\$</b> 1,000.00
C. Source: Ocorporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) LLC	(Mos, Day, Tear)	this period
Full name Friendship Medical Clinic, LLC	08 / 04 / 21	\$ 1,000.00
Mailing Address		\$ 1.250.00
P.O. Box 46	12 / 31 / 21	1,250.00
City, State, Zip Code	, ,	\$
Ecru, MS 38841		
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$ <sub>2,250.00</sub>
D. Source: OCorporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) LLC	, , ,,,	this period
Full name deal Property Investments, LLC	08 / 04 / 21	\$ 1,000.00
Mailing Address		
039 CR 108		\$
City, State, Zip Code	, ,	6
Seru, MS 38841	-/-/-	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	<b>\$</b> 1,000.00

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Reporting period January 1, 2021

\_ through \_December 31, 2021

A. Source: OCorporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) PLLC Full name	(1/201, 2 4), 1 041)	this period
Rutledge and Davis, P.L.L.C.	08 / 04 / 21	\$1,000.00
Mailing Address		S
P.O. Box 29	- I - I - I - I - I - I - I - I - I - I	3
City, State, Zip Code		
-97	1 1	\$
New Albany, MS 38652		
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	<b>\$</b> 1,000.00
B. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name		
IGA PAC	08 / 16 / 21	<b>\$</b> 1,000.00
Mailing Address		S
	1 1	3
1775 Moriah Woods Blvd,Ste 1 City, State, Zip Code		
Memphis, TN 38117	_'_'_	\$
Name of Employer (Required)	/ /	\$
Occupation (Required)	A	0
	Aggregate year-to-date	\$ 1,000.00
C. Source: Ocorporation OPAC OIndividual OLoan	Date	Amount of each
Other (places enseif A Association	(Mo., Day, Year)	receipt
Other (please specify)Association		this period
Full name	09 / 09 / 21	\$ 1,000.00
Southern Renewable Energy Association  Mailing Address		
PRODE W	111	\$
5120 Chessie Circle City, State, Zip Code		0
		\$
Haltom City, TX 76137  Name of Employer (Required)		
	_'_'_	\$
Occupation (Required)	Aggregate year–to-date	\$1,000.00
D. Source: Corporation PAC Individual Loan	Data	Amount of each
	Date (Mo., Day, Year)	receipt
Other (please specify)	(Mos, Day, Tear)	this period
Full name	09 / 15 / 21	\$ 500.00
Brent Thompson Mailing Address	_97 ( 13 ( 21	<i>₩</i> 200,00
	1 1	\$
707 Ponderosa Drive City, State, Zip Code		
	/	\$
Starkville, MS 39759 Name of Employer (Required)		
Self-Employed	_'_'_	\$
Occupation (Required)	Agguagete	\$
	Aggregate	3
Businessowner	year-to-date	500.00

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through December 31, 2021

TIEWIZED RECEII	10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	00 / 15 / 14	
FL Crane & Sons, Inc.	09 / 15 / 21	\$1,000.00
Mailing Address		\$
P.O. Box 428	_/_/_	
City, State, Zip Code		\$
Fulton, MS 38843	l —'—'—	
Name of Employer (Required)	, ,	\$
	_'-'-	
Occupation (Required)	Aggregate year–to-date	<b>\$</b> 1,000.00
B. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify) LLC	(Mo., Day, Year)	receipt this period
Full name	09 / 15 / 21	\$2,500.00
Cleveland Properties, LLC	07 / 15 / 21	2,500.00
Mailing Address	1 1	\$
1879 North Coley Road	<del></del>	
City, State, Zip Code	1 1	\$
Tupelo, MS 38801		
Name of Employer (Required)	'	\$
Occupation (Required)	Aggregate year–to-date	<b>\$</b> 2,500.00
C. Source: Ocorporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify) LLC	(Mo., Day, Year)	this period
Pull name	09 / 15 / 21	\$ 5,000.00
Posigen of Louisiana Mailing Address		
-	<u>10 / 19 / 21</u>	\$ 5,000.00
819 Central Ave Suite 210 City, State, Zip Code		<b>6</b>
New Orleans, LA 70121	//	\$
Name of Employer (Required)		0
	-'-'-	\$
Occupation (Required)	Aggregate year-to-date	\$10,000.00
D. Source: OCorporation OPAC OIndividual OLoan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
		tilis periou
Full name		
Full name United Professionals	09 / 17 / 21	\$ 2,500.00
United Professionals		
United Professionals  Mailing Address	<u>09 / 17 / 21</u> <u>12 / 21 / 21</u>	\$ 2,500.00 \$ 2,500.00
Full name United Professionals Mailing Address 201 Saint Charles Avenue, Suite 4240 City, State, Zip Code		\$ 2,500.00
United Professionals  Mailing Address 201 Saint Charles Avenue, Suite 4240 City, State, Zip Code New Orleans, LA 70170		
United Professionals  Mailing Address 201 Saint Charles Avenue, Suite 4240		\$ 2,500.00

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	1 10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	00 / 00 / 01	
Calpine Corporation	09 / 20 / 21	\$1,000.00
Mailing Address	, ,	\$
717 Texas Avenue	_/_/_	
City, State, Zip Code		\$
Houston, TX 77002	□ · · · · · · · · · · · · · · · · · · ·	
Name of Employer (Required)	- 1 - 1 <u> 1</u>	\$
Occupation (Required)	Aggregate yearto-date	<b>\$</b> 1,000.00
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) LLC	(1910., Day, Teal)	this period
Full name	09 / 21 / 21	\$2,500.00
Dimension Energy	35/31/21	
Mailing Address 3280 Peachtree Rd NE, 7th Floor	11 / 11 / 21	\$2,500.00
City, State, Zip Code		\$
Atlanta, GA 30305	_/_/_	
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 5,000.00
C. Source: Corporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(Mo., Day, Tear)	this period
Full name Solar Alternatives	09 / 24 / 21	\$ 1,000.00
Mailing Address		\$
5804 River Oaks Rd S	//	*
City, State, Zip Code	, ,	\$
New Orleans, LA 70123	//	
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$1,000.00
D. Source: Corporation PAC Individual Loan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt
Full name		this period
Marc Jones Construction, LLC D/B/A SunPro Solar	10 / 01 / 21	\$ 5,000.00
Mailing Address		
22171 MCH Road	12 / 30 / 21	\$ 5,000.00
City, State, Zip Code	, ,	6
Mandeville, LA 70471		\$
Name of Employer (Required)	_'_'	\$
Occupation (Required)	Aggregate year–to-date	<b>\$</b> 10,000.00

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Name of	Candidate	or Committee	Brandon Presley
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through December 31, 2021

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	10 105 101	
Southern Alliance For Clean Energy Action Fund	10 / 05 / 21	<b>\$</b> <sub>1,000.00</sub>
Mailing Address	, ,	\$
P.O. Box 1842		
City, State, Zip Code	, ,	\$
Knoxville, TN 37901		
Name of Employer (Required)	/	\$
Occupation (Required)	Aggregate year–to-date	<b>\$</b> 1,000.00
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Greg Pirkle	10 / 06 / 21	\$1,000.00
Mailing Address		\$
		T.
4216 Ridgemont Drive City, State, Zip Code		•
Belden, MS 38826		\$
Name of Employer (Required)		S
Phelps Dunbar LLP		Ψ
Occupation (Required) Attorney	Aggregate yearto-date	<b>\$</b> 1,000.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	10 100 100	
John Cocke	10 / 06 / 21	\$ 5,000.00
Mailing Address	, ,	\$
30 Delta Avenue		
City, State, Zip Code	1 1	\$
Clarksdale, MS 38614		
Name of Employer (Required)	1 1	\$
Merkel & Cocke, PA		
Occupation (Required) Attorney	Aggregate year-to-date	\$ <sub>5,000.00</sub>
D. Source: Corporation OPAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Tri-State Utility Contractors, Inc.	10 / 07 / 21	\$ 1,000.00
Mailing Address	, ,	6
P.O. Box 1050		\$
City, State, Zip Code	/ /	\$
Coldwater, MS 38618  Name of Employer (Required)		
Admic of Employer (Acquireu)	_/_/_	\$
Occupation (Required)	Aggregate year–to-date	\$ <sub>1,000.00</sub>

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	10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Raymond Shem	10 / 12 / 21	\$ 500.00
Mailing Address		\$
355 LAKESHORE DR		
City, State, Zip Code Asheville, NC 28804		\$
Name of Employer (Required) Pinegate Renewables	_//	\$
Occupation (Required) Finance	Aggregate year-to-date	<b>\$</b> 500.00
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	10 / 13 / 21	\$ 500.00
Ben Catt	10 / 15 / 21	300.00
Mailing Address 278 Country Club Road		\$
City, State, Zip Code	_/_/_	\$
Asheville, NC 28804  Name of Employer (Required)		S
Pinegate Renewables		3
Occupation (Required) CEO	Aggregate year–to-date	\$ 500.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Chris Dunbar	10 / 13 / 21	\$ 500.00
Mailing Address	, ,	\$
34 Mardell Circle		
City, State, Zip Code Asheville, NC 28806		\$
Name of Employer (Required)		\$
Pinegate Renewables Occupation (Required) CCO	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	10 / 13 / 21	\$ 500.00
James Luster  Mailing Address 412 Old Bluff Drive		\$
City, State, Zip Code Ponte Vedra, FL 32081	·	\$
Name of Employer (Required)		\$
Pinegate Renewables Occupation (Required) COO	Aggregate year–to-date	\$ 500.00

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Reporting period January 1, 2021

through December 31, 2021

TIENIIZED RECEIP	10	
A. Source: Corporation PAC Individual Loan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	10 / 13 / 21	\$1,000.00
Sunchase Power	10 / 13 / 21	
Mailing Address		\$
P.O. Box 4617		
City, State, Zip Code Austin, TX 78765		\$
Name of Employer (Required)		\$
	//	3
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(Mo., Day, Tear)	this period
Full name	10 / 14 / 21	\$ 500.00
Johnnie Coombs		
Mailing Address 6740 CR 825		\$
City, State, Zip Code		\$
Blue Mountain, MS 38610	_'_'	(P)
Name of Employer (Required)		\$
Coombs Realty		
Occupation (Required)	Aggregate	\$
Owner	year-to-date	500.00
C. Source: Ocorporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) LLC	(****,****,*****	this period
Full name Gray's Power Supply, LLC	10 / 14 / 21	\$ 5,000.00
Mailing Address		\$
7 Vortex Dr.	//	
City, State, Zip Code	, ,	\$
Oakland, MS 38948	_'_'_	
Name of Employer (Required)	1-1-	\$
Pinegate Renewables		
Occupation (Required) CCO	Aggregate year–to-date	\$5,000.00
D. Source: Ocorporation OPAC Individual OLoan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Empower 1	10 / 19 / 21	\$ 5,000.00
Mailing Address	1 1	\$
819 Central Ave Suite 210		Ψ
City, State, Zip Code New Orleans, LA 70121		\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year-to-date	\$5,000.00

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through December 31, 2021

	19	
A. Source: Corporation PAC Individual Loan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	10 / 19 / 21	\$ <sub>5,000.00</sub>
Posigen of Mississippi	10 / 12 / 21	
Mailing Address 819 Central Ave Suite 210	//	\$
City, State, Zip Code		\$
- AND STATE OF THE	/ / /	3
New Orleans, LA 70121  Name of Employer (Required)		
Name of Employer (Required)	· · · · · · · · · · · · · · · · · · ·	\$
Occupation (Required)	Aggregate year-to-date	\$ 5,000.00
B. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name	10 / 21 / 21	\$1,000.00
Capitol Advocacy Group	10 / 21 / 21	1,000.00
Mailing Address	//	\$
P.O. Box 217		
City, State, Zip Code Jackson, MS 39205		\$
Name of Employer (Required)		0
	_'_'_	\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
(Process Specially)		
Full name		
Full name Matthew Kisber	10 / 26 / 21	\$ 1,000.00
	10 / 26 / 21	
Matthew Kisber Mailing Address 5113 Annesway Dr.	<u>10 / 26 / 21</u>	\$ 1,000.00
Matthew Kisber Mailing Address	<u>10 / 26 / 21</u>	\$ 1,000.00
Matthew Kisber Mailing Address 5113 Annesway Dr.	10 / 26 / 21 //	\$ 1,000.00 \$
Matthew Kisber  Mailing Address  5113 Annesway Dr.  City, State, Zip Code  Nashville, TN 37205  Name of Employer (Required)	//	\$ 1,000.00 \$
Matthew Kisber  Mailing Address  5113 Annesway Dr.  City, State, Zip Code  Nashville, TN 37205  Name of Employer (Required)  Silicon Ranch  Occupation (Required)	//	\$ 1,000.00 \$ \$
Matthew Kisber  Mailing Address  5113 Annesway Dr.  City, State, Zip Code  Nashville, TN 37205  Name of Employer (Required)  Silicon Ranch		\$ 1,000.00 \$
Matthew Kisber  Mailing Address  5113 Annesway Dr.  City, State, Zip Code  Nashville, TN 37205  Name of Employer (Required)  Silicon Ranch  Occupation (Required)	//	\$ 1,000.00 \$ \$
Matthew Kisber  Mailing Address  5113 Annesway Dr.  City, State, Zip Code  Nashville, TN 37205  Name of Employer (Required)  Silicon Ranch  Occupation (Required)  Chairman  D. Source: Corporation PAC Individual Loan	//	\$ 1,000.00 \$ \$ \$ \$ \$ 1,000.00  Amount of each receipt this period
Matthew Kisber  Mailing Address  5113 Annesway Dr.  City, State, Zip Code  Nashville, TN 37205  Name of Employer (Required)  Silicon Ranch  Occupation (Required)  Chairman  D. Source: Corporation PAC Individual Loan  Other (please specify)  Full name  Matthew Beasley	//	\$ 1,000.00 \$ \$ \$ \$1,000.00 Amount of each receipt
Matthew Kisber  Mailing Address  5113 Annesway Dr. City, State, Zip Code  Nashville, TN 37205  Name of Employer (Required) Silicon Ranch Occupation (Required) Chairman  D. Source: Corporation PAC Individual Loan Other (please specify)  Full name  Matthew Beasley  Mailing Address	//	\$ 1,000.00 \$ \$ \$ \$ \$ 1,000.00  Amount of each receipt this period
Matthew Kisber  Mailing Address  5113 Annesway Dr. City, State, Zip Code  Nashville, TN 37205  Name of Employer (Required) Silicon Ranch Occupation (Required) Chairman  D. Source: Corporation PAC Individual Loan Other (please specify)  Full name  Matthew Beasley  Mailing Address 1209 Nichol Ln	//	\$ 1,000.00 \$ \$ \$ \$ \$ \$ \$ \$ 1,000.00  Amount of each receipt this period \$ 1,000.00 \$
Matthew Kisber  Mailing Address  5113 Annesway Dr. City, State, Zip Code  Nashville, TN 37205  Name of Employer (Required) Silicon Ranch Occupation (Required) Chairman  D. Source: Corporation PAC Individual Loan Other (please specify)  Full name  Matthew Beasley  Mailing Address 1209 Nichol Ln City, State, Zip Code	//	\$ 1,000.00 \$ \$ \$ \$ \$ \$ \$ \$ 1,000.00  Amount of each receipt this period \$ 1,000.00
Matthew Kisber  Mailing Address  5113 Annesway Dr. City, State, Zip Code  Nashville, TN 37205  Name of Employer (Required) Silicon Ranch Occupation (Required) Chairman  D. Source: Corporation PAC Individual Loan Other (please specify)  Full name  Matthew Beasley  Mailing Address 1209 Nichol Ln	//	\$ 1,000.00 \$ \$ \$ \$ \$ \$1,000.00  Amount of each receipt this period \$ 1,000.00 \$ \$
Matthew Kisber  Mailing Address  5113 Annesway Dr. City, State, Zip Code  Nashville, TN 37205  Name of Employer (Required) Silicon Ranch Occupation (Required) Chairman  D. Source: Corporation PAC Individual Loan Other (please specify)  Full name Matthew Beasley Mailing Address 1209 Nichol Ln City, State, Zip Code Nashville, TN 37205  Name of Employer (Required) Silicon Ranch	//	\$ 1,000.00 \$ \$ \$ \$ \$ \$ \$ \$ 1,000.00  Amount of each receipt this period \$ 1,000.00 \$
Matthew Kisber  Mailing Address  5113 Annesway Dr. City, State, Zip Code  Nashville, TN 37205  Name of Employer (Required) Silicon Ranch Occupation (Required) Chairman  D. Source: Corporation PAC Individual Loan Other (please specify)  Full name Matthew Beasley Mailing Address 1209 Nichol Ln City, State, Zip Code Nashville, TN 37205  Name of Employer (Required)	//	\$ 1,000.00 \$ \$ \$ \$ \$ \$1,000.00  Amount of each receipt this period \$ 1,000.00 \$ \$

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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 Philip Bredesen	10 / 27 / 21	\$1,000.00
Mailing Address		\$
1724 Chickering Rd	_/_/_	4
City, State, Zip Code		S
50 50 WW	//	3
Nashville, TN 37215 Name of Employer (Required)		Φ.
Silicon Ranch		\$
Occupation (Required)	Aggregate	•
Founding Chairman	year-to-date	\$ _1,000.00
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		\$
David Farr	10 / 29 / 21	\$1,000.00
Mailing Address		\$
1500 Forrest Ave	_'_'_	
City, State, Zip Code		\$
Nashville, TN 37206	_/_/_	J.
Name of Employer (Required)		\$
Executive	_'-'-	
Occupation (Required) Silicon Ranch	Aggregate year–to-date	\$ 1,000.00
C. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	11 / 01 / 21	\$ 1,000.00
AJA Mangement Technical Services, Inc.	11 / 01 / 21	
Mailing Address	1 1	\$
912 North West St.		
City, State, Zip Code	1 1	\$
Jackson, MS 39202		
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$1,000.00
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Patrick Gough	11 / 05 / 21	\$ 500.00
Mailing Address		•
12 North West St.		\$
City, State, Zip Code	1 1	\$
Jackson, MS 39202	'	Ψ
Name of Employer (Required) Horne		\$
Occupation (Required) Partner	Aggregate	\$ 500.00
WI GITO	year-to-date	500.00

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	10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	11 / 12 / 21	\$ 250.00
Karen Charles	11 / 12 / 21	250.00
Mailing Address	, ,	\$
6 Percival Street		
City, State, Zip Code	, ,	\$
Dorchesterm, MA 21222		
Name of Employer (Required)	, ,	\$
Commonwealth of Massachusetts		
Occupation (Required)	Aggregate	\$
Manager	year-to-date	250.00
B. Source: Corporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(WIO., Day, Tear)	this period
Full name	11 / 24 / 21	\$1,000.00
Taylor Construction Co., Inc.	11 / 24 / 21	1,000.00
Mailing Address 28 Taylor's Circle		\$
City, State, Zip Code		\$
Laurel, MS 39443	//	<b>3</b>
Name of Employer (Required)		Φ.
Name of Employer (Required)	_'_'	\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00
C. Source: Ocorporation OPAC Individual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	ļ	this period
Full name	12 / 01 / 21	<b>\$</b> 1,750.00
Stephen Forbes Mailing Address		
112 Laird Ave	11	\$
City, State, Zip Code		\$
Madison, MS 39110	//	<b>3</b>
Name of Employer (Required)		<b>6</b>
Horne		\$
Occupation (Required)	Aggregate	e
Managing Partner	year-to-date	\$ <sub>1,750.00</sub>
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	1	
Hugh Parker	12 / 02 / 21	\$ 250.00
Mailing Address	, ,	•
120 Canterbury Place		\$
City, State, Zip Code	, ,	\$
Ridgeland, MS 39157		Φ
Name of Employer (Required) Horne	_/_/_	\$
Occupation (Required)	Aggregate	\$
Partner	year-to-date	250.00

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Reporting period January 1, 2021

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TIENTIEED TECEN		
A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)LLP Full name		this period
Michael Best & Friedrich LLP	12 / 02 / 21	\$15,000.00
Mailing Address		\$
790 N Water Street, Suite 2500	//	Ψ
City, State, Zip Code		\$
	//	, a
Milwaukee, WI 53202 Name of Employer (Required)		Φ.
	_//	\$
Occupation (Required)	Aggregate year–to-date	\$ <sub>15,000.00</sub>
B. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify)PLLC	(Mo., Day, Year)	this period
Full name	10 / 05 / 01	\$2,500,00
Tannehill, Carmean, & McKenzie, PLLC	12 / 05 / 21	\$2,500.00
Mailing Address		\$
829 N Lamar Blvd., Suite #1		
City, State, Zip Code		\$
Oxford, MS 38655		Ψ
Name of Employer (Required)		\$
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Ψ
Occupation (Required)	Aggregate year-to-date	\$ 2,500.00
C. Source: Ocorporation OPAC OIndividual OLoan	_	Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name		
MS Band of Choctaw Indians	12 / 06 / 21	\$ 2,500.00
Mailing Address	, ,	\$
P.O. Box 6090	s	
City, State, Zip Code		\$
Choctaw, MS 39350		
Name of Employer (Required)		\$
Occupation (Required)	Aggregate yearto-date	\$2,500.00
D. Source: Corporation PAC Individual Loan	year to date	Amount of each
D. Source. Corporation Of Ac Omitividual Octoan	Date	receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name		
SunRun Incorporated	<u>12 / 09 / 21</u>	\$ 1,000.00
Mailing Address	, ,	¢
225 Bush Street		\$
City, State, Zip Code	1 1	\$
San Francisco, CA 94104		<b>4</b>
Name of Employer (Required)	_'_'_	\$
Occupation (Required)	Aggregate year–to-date	<b>\$</b> 1,000.00
	your to date	

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Name of C	andidate o	r Committee	Brandon	Presley

through December 31, 2021

A. Source: Corporation PAC Individual Loan  Other (please specify)  Full name William Booth  Mailing Address  1121 Cherry Point Rd City, State, Zip Code West River, MD 20778  Name of Employer (Required) Michael Best & Friedrich LLP Occupation (Required) Attorney  B. Source: Corporation PAC Individual Loan Other (please specify)  Amount of receipt this period  Amount of receipt this period
Full name William Booth  Mailing Address  1121 Cherry Point Rd  City, State, Zip Code  West River, MD 20778  Name of Employer (Required) Michael Best & Friedrich LLP  Occupation (Required) Attorney  B. Source: Corporation PAC Individual Loan  Loan  12 / 09 / 21 \$ 5,000.00  \$  -/-/- \$  Aggregate year-to-date  5,000.00  Amount of receipt
Mailing Address  1121 Cherry Point Rd  City, State, Zip Code  West River, MD 20778  Name of Employer (Required)  Michael Best & Friedrich LLP  Occupation (Required)  Attorney  B. Source: Corporation PAC Individual Loan  Date  (Mo. Day Vear)
1121 Cherry Point Rd City, State, Zip Code West River, MD 20778 Name of Employer (Required) Michael Best & Friedrich LLP Occupation (Required) Attorney  B. Source: Corporation PAC Individual Loan
City, State, Zip Code  West River, MD 20778  Name of Employer (Required)  Michael Best & Friedrich LLP  Occupation (Required)  Attorney  Aggregate year-to-date  Source: Corporation OPAC Individual Loan  Date (Mo. Day Vear)
West River, MD 20778  Name of Employer (Required)  Michael Best & Friedrich LLP  Occupation (Required)  Attorney  B. Source: Corporation PAC Individual Loan  Date (Mo. Day Vear)  Amount of receipt
Name of Employer (Required)  Michael Best & Friedrich LLP  Occupation (Required)  Attorney  Aggregate year-to-date  S,000.00  B. Source: Corporation PAC Individual Loan  Date (Mo. Day Vear)
Michael Best & Friedrich LLP  Occupation (Required) Attorney  B. Source: Corporation PAC Individual Loan  Date (Mo. Day Vear)  (Mo. Day Vear)
Occupation (Required) Attorney  B. Source: Corporation PAC Individual Loan  Aggregate year-to-date  5,000.00  Date (Mo. Day Vear)
Attorney  B. Source: Corporation PAC Individual Loan  Date (Mo. Day Veer)  Attorney  S,000.00  Amount of receipt
B. Source: Corporation PAC Individual Loan  Date (Mo. Day Veer)  Amount of receipt
Other (please specify) (Mo., Day, Year) this period
this period
Full name Helen Meek  12 / 12 / 21 \$3,000.00
Mailing Address \$
1 Oak Place
City, State, Zip Code
Oxford, MS 38655
Name of Employer (Required)
Homemaker
Occupation (Required)Aggregate\$Homemakeryear-to-date3,000.00
C. Source: Ocorporation OPAC Individual OLoan  Date (Mo., Day, Year)  Amount of receipt (Mo., Day, Year)
Other (please specify) this period
Full name  Kagan Coughlin  12 / 13 / 21  \$ 250.00
Kagan Cougnin — — —
Mailing Address \$
509 Wagner Street  City, State, Zip Code
Water Valley, MS 38965
Name of Employer (Required) Self
Occupation (Required)  Aggregate  Strengeneur  Aggregate  \$250.00
year-to-date
D. Source: Corporation PAC Individual Loan  Other (please specify) Campaign Committee  Date  (Mo., Day, Year)  This period
Full name
Billy Crews for Oxford \$\frac{12 \setminus 14 \setminus 21}{2} \setminus 500.00
Mailing Address
518 N 11th St
City, State, Zip Code Oxford MS 38655
Oxioid, M3 30033
Name of Employer (Required) \$
Occupation (Required)  Aggregate year-to-date  \$ 500.00

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through December 31, 2021

		,
A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(201, 201, 1011)	this period
Full name Cliff Johnson	12 / 14 / 21	\$ 500.00
Mailing Address		
	11	\$
1275 Hwy 7 South		
City, State, Zip Code	1 1	\$
Water Valley, MS 38965		
Name of Employer (Required)	, ,	\$
MacArthur Justice Center		
Occupation (Required) Director	Aggregate yearto-date	\$ 500.00
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(,,-,,-	this period
Full name	12 / 14 / 21	<b>\$</b> 1,000.00
Billy Young		
Mailing Address 803 Tuscan Ridge Dr.		\$
City, State, Zip Code		\$
Oxford, MS 38655		
Name of Employer (Required)		\$
Right Track Medical Group		3
Occupation (Required)	Aggregate	\$
CEO	year-to-date	1,000.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name J. Cal Mayo	12 / 14 / 21	\$ 1,000.00
Mailing Address		\$
P.O. Box 1456	[	Ψ
City, State, Zip Code		\$
Oxford, MS 38655	//	<b>"</b>
Name of Employer (Required)		\$
Mayo Mallette, PLLC	_'_'_	Ψ.
Occupation (Required) Attorney	Aggregate year–to-date	\$1,000.00
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Marc Boutwell	12 / 14 / 21	\$ 1,000.00
Mailing Address	1 1	\$
518 N 11th St		
City, State, Zip Code Oxford, MS 38655		\$
Name of Employer (Required)	, ,	\$
Self-Employed		
Occupation (Required) Attorney	Aggregate year-to-date	<b>\$</b> 1,000.00

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through December 31, 2021

A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name		this period
Richard Pannel	12 / 14 / 21	\$ <sub>1,000.00</sub>
Mailing Address		\$
1739 University Ave No. 117		*
City, State, Zip Code		\$
Oxford, MS 38655	I/	3
Name of Employer (Required)		\$
Self-Employed	//	3
Occupation (Required) Physician	Aggregate	\$ 1,000.00
	year-to-date	
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Thomas Fowlkes	12 / 14 / 21	\$1,000.00
Mailing Address		
	1 1	\$
P.O. Box 1955		
City, State, Zip Code Oxford, MS 38655	//	\$
Name of Employer (Required)		S
Self-Employed	I	3
Occupation (Required)	Aggregate	\$
Physician	year-to-date	1,000.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Richard Scruggs	12 / 14 / 21	\$ 5,000.00
Mailing Address		s
700 Faulkner Woods Place		, J
City, State, Zip Code	-	\$
Oxford, MS 38655	//	
Name of Employer (Required)		s
2nd Chance MS	_/_/_	<b>.</b>
Occupation (Required)	Aggregate	\$5,000.00
Philanthropy	year-to-date	5,000.00
D. Source: Corporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) LLC	(into, Day, Ital)	this period
Full name	12 / 14 / 21	\$ 5,000.00
Walker & Walker Enterprises, LLC Mailing Address		
3891 Forest Hill Irene	/	\$
City, State, Zip Code Memphis, TN 38125	//	\$
Name of Employer (Required)		
	_'_'_	\$
Occupation (Required)	Aggregate year–to-date	\$ <sub>5,000.00</sub>

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Reporting period January 1, 2021

through December 31, 2021

	10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name David Scruggs	12 / 14 / 21	\$ 10,000.00
Mailing Address		\$
508 Fazio Drive Extended		, p
City, State, Zip Code		\$
Oxford, MS 38655	2 — 1 — 1 — 1 — 1	J.
Name of Employer (Required)	·//	\$
2nd Chance MS Occupation (Required)		
Director	Aggregate year–to-date	\$10,000.00
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name	***	this period
	12 / 15 / 21	\$1,000.00
Richard Howorth  Mailing Address		\$
310 N 16th St	//	<b>3</b>
City, State, Zip Code		\$
Oxford, MS 38655	//	3
Name of Employer (Required)		\$
Square Books		Ψ
Occupation (Required) Owner	Aggregate year–to-date	\$ 1,000.00
C. Source: Ocorporation OPAC Individual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(1/101, 24), 1-41)	this period
Full name Adam Ness	12 / 17 / 21	\$ 500.00
Mailing Address	, ,	\$
3410 I ST		
City, State, Zip Code	, ,	\$
Little Rock, AR 72205	-/-/-	
Name of Employer (Required) Entegrity	//	\$
Occupation (Required)	Aggregate	\$ 500.00
Chief of Staff	year-to-date	<sup>3</sup> 500.00
D. Source: Corporation PAC Individual Loan Other (please specify) Partnership	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	10 /14 / 01	Φ. 4. 0.0.0.0.0
Waide and Associates P.A.	12 / 16 / 21	\$ 1,000.00
Mailing Address 3891 Forest Hill Irene	<u> </u>	\$
City, State, Zip Code	, ,	0
Memphis, TN 38125		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00

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Name	οf	Candidate	or	Committee	Brandon	Preslev
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through December 31, 2021

	10	
A. Source: Corporation PAC Individual Loan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt
Full name		this period
Cannon Motors, LLC	12 / 17 / 21	<b>\$</b> 1,000.00
Mailing Address		\$
100 North Thacker Loop	//	Ι Ψ
City, State, Zip Code		\$
Oxford, MS 38655	//	Ψ
Name of Employer (Required)		\$
	//	3
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00
B. Source: Corporation OPAC Individual Cloan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name	12 / 10 / 21	\$ 500.00
Greta Presley	12 / 19 / 21	500.00
Mailing Address	12 , 25 , 21	\$ 500.00
7054 Penbrook Drive	$\frac{12}{25} / \frac{25}{25} / \frac{21}{25}$	300.00
City, State, Zip Code		\$
Franklin, TN 37069	—/—/—	
Name of Employer (Required)	, ,	\$
HCA		
Occupation (Required) Healthcare	Aggregate year–to-date	\$ 1,000.00
C. Source: Corporation OPAC OIndividual OLoan		Amount of each
Control Contro	Date	receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name	12 / 22 / 21	\$ 1,000.00
Arcadia Power Inc.	12 / 22 / 21	1,000.00
Mailing Address	1 1	\$
555 11th Street NW, Floor 4		
City, State, Zip Code	1 1	\$
Washington, DC 20004	/_/_	
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$1,000.00
D. Source: Corporation PAC Individual Loan		Amount of each
	Date	receipt
Other (please specify) Partnership	(Mo., Day, Year)	this period
Full name Brad Morris Law Firm, PLLC	12 / 21 / 21	\$ 2,500.00
Mailing Address		
603 University Avenue	1 — / — / — ·	\$
City, State, Zip Code		
Oxford, MS 38655		\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate	\$
	year-to-date	2,500.00

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Name	οf	Candidate	٥r	Committee	Brandon	Preslev
rame	OI.	Calluluate	UI	Commutee	Dianaon	I I Cole y

through December 31, 2021

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	12 / 22 / 21	\$ 1,000.00
Dave Cooley	12 / 22 / 21	1,000.00
Mailing Address	, ,	\$
6751 Quiet Lane		
City, State, Zip Code		\$
Brentwood, TN 37027	/=_/===	
Name of Employer (Required)	, ,	\$
CPS		
Occupation (Required)	Aggregate	\$ 1,000,00
Consultant	year-to-date	1,000.00
B. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	, , ,, ,	this period
Full name	12 / 22 / 21	\$1,000.00
Sam Abraham Mallian Addings		
Mailing Address	1 , ,	\$
1300 Myrtle St		
City, State, Zip Code	, ,	<b>\$</b>
Greenwood, MS 38930	:	
Name of Employer (Required)	1 1	\$
Leflore County	· · · · · · · · · · · · · · · · · · ·	
Occupation (Required) Supervisor	Aggregate year–to-date	\$ 1,000.00
C. Source: Ocorporation OPAC Individual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name		this period
Timothy Porter	12 / 22 / 21	\$ 1,000.00
Mailing Address		\$
P.O. Box 12768	//	3
City, State, Zip Code		\$
Jackson, MS 39236	_'_'_	Ψ
Name of Employer (Required)		s
Self-Employed	//	J.
Occupation (Required) Attorney	Aggregate yearto-date	\$1,000.00
D. Source: Corporation OPAC Individual Cloan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name		
Rud Robinson	<u>12</u> / <u>23</u> / <u>21</u>	\$ 500.00
Mailing Address 1018 Fawn Drive	a//	\$
City, State, Zip Code Tupelo, MS 38804		\$
Name of Employer (Required)		
Pryor & Morrow Architects PA		\$
Occupation (Required) Architect	Aggregate year–to-date	\$ 500.00

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Name	of Can	didate	or Co	mmittee	Brandon Pre	slev
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through December 31, 2021

A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name John Palmer	12 / 23 / 21	<b>\$</b> <sub>10,000.00</sub>
Mailing Address	11	\$
P.O. Box 3747 City, State, Zip Code		\$
Jackson, MS 39207	//	Φ
Name of Employer (Required)	, ,	\$
Gulf State Capital		
Occupation (Required) Chairman	Aggregate year–to-date	\$ 10,000.00
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Paul Benton	12 / 24 / 21	\$5,000.00
Mailing Address P.O. Box 1342	_'_'_	\$
City, State, Zip Code		\$
Biloxi, MS 39533	-/-/-	
Name of Employer (Required)		\$
Self-Employed		
Occupation (Required) Attorney	Aggregate year–to-date	\$ 5,000.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Bryan Estes	12 / 27 / 21	\$ 1,000.00
Mailing Address		\$
P.O. Box 70		J
City, State, Zip Code		\$
Flora, MS 39071	//	
Name of Employer (Required)	1 1	\$
Flora Real Estate & Development, LLC Occupation (Required)		
Owner	Aggregate year-to-date	\$ <sub>1,000.00</sub>
D. Source: Corporation PAC Individual Cloan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	12 / 20 / 21	\$ 500.00
African American Leaders For Economic Development PAC  Mailing Address	12 / 29 / 21	\$ 500.00
625 E. Shaw Ave, Suite 130	//	\$
City, State, Zip Code		
resno, CA 93710		\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year–to-date	\$ 500.00

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Reporting period January 1, 2021

through December 31, 2021

	10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	12 / 29 / 21	\$ 500.00
Baker Services	<u> </u>	
Mailing Address	1 1	\$
P.O. Box 6717	:	
City, State, Zip Code		\$
Jackson, MS 39282	l —'—'—	
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$ 500.00
B. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name		•
Deviney Brothers, Inc.	12 / 29 / 21	500.00
Mailing Address		\$
P.O. Box 6717	_/_/_	<b>"</b>
City, State, Zip Code		6
Jackson, MS 39282	1	\$
Name of Employer (Required)		
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	<b>\$</b> 500,00
C. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Deviney Construction	12 / 29 / 21	\$ 500.00
Mailing Address		\$
P.O. Box 6717	//	3
City, State, Zip Code		\$
Jackson, MS 39282	I//	<b>4</b>
Name of Employer (Required)		0
		\$
Occupation (Required)	Aggregate year–to-date	\$ 500.00
D. Source: Corporation OPAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Jackson Excavating	12 / 29 / 21	\$ 500.00
Mailing Address	, ,	
1059 Deviney Dr.	-/-/-	\$
City, State, Zip Code	, ,	0
Raymond, MS 39154	1-'-'-	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 500.00

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Name of	Candida	te or	Committee	Brandon	Preslev
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\_\_\_\_\_through \_December 31, 2021

A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name		this period
Larry Clark	12 / 29 / 21	\$ 500.00
Mailing Address		s
P.O. Box 789	'	
City, State, Zip Code		\$
Amory, MS 38821		Ψ
Name of Employer (Required)		\$
Larry Clark Chevrolet Buick Cadillac GMC	_'_'_	Ψ
Occupation (Required)	Aggregate	\$
Owner	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		\$ 500.00
Mark Tapp	<u>12</u> / <u>29</u> / <u>21</u>	500.00
Mailing Address		s
409 Dogwood Estates	/	Ψ
City, State, Zip Code		\$
Booneville, MS 38839	·//	3
Name of Employer (Required)		\$
F&M Bank	· · · · · · · · · · · · · · · · · · ·	3
Occupation (Required)	Aggregate	\$
Executive	year-to-date	500.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		Φ.
Ivy Whitlatch	12 / 29 / 21	<b>3</b> 1,000.00
Mailing Address	, ,	\$
1117 Prince Street	'	
City, State, Zip Code	1 1	\$
Alexandria, VA 22314		
Name of Employer (Required) Not Employed		\$
Occupation (Required) Not Employed	Aggregate vear-to-date	\$1,000.00
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		tins period
Michael Dees	<u>12 / 29 / 21</u>	\$ 1,000.00
Mailing Address		
P.O. Box 98	_/_/_	\$
City, State, Zip Code	, ,	0
Kipley, MS 38663	_/_/_	\$
Name of Employer (Required)		
		\$
Dees Oil Occupation (Required)	// Aggregate	\$

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Name	of C	andidate	or	Committee	Brandon	Preslev
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through December 31, 2021

	15	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Danny Franklin	12 / 29 / 21	\$ 2,000.00
Mailing Address		\$
P.O. Box 3910 City, State, Zip Code		\$
Tupelo, MS 38803  Name of Employer (Required)		\$
Franklin Services Occupation (Required)	Aggregate	\$
Owner	year-to-date	2,000.00
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Tomorrows Energy Now	12 / 29 / 21	\$2,500.00
Mailing Address		\$
1519 King Street Ext City, State, Zip Code	1 /	\$
North Charleston, SC 29405  Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ <sub>2,500.00</sub>
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Jerry Jordan	12 / 29 / 21	\$ 5,000.00
Mailing Address 1087 Augusta Drive		\$
City, State, Zip Code Oxford, MS 38655		\$
Name of Employer (Required) Not Employed	//_	\$
Occupation (Required) Not Employed	Aggregate year–to-date	\$ 5,000.00
D. Source: Ocorporation OPAC Individual OLoan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Pine Gate Renewables	12 / 29 / 21	\$10,000.00
Mailing Address 130 Roberta Steet		\$
City, State, Zip Code Asheville, NC 28801		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$ <sub>10,000.00</sub>

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Name of Candidate or Committee	Brandon Presley
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through December 31, 2021

	10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	12 / 20 / 21	\$ 500.00
Carl Pechman	12 / 30 / 21	300.00
Mailing Address	1 1	\$
4414 Albemarle St., NW		
City, State, Zip Code	1 1	\$
Washington, DC 20016		
Name of Employer (Required) NRRI		\$
Occupation (Required)	Aggregate	\$
Executive Director	vear-to-date	500.00
B. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name	12 / 30 / 21	\$ 500.00
Deviney Equipment	12 / 30 / 21	200.00
Mailing Address P.O. Box 7179		\$
City, State, Zip Code		
Jackson, MS 39282	·//	\$
Name of Employer (Required)	1 1	\$
Occupation (Required)	Aggregate	\$ 500.00
	year-to-date	300.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		
Gary C. Bailey	12 / 30 / 21	\$ 5,000.00
Mailing Address		\$
78 Grandview Cir	l —'—'—	
City, State, Zip Code		s
Brandon, MS 39047		
Name of Employer (Required)	, ,	\$
Bailey's Architecture		
Occupation (Required) President	Aggregate year–to-date	\$ 5,000.00
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<b>†</b>	this periou
Dennis Erby	<u>12</u> / <u>31</u> / <u>21</u>	\$ 500.00
Mailing Address	<b>i</b>	
P. O. Box 2811	<b> </b> -/-/-	\$
City, State, Zip Code Columbus, MS 39704	_/_/_	\$
Name of Employer (Required)		
Retired		\$
Occupation (Required) Retired	Aggregate year-to-date	\$ 500.00

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Reporting period January 1, 2021

through December 31, 2021

	10	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name John Hooks	12 / 31 / 21	\$ 500.00
Mailing Address	11	\$
1018 Highland Colony Parkway City, State, Zip Code	1 /	\$
Ridgeland, MS 39157  Name of Employer (Required)		\$
Adams and Reese LLP  Occupation (Required)	Aggregate	\$
Attorney	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 Michael Ubertini	12 / 31 / 21	\$ 500.00
Mailing Address		\$
11 Helen Lane City, State, Zip Code		\$
Walpole, MA 2081  Name of Employer (Required)		\$
Long & Foster	-/-/-	
Occupation (Required) Recruiter	Aggregate year–to-date	\$ 500.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Brion Fitzapatrick	12 / 31 / 21	\$ 1,000.00
Mailing Address 409 Mimosa Dr		\$
City, State, Zip Code	/ /	s
Decatur, GA 30030  Name of Employer (Required)	'	
Nexamp	r//r	\$
Occupation (Required) Business Development	Aggregate year–to-date	\$ 1,000.00
D. Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Donald Medley	12 / 31 / 21	\$ 1,000.00
Mailing Address 902 West Pine Street	//	\$
City, State, Zip Code Hattiesburg, MS 39401		\$
Name of Employer (Required) Self		\$
Occupation (Required) Attorney	Aggregate year–to-date	\$ 1,000.00

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Reporting period January 1, 2021

\_ through December 31, 2021

	110	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name		this period
Jeffrey Cantin	12 / 31 / 21	\$ 1,000.00
Mailing Address		\$
8710 Oak Street, Unit 501	_/_/_	
City, State, Zip Code		\$
New Orleans, LA 70118	//	
Name of Employer (Required)	, ,	\$
Solar Alternatives	'	
Occupation (Required)	Aggregate	\$ 1,000.00
Owner	year-to-date	
B. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify) Campaign Committee	(Mo., Day, Year)	receipt this period
Full name		
Mike Espy For Senate Campaign Committee	12 / 31 / 21	\$1,000.00
Mailing Address	_	\$
4450 Old Canton Rd, Ste 205		Ψ
City, State, Zip Code		\$
Jackson, MS 39211	//	<b>3</b>
Name of Employer (Required)		\$
	//	<b>₽</b>
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00
C. Source: Ocorporation OPAC Individual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name		this period
Steve Davenport	12 / 31 / 21	\$ <sub>1,000.00</sub>
Mailing Address		\$
6311 Ridgewood		. D
City, State, Zip Code		\$
Jackson, MS 39211	_/_/_	
Name of Employer (Required)	, ,	\$
SuperTalk Mississippi		
Occupation (Required) Owner	Aggregate year-to-date	<b>\$</b> 1,000.00
D. Source: Corporation PAC Individual Loan		Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full name	10 / 0: / 0:	£ 1.500.00
Mark Roberts	12 / 31 / 21	\$ 1,500.00
Mailing Address	/ /	\$
6091 W Abraham Ln		*
City, State, Zip Code Glendale, AZ 85308		\$
Name of Employer (Required) Self		\$
Sen		

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Name of Candidate or Committee	Brandon Presley				
Reporting period January 1, 2021	through	December 31, 2021			

A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name	(Pros, Duy, Tear)	this period
Robret McInnis	12 / 31 / 21	\$ 1,000.00
Mailing Address		\$
P.O. Box 76		4
City, State, Zip Code		\$
Clinton, MS 39060	·—·/·—/—	Ψ
Name of Employer (Required)	<del> </del>	S
McInnis Electric	_/_/_	
Occupation (Required)	Aggregate	\$
Owner	year-to-date	1,000.00
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name		this period
William Deas	12 / 31 / 21	\$ 1,000.00
Mailing Address		\$
	//	<b>3</b>
2659 Lake Circle City, State, Zip Code		0
Jackson, MS 39211	//	\$
Name of Employer (Required)		\$
Liston & Deas PLLC	1	3
Occupation (Required) Attorney	Aggregate	\$ 1,000.00
	year-to-date	
C. Source: Ocorporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name		\$
Mailing Address		\$
City, State, Zip Code		s
	_/_/_	
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$
D. Source: Corporation PAC Individual Loan		Amount of each
Octobrania Orace Omination Open	Date (Ma Day Veer)	receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name		\$
Mailing Address		\$
City, State, Zip Code		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$

	of
Name of Candidate or Committee Brandon Presley Campaign	
Reporting period January 1, 2021 through December 31, 2021	
ITEMIZED RECEIPTS – IN-KIND CONTRIB	UTIONS
A. Source: Corporation PAC Individual Loan	Date (Mo. Day Voor)
Other (please specify)	(Mo., Day, Year)
Full name Richard Barrett	12 / 14 / 21
Mailing Address	
2086 Old Taylor Rd # 1011	Estimated Amount of
City, State, Zip Code	In-Kind
Oxford, MS 38655	Contribution*
Name of Employer (Required)	\$ 777.25
Self-Employed	<b>4</b> 777.23
Occupation (Required) Attorney	
In-Kind Description:	
Room rental and catering for fundraising event	
B. Source: Corporation PAC Individual Loan	D-4-
	Date (Mo., Day, Year)
Other (please specify)	. , , ,
Mailing Address	''
Maning Address	Estimated
City, State, Zip Code	Amount of In-Kind
on,, oute, aspecte	Contribution*
Name of Employer (Required)	
	\$
Occupation (Required)	
In-Kind Description:	
	l
	l

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

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through December 31, 2021

A. Full name Tucker Marcum	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		\$
2017 Lothric Way, Apt 4203	01 / 05 / 21	2,758.00
City, State, Zip Code	02 / 08 / 21	\$ 1,250.00
Murfreesboro, TN 37129	02 / 08 / 21	1,230.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	03 / 14 / 21	\$ 1,250.00
City, State, Zip Code	04 / 06 / 21	\$ 1,574.37
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	05 / 03 / 21	\$ 1,250.00
City, State, Zip Code	05 / 31 / 21	\$ 3,000.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	06 / 16 / 21	\$ 500.00
City, State, Zip Code	07 / 15 / 21	\$ 3,373.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	08 / 02 / 21	\$ 3,058.81
City, State, Zip Code	09 / 08 / 21	\$ 3,000.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	09 / 22 / 21	\$ 3,090.00
City, State, Zip Code	10 / 23 / 21	\$ 3,157.58
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

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Reporting period January 1, 2021

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Disbursements from contributions accumulated Prior	to January 1, 2018 or On or After Ja	nuary 1, 2018
A. Full name	Date	Amount of each
Tucker Marcum	(Mo., Day, Year)	disbursement this period
Mailing Address	11_/23_/21	\$ 3,000.00
2017 Lothric Way, Apt 4203	11 / 23 / 21	
City, State, Zip Code	12 / 22 / 21	\$ 200.00
Murfreesboro, TN 37129		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 30,461.76
B. Full name Good Samaritan Clinic	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		\$
420 Magazine St	<u>_09</u> / <u>_22</u> / <u>_21</u>	1,000.00
City, State, Zip Code		\$
Tupelo, MS 38804	-/-/-	
Purpose of Disbursement (Optional)	Aggregate	\$
Donation	Year-to-date	1,000.00
C. Full name	Date	Amount of each
Amazon	(Mo., Day, Year)	disbursement this period
Mailing Address	02 / 22 / 21	\$ 242.20
410 Terry Ave N	03 / 22 / 21	343.39
City, State, Zip Code	1 1	\$
Seattle, WA 98109		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 343.39
D. Full name	Date	Amount of each
American Airlines	(Mo., Day, Year)	disbursement this period
Mailing Address	05 / 06 / 21	\$ 24.16
Skyview Drive	05 / 06 / 21	24.10
City, State, Zip Code	05 / 06 / 21	<b>\$</b> 24.16
Fort Worth, TX 76155	35 7 30 7 21	21110
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	05 / 06 / 21	\$ 353.80
City, State, Zip Code	05 / 06 / 21	\$ 353.80
Purpose of Disbursement (Optional)	Aggregate Year-to-date	<b>\$</b> 755.92
F. Full name	Date	Amount of each
Aristotle, Inc.	(Mo., Day, Year)	disbursement this period
Mailing Address 05 Pennsylvania Ave, SE	<u>07 / 06 / 21</u>	\$ 500.00
City, State, Zip Code	a= 1.= 1c:	\$ 500.00
Vashington, DC 20003	07 / 15 / 21	500.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

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Name	of (	hihne	ate or	Committee	Brandon	Preslev
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through December 31, 2021

A. Full name		
Aristotle, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	_08_/_15_/_21_	\$ 500.00
205 Pennsylvania Ave, SE City, State, Zip Code	06 / 15 / 21	
Washington, DC 20003	<u>09</u> / <u>15</u> / <u>21</u>	\$ 500.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	10 / 15 / 21	\$ 500.00
City, State, Zip Code	11 / 15 / 21	\$ 500.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	12 / 15 / 21	\$ 500,00
City, State, Zip Code	//	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 3,500.00
D. Full name	Date	Amount of each
Friends of Bennie Thompson  Mailing Address	(Mo., Day, Year)	disbursement this period  \$
05 West Madison Street, P.O. Box 100	<u>04</u> / <u>20</u> / <u>21</u>	1,000.00
City, State, Zip Code	1 1	\$
Bolton, MS 39041 Purpose of Disbursement (Optional)		<b>¢</b>
Onation	Aggregate Year-to-date	\$ 1,000.00
E. Full name Best Western Oak Manor	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 386 Beach Blvd	06 / 21 / 21	\$ 53.88
City, State, Zip Code Biloxi, MS 39530	06 / 21 / 21	<b>\$</b> 163.88
Purpose of Disbursement (Optional)	Aggregate Year-to-date	<b>\$</b> 217.76
F. Full name	Date (Ma. Day Voca)	Amount of each
Calhoun County 4-H Mailing Address	(Mo., Day, Year)	disbursement this period \$
21 Parker St	11 / 22 / 21	500.00
City, State, Zip Code	, ,	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 500.00

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Name	of Car	ididate o	r Committee	Brandon	Preslev
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through December 31, 2021

A. Full name Busylad Rent-All, Inc	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	06 1 07 1 01	\$ 207.20
1818 McCullough Blvd	06 / 07 / 21	387.39
City, State, Zip Code	06 / 09 / 21	\$ 81.08
Tupelo, MS 38801	00 / 00 / 21	61.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	06 / 09 / 21	\$ 24.49
City, State, Zip Code		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	<b>\$</b> 492.96
C. Full name	Date	Amount of each
Committee To Elect Angelique Lee	(Mo., Day, Year)	disbursement this period
Mailing Address 752 Woodhill Rd	03 / 15 / 21	\$ 250.00
City, State, Zip Code	, ,	\$
Jackson, MS, 39206		
Purpose of Disbursement (Optional)	Aggregate	\$ 250.00
Donation	Year-to-date	230.00
D. Full name	Date	Amount of each
Community Development Foundation  Mailing Address	(Mo., Day, Year)	disbursement this period
398 E Main St	05 / 07 / 21	\$ 250.00
City, State, Zip Code		\$
Tupelo, MS 38804	''	J
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 250.00
E. Full name	Date	Amount of each
Delta Air Lines	(Mo., Day, Year)	disbursement this period
Mailing Address 030 Delta Boulevard	06 / 25 / 21	\$ 437.80
City, State, Zip Code	06 / 25 / 21	\$ 437.80
Atlanta, GA 30354 Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	07 / 04 / 21	\$ 160.00
City, State, Zip Code	07 / 04 / 21	\$ 160.00
Purpose of Disbursement (Optional)	Aggregate	\$ 1,195.60

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Name o	f Ca	ndidate	or	Committee	Brandon	Presley
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through December 31, 2021

A. Full name French Camp Radio	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	(=, = -, ; =)	\$
40 Mecklin Avenue	05 / 10 / 21	450.00
City, State, Zip Code		\$
French Camp, MS 39745	_'_'_	Ψ
Purpose of Disbursement (Optional)	Aggregate	\$ 450.00
D. H. W.	Year-to-date	
B. Full name  Hinds County Democratic Party	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	(11201, 1243, 1242)	\$ 250.00
P. O. Box 22484	12 / 19 / 21	250.00
City, State, Zip Code		\$
Jackson, MS 39225	//	Φ
Purpose of Disbursement (Optional)		s
Contribution	Aggregate Year-to-date	250.00
C. Full name		
Huffman & Rejebian	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		\$
P.O. Box 1180	02 / 23 / 21	7,000.00
City, State, Zip Code	, ,	\$
Jackson, MS 39215		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 7,000.00
D. Full name	Date	Amount of each
Hywater Strategies	(Mo., Day, Year)	disbursement this period
Mailing Address	04 / 05 /04	\$
1800 S. Rutherford Blvd, Suite 203	04 / 06 /21	328.43
City, State, Zip Code	04 1 05 101	\$
Murfreesboro, TN 37130	<u>04</u> / <u>06</u> / <u>21</u>	300.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 628.43
E. Full name	Date	Amount of each
vy Broadcasting Company	(Mo., Day, Year)	disbursement this period
Mailing Address	, , , ,	\$
521 47TH STREET NW	02 / 01 / 21	1,800.00
City, State, Zip Code		\$
Red Bay, AL 35582	/	•
Purpose of Disbursement (Optional)	Aggregate Year-to-date	<b>\$</b> 1,800.00
F. Full name	Date	Amount of each
Katie Boland	(Mo., Day, Year)	disbursement this period
Mailing Address		\$ 200.00
30 CR 38868	12 / 10 / 21	300.00
City, State, Zip Code		\$
Shannon, MS 38868		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 300.00

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through December 31, 2021

A. Full name		
Kitchen 107	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	_06 / _15 / _21	\$ 1,300.00
07 Pecan Ave City, State, Zip Code		
Nettleton, MS 38858	12 / 11 / 21	\$ 4,250.00
Purpose of Disbursement (Optional)	Aggregate	\$
Catering	Year-to-date	5,550.00
B. Full name	Date	Amount of each
LYFT	(Mo., Day, Year)	disbursement this period
Mailing Address	_05 / 14 / 21	\$ 70.03
200 E. Santa Clara St., 1st Floor		10103
City, State, Zip Code	05 / 17 / 21	\$ 23.76
San José, CA 95113 Purpose of Disbursement (Optional)		
rurpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date	Amount of each
	(Mo., Day, Year)	disbursement this period
Mailing Address	05 / 17 / 21	<b>\$</b> 79.41
City, State, Zip Code	<u>07</u> / <u>16</u> / <u>21</u>	\$ 38.99
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date	Amount of each
	(Mo., Day, Year)	disbursement this period
Mailing Address	07 / 17 /21	\$ 45.58
City, State, Zip Code	_/_/_	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 257.77
E. Full name	Date	Amount of each
Andy For Atlanta	(Mo., Day, Year)	disbursement this period
Mailing Address	10 / 20 / 21	\$ 250.00
21 Oak Ridge Ave NE	10 / 20 / 21	230.00
City, State, Zip Code	/ /	\$
Atlanta, GA 30317		
Purpose of Disbursement (Optional) Contribution	Aggregate Year-to-date	\$ 250.00
7. Full name	Date	Amount of each
ason McKinney	(Mo., Day, Year)	disbursement this period
Tailing Address		\$
215 Highway 6	_03 / _07 / 21	500.00
City, State, Zip Code	1 1	\$
Plantersville, MS 38862		
Curpose of Disbursement (Optional)  ace Car Sponsorship/Advertising	Aggregate Year-to-date	\$ 500.00

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Name	of Can	didate (	or Committ	ee Brandon	Preslev

through December 31, 2021

A. Full name  MS Peanut Supply Company	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	(1.101, 114)	\$
41155 US-45	05 / 19 / 21	250.00
City, State, Zip Code		\$
Aberdeen, MS 39730	05 / 19 / 21	250.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 500.00
B. Full name	Date	Amount of each
Nettleton Main Street Association	(Mo., Day, Year)	disbursement this period
Mailing Address		s
124 Short Ave	08 / 04 / 21	1,500.00
City, State, Zip Code		\$
Nettleton, MS 38858	<u>10 / 29 / 21</u>	450.00
Purpose of Disbursement (Optional)	Aggregate	\$ 1050.00
Sponsorship/Advertising	Year-to-date	1,950.00
C. Full name	Date	Amount of each
Jackson New Media	(Mo., Day, Year)	disbursement this period
Mailing Address	, ,,,,,,,,	\$
4266 I-55 North Frontage Road, Suite 102	<u>06 / 07 / 21</u>	1,750.00
City, State, Zip Code		s
Jackson, MS 39211	//	<b>"</b>
Purpose of Disbursement (Optional)	Aggregate	\$
•	Aggregate Year-to-date	1,750.00
D. Full name	Date	Amount of each
Next Fund Consulting	(Mo., Day, Year)	disbursement this period
Mailing Address		\$
215 Northbrook Drive	11 / 03 / 21	2,000.00
City, State, Zip Code		\$
Raleigh, NC 27609	l —/—/—	<b>"</b>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 2,000.00
E. Full name		
Rogers Law Group, P.A.	Date (Mo Day Yoar)	Amount of each
Mailing Address	(Mo., Day, Year)	disbursement this period
201 E Bankhead Street	_05 / _06 / _21	\$ 1,000.00
City, State, Zip Code		•
New Albany, MS 38652	_/_/	\$
New Albany, MS 38652 Purpose of Disbursement (Optional)		6
	Aggregate Year-to-date	\$ 1,000.00
F. Full name	Date	Amount of each
Teresa Swain	(Mo., Day, Year)	disbursement this period
		\$ 300.00
Mailing Address	05 / 02 / 21	
Mailing Address 07 Pecan Ave	05 / 02 / 21	300.00
Mailing Address 07 Pecan Ave City, State, Zip Code	05 / 02 / 21	\$
Mailing Address 07 Pecan Ave	//	

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Name	οf	Candidate	or Committee	Brandon	Preslev
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through December 31, 2021

A. Full name Sheraton Raleigh Hotel	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		\$
421 S Salisbury St	<u>07 / 15 / 21</u>	198.19
City, State, Zip Code	07 / 15 / 01	\$ 200.10
Raleigh, NC 27601	<u>07 / 15 / 21</u>	200.19
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	07 / 15 / 21	\$ 5.00
City, State, Zip Code		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 403.38
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Monroe Journal  Mailing Address	(wio., Day, Year)	\$
115 S Main St	<u>12 / 08 / 21</u>	250.00
City, State, Zip Code		\$
Amory, MS 38821	//	<b>3</b>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 250.00
D. Full name	Date	Amount of each
The Westin Washington, D.C. City Center	(Mo., Day, Year)	disbursement this period
Mailing Address 1400 M St NW	<u>05</u> / <u>15</u> / <u>21</u>	\$ 436.74
City, State, Zip Code		\$
Washington, DC 20005	05 / 15 / 21	467.74
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 904.48
E. Full name	Date	Amount of each
Wilkat, Inc Mailing Address	(Mo., Day, Year)	disbursement this period
1152 Quail Creek Cove	<u>11 / 15 / 21</u>	\$ 750.75
City, State, Zip Code		\$
Fupelo, MS 38804 Purpose of Disbursement (Optional)		\$
	Aggregate Year-to-date	750.75
F. Full name Allmond Printing Co.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	(1.201, 2017, 1011)	\$
603 W Commerce St.	01 / 05 / 21	208.65
City, State, Zip Code	22 / /	\$
Aberdeen, MS 39730	_06 / _07 / _21	3,869.84
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

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Name	of Car	ndidate (	or Committ	tee Brandon	Preslev
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through December 31, 2021

A. Full name Allmond Printing Co.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	07 / 12 / 21	\$ 32.10
503 W Commerce St. City, State, Zip Code		
	11	\$
Aberdeen, MS 39730 Purpose of Disbursement (Optional)		
al pose of Disbursement (Optional)	Aggregate Year-to-date	\$ 4,110.59
B. Full name	Date	Amount of each
Elevated Imaging Mailing Address	(Mo., Day, Year)	disbursement this period
7	04 / 06 / 21	\$ 579.00
2881 Hwy 25 North City, State, Zip Code		
	11	\$
Amory, MS 38821		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 579.00
C. Full name	Date	Amount of each
ActBlue	(Mo., Day, Year)	disbursement this period
Mailing Address	, ,	\$
4 Arrow Street Suite 11	_04_/_18_/_21_	395.00
City, State, Zip Code	05 / 30 / 21	\$ 197.50
Cambridge, MA 02138	05 / 30 / 21	197.50
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	06 / 06 / 21	\$ 39.50
City, State, Zip Code	07 / 11 / 21	\$ 10.28
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Aailing Address	10 / 17 / 21	\$ 79.00
City, State, Zip Code	11 / 14 / 21	\$ 9.88
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Sailing Address	12 / 12 / 21	<b>\$</b> 592.50
ity, State, Zip Code	12 / 19 / 21	\$ 235.03
urpose of Disbursement (Optional)	Aggregate Year-to-date	\$

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Name	of	Candidate	or	Committee	Brandon	Presley
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through December 31, 2021

Disbursements from contributions accumulated Prior to January 1, 2018	or On or After Ja	nuary 1, 2018
A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Mailing Address	(,	
14 Arrow Street Suite 11	<u>12 / 26 / 21</u>	\$ 59.25
City, State, Zip Code		\$ 500.05
Cambridge, MA 02138	12 / 31 / 21	533.25
Purpose of Disbursement (Optional)		•
Tarpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 2,151.19
B. 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	\$
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	\$