

Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2023 Election

RECEIVED

By Secretary of State Elections Division at 4:34 pm, Oct 31, 2023

Name of Candidate Brandon Presley
Address PO Box 208 City/State/Zip Nettleton, MS 38858
Telephone (Work) _____ (Home) (202) 552-0221 (Fax) _____
Contact Name Rachel Headley Email Address info@brandonpresley.com
Office Sought Governor Political Party Democratic Party

Check here if above is different from previous report

TYPE OF REPORT

- May Periodic Report Mandatory
- June Periodic Report Mandatory
- July Periodic Report Mandatory
- Primary Pre-Election Report (_____ through _____) Mandatory
- Primary Pre-Runoff Report (_____ through _____) Runoff Candidates Only
- October Periodic Report Mandatory
- Pre-Election Report (_____ through _____) Mandatory
- Pre-Runoff Report (_____ through _____) Runoff Candidates Only
- January Periodic Report Mandatory
- Termination Report (Candidate will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation and zero cash on hand balance) **Required to terminate reporting obligations**

IMPORTANT

- (1) All candidates for office shall file periodic reports in the year in which they are to be elected.
- (2) Periodic Reports are mandatory, even if no expenditures were made during the period. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and/or expenditures during this period. Pre-Election Reports are mandatory if the candidate is opposed.
- (3) Until a candidate files a Termination Report, annual reports must be filed in accordance with Miss. Code Ann. § 23-15-807(b) (ii) and (iii)
- (4) Beginning on Jan. 1, 2018, candidates and officeholders may not "personally use" campaign contributions. Section 23-15-821, Miss. Code Ann., sets forth these "personal use" expenditures which are specifically prohibited from campaign contributions and those disbursements which are not defined as "personal use" and therefore permissible from campaign contributions. Campaign contributions accepted and held prior to Jan. 1, 2018 ARE NOT subject to the "personal use" restrictions of section 23-15-821, Miss. Code Ann. Beginning on Jan. 1, 2018, campaign contributions accepted and accumulated therefrom ARE subject to the "personal use" restrictions of Section 2-15-821, Miss. Code Ann. Separate record keeping and reporting is required for candidates and officeholders for any campaign contributions held prior to Jan. 1, 2018, disbursements made therefrom and contributions earned thereon in the form of interest or dividends.

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

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

JAN 1, 2023 CASH ON HAND BALANCE				
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-To-Date
TOTAL AMT OF CONTRIBUTIONS	+			
TOTAL AMT OF DISBURSEMENTS	+			
CASH ON HAND BALANCE				

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

JAN 1, 2023 CASH ON HAND BALANCE				\$727,532.54	
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-To-Date	
TOTAL AMT OF CONTRIBUTIONS	\$3,296,631.99	+ \$106,732.37	\$3,403,364.36	\$11,297,783.15	
TOTAL AMT OF DISBURSEMENTS	\$3,968,377.57	+ \$2,166.16	\$3,970,543.73	\$10,761,586.42	
CASH ON HAND BALANCE				\$1,263,729.27	

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

Brandon Presley

Signature of Candidate

10/31/2023

Date

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

Candidates for Statewide, State District, or Legislative Offices file this Report with the Secretary of State to 401 Mississippi Street, Jackson, MS; P.O. Box 136, Jackson, MS 39205; fax 601-576-2545; or email CampaignFinance@sos.ms.gov

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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugenia M. Franklin Mailing Address 198 Patton Place Rd City, State, Zip Code Lexington, MS 39095-5802 Name of Employer (Required) Not Employed	10/10/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mary Haskell Mailing Address 6 Trotting Horse Dr City, State, Zip Code Lexington, MA 02421-6339 Name of Employer (Required) Not Employed	10/20/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Anthony Collins Mailing Address 2310 Mariposa Dr City, State, Zip Code O Fallon, MO 63368-3571 Name of Employer (Required) Not Employed	10/20/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$344.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Dorothy Roberts Mailing Address 252 Handy Ln City, State, Zip Code Pass Christian, MS 39571-4426 Name of Employer (Required) Not Employed	10/01/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Irvin Mailing Address 4047 Wyandot St City, State, Zip Code Denver, CO 80211-2140 Name of Employer (Required) Strategic Programs, Inc.	10/01/2023	\$10.00
Occupation (Required) Corporate Secretary	Aggregate year-to-date	\$573.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Strange Mailing Address 69 Henry James Rd City, State, Zip Code New Augusta, MS 39462-9710 Name of Employer (Required) Not Employed	10/11/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,760.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Munford Mailing Address 5510 Wisconsin Ave City, State, Zip Code Chevy Chase, MD 20815-4403 Name of Employer (Required) Not Employed	10/21/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brent Smith Mailing Address 345 Laughlin Rd City, State, Zip Code Boyle, MS 38730-8802 Name of Employer (Required) Delta Health Medical Center	10/12/2023	\$1,000.00
Occupation (Required) Physician	Aggregate year-to-date	\$2,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paula Temperilli Mailing Address 15231 Rainhollow Dr City, State, Zip Code Houston, TX 77070-1328 Name of Employer (Required) Not Employed	10/22/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$860.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William A. Cox Mailing Address 1739 Swann St NW City, State, Zip Code Washington, DC 20009-5536 Name of Employer (Required) Not Employed	10/22/2023	\$750.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,915.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold D. Copeland Mailing Address PO Box 631145 City, State, Zip Code Houston, TX 77263-1145 Name of Employer (Required) Not Employed	10/22/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$562.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed	10/03/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$360.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joyce Leech Mailing Address 214 Main St S City, State, Zip Code Amory, MS 38821-4218 Name of Employer (Required) Not Employed	10/03/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$760.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Troy Hill Mailing Address 511 Fox Bay Rdg City, State, Zip Code Brandon, MS 39047-8963 Name of Employer (Required) Self Employed	10/23/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$653.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/14/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,008.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Law Office of Wayne Ferrell Jr PLLC Mailing Address PO Box 24446 City, State, Zip Code Jackson, MS 39225-4446 Name of Employer (Required)	10/14/2023	\$2,000.00
Occupation (Required)	Aggregate year-to-date	\$2,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Taliscia Tobias Mailing Address 16224 Lily Orchard Rd City, State, Zip Code Moss Point, MS 39562-9002 Name of Employer (Required) US Dept of Veterans Affairs Occupation (Required) Registered Nurse	10/25/2023	\$25.00
Aggregate year-to-date		\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/25/2023	\$15.00
Aggregate year-to-date		\$1,008.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ethel White Mailing Address 5237 Highway 43 City, State, Zip Code Camden, MS 39045-9735 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/16/2023	\$100.00
Aggregate year-to-date		\$235.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/26/2023	\$10.00
Aggregate year-to-date		\$717.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Vicki Slater Mailing Address 115 Leppingwell Dr City, State, Zip Code Madison, MS 39110-6526 Name of Employer (Required) Self Employed	10/07/2023	\$2,500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$6,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Jenkins-Joffe Mailing Address 3825 Legation St NW City, State, Zip Code Washington, DC 20015-2701 Name of Employer (Required) Not Employed	10/17/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$742.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Francis Gresock Mailing Address 609 Washington St City, State, Zip Code Natchez, MS 39120-3526 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$625.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa Percy Mailing Address 134 Bayou Rd City, State, Zip Code Greenville, MS 38701-7725 Name of Employer (Required) Not Employed	10/27/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$8,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Josephine W. Ashmead Mailing Address 540 E Van Dorn Ave City, State, Zip Code Holly Springs, MS 38635-2515 Name of Employer (Required) Self Employed	10/27/2023	\$200.00
Occupation (Required) Physician	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/18/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Lalli Mailing Address 140 State St City, State, Zip Code Brooklyn, NY 11201-6039 Name of Employer (Required) Not Employed	10/19/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Peter Buttross Jr Mailing Address 206 S Rankin St City, State, Zip Code Natchez, MS 39120-3536 Name of Employer (Required) Not Employed	10/19/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$800.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donna Martin Gambill	10/29/2023	\$100.00
Mailing Address 5758 Morganton Dr		
City, State, Zip Code Olive Branch, MS 38654-3545		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Daniel Lastra	10/29/2023	\$2,500.00
Mailing Address 39 Lenox Rd		
City, State, Zip Code Rockaway, NJ 07866-2255		
Name of Employer (Required) Ironbound Intermodal		
Occupation (Required) Vice President	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Collins	10/10/2023	\$100.00
Mailing Address 1826 Ray St		
City, State, Zip Code Ocean Springs, MS 39564-2930		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bryan Patton	10/20/2023	\$50.00
Mailing Address 741 N Madison St		
City, State, Zip Code Tupelo, MS 38804-2017		
Name of Employer (Required) Hyperion Technology Group, Inc.		
Occupation (Required) Engineer	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frances L. Meyer Mailing Address 9750 Troon Ct City, State, Zip Code Blue Ash, OH 45241-3349 Name of Employer (Required) Not Employed	10/01/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patsy Turner Mailing Address 160 Kirkwood Pl City, State, Zip Code Jackson, MS 39211-6022 Name of Employer (Required) Not Employed	10/11/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Haskell Mailing Address 6 Trotting Horse Dr City, State, Zip Code Lexington, MA 02421-6339 Name of Employer (Required) Not Employed	10/02/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Douglas Masterson Mailing Address 43 Palm Tree Loop City, State, Zip Code Petal, MS 39465-9251 Name of Employer (Required) University of Southern Mississippi	10/22/2023	\$25.00
Occupation (Required) Chemist	Aggregate year-to-date	\$640.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Busby Mailing Address 4607 Sharman St City, State, Zip Code Houston, TX 77009-3248 Name of Employer (Required) Not Employed	10/22/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Colette Honorable Mailing Address 5133 Warren Pl NW City, State, Zip Code Washington, DC 20016-4318 Name of Employer (Required) Exelon	10/13/2023	\$1,000.00
Occupation (Required) Vice President	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Greg Iles Mailing Address 515 Greenfield Rd City, State, Zip Code Natchez, MS 39120-8743 Name of Employer (Required) Self Employed	10/05/2023	\$5,000.00
Occupation (Required) Author	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Michael McConnell Mailing Address 20310 Paseo Del Campo City, State, Zip Code Porter Ranch, CA 91326-4325 Name of Employer (Required) Not Employed	10/05/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Angelos Vamvakas Mailing Address 3161 Wayne Dr City, State, Zip Code Diberville, MS 39540-8554 Name of Employer (Required) Self Employed	10/15/2023	\$25.00
Occupation (Required) Psychiatrist	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann J. Abadie Mailing Address 2238 Lee Loop City, State, Zip Code Oxford, MS 38655-4920 Name of Employer (Required) Not Employed	10/15/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$845.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paula Temperilli Mailing Address 15231 Rainhollow Dr City, State, Zip Code Houston, TX 77070-1328 Name of Employer (Required) Not Employed	10/25/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$860.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Emily Fox Mailing Address 707 N Rankin St City, State, Zip Code Natchez, MS 39120-2944 Name of Employer (Required) Not Employed	10/25/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$645.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret B. Brinegar Mailing Address 314 Balboa Dr City, State, Zip Code Hattiesburg, MS 39402-9538 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/16/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Jenkins Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Tech. Services Occupation (Required) Business Owner	10/27/2023	\$1,000.00
Aggregate year-to-date		\$6,475.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Timothy C. Medley Mailing Address 238 Eastbrooke St City, State, Zip Code Jackson, MS 39216-4716 Name of Employer (Required) Medley & Brown Occupation (Required) Partner	10/27/2023	\$300.00
Aggregate year-to-date		\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Huff-Pawlik Mailing Address 11 Avery Cir City, State, Zip Code Jackson, MS 39211-2403 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/08/2023	\$250.00
Aggregate year-to-date		\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Rhodes Mailing Address 74 5th Ave City, State, Zip Code New York, NY 10011-8005 Name of Employer (Required) NY Dept of Public Service Occupation (Required) Chair	10/19/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Phillips Mailing Address 168 Highway 6 E City, State, Zip Code Oxford, MS 38655-8708 Name of Employer (Required) Self Employed Occupation (Required) Artist	10/29/2023	\$25.00
Aggregate year-to-date		\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/29/2023	\$25.00
Aggregate year-to-date		\$530.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry L. Kelly Mailing Address PO Box 100601 City, State, Zip Code Irondale, AL 35210-0601 Name of Employer (Required) Kelly Road Builders, Inc. Occupation (Required) President	10/29/2023	\$1,000.00
Aggregate year-to-date		\$1,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Terry Mangialardi Mailing Address 1181 Mcgowan Dr City, State, Zip Code Southaven, MS 38671-8430 Name of Employer (Required) Desoto County	10/20/2023	\$10.00
Occupation (Required) Teacher	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Larry Hoellwarth Mailing Address 5510 N Magnolia Ave City, State, Zip Code Chicago, IL 60640-1307 Name of Employer (Required) Not Employed	10/11/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Betty Smithson Mailing Address 155 Castle Cir City, State, Zip Code Madison, MS 39110-9403 Name of Employer (Required) Not Employed	10/02/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Audrey McBride Mailing Address 503 Academy Rd City, State, Zip Code Starkville, MS 39759-4047 Name of Employer (Required) McBride & Co. Real Estate, Broker/Owner	10/22/2023	\$50.00
Occupation (Required) Realtor	Aggregate year-to-date	\$615.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa McCollom Mailing Address 201 Hoffman Ln City, State, Zip Code Waveland, MS 39576-4312 Name of Employer (Required) American Airlines	10/22/2023	\$200.00
Occupation (Required) Flight Attendant	Aggregate year-to-date	\$1,111.75
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anne Bailey Mailing Address 705 N Overlook Dr City, State, Zip Code Alexandria, VA 22305-1223 Name of Employer (Required) Not Employed	10/23/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$725.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed	10/24/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jennifer Stewart Mailing Address 5405 Wehawken Rd City, State, Zip Code Bethesda, MD 20816-3139 Name of Employer (Required) Stewart Strategies & Solutions	10/05/2023	\$1,000.00
Occupation (Required) Government Relations	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tor Kwembe Mailing Address 4100 Poplar Ave City, State, Zip Code Richton Park, IL 60471-1236 Name of Employer (Required) Jackson State University	10/05/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$305.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hempling Mailing Address 29 Philadelphia Ave City, State, Zip Code Takoma Park, MD 20912-4337 Name of Employer (Required) Federal Energy Regulatory Commission	10/15/2023	\$5,000.00
Occupation (Required) Administrative Law Judge	Aggregate year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	10/25/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$490.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gail Glover Mailing Address 2071 Myrtlewood Dr City, State, Zip Code Montgomery, AL 36111-1003 Name of Employer (Required) Not Employed	10/16/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William A. Cox Mailing Address 1739 Swann St NW City, State, Zip Code Washington, DC 20009-5536 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/26/2023	\$50.00
Aggregate year-to-date		\$1,915.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marcella Strong Mailing Address 100 Fairlane Dr City, State, Zip Code Hattiesburg, MS 39402-2309 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/07/2023	\$100.00
Aggregate year-to-date		\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Peter Richerson Mailing Address 210 Full Cir City, State, Zip Code Davis, CA 95618-5408 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/17/2023	\$500.00
Aggregate year-to-date		\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Antonow Mailing Address 3336 Whippoorwill Ln City, State, Zip Code Oxford, MS 38655-5311 Name of Employer (Required) City of Oxford Occupation (Required) Alderman	10/27/2023	\$25.00
Aggregate year-to-date		\$825.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Pierce Mailing Address 1514 Forrest Hill Dr City, State, Zip Code Columbus, MS 39701-3500 Name of Employer (Required) Columbus Public Schools Occupation (Required) Teacher	10/27/2023	\$5.00
Aggregate year-to-date		\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Luther Munford Mailing Address 810 Gillespie St City, State, Zip Code Jackson, MS 39202-1714 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/27/2023	\$100.00
Aggregate year-to-date		\$1,100.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lora Travnicek Mailing Address 2668 Beach Blvd City, State, Zip Code Biloxi, MS 39531-4521 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/27/2023	\$250.00
Aggregate year-to-date		\$850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Smith Mailing Address 136 St Regis Dr City, State, Zip Code Madison, MS 39110-7798 Name of Employer (Required) Mississippi Baptist Medical Center Occupation (Required) Pharmacist	10/18/2023	\$50.00
Aggregate year-to-date		\$846.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joey D. Dumas Mailing Address 14239 Perdido Key Dr City, State, Zip Code Pensacola, FL 32507-5236 Name of Employer (Required) Dumas Law Firm, LLC	10/29/2023	\$5,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$27,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anthony Collins Mailing Address 2310 Mariposa Dr City, State, Zip Code O Fallon, MO 63368-3571 Name of Employer (Required) Not Employed	10/11/2023	\$31.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$344.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tomie Green Mailing Address 114 Pine Island Dr City, State, Zip Code Jackson, MS 39206-3234 Name of Employer (Required) Not Employed	10/22/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$690.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Smith Mailing Address PO Box 1865 City, State, Zip Code Gulfport, MS 39502-1865 Name of Employer (Required) Not Employed	10/03/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Moira Crone Mailing Address 2822 Burgundy St City, State, Zip Code New Orleans, LA 70117-7308 Name of Employer (Required) Not Employed	10/13/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine	10/04/2023	\$10.00
Occupation (Required) Caretaker	Aggregate year-to-date	\$245.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Gray Mailing Address 3514 35th Ave City, State, Zip Code Meridian, MS 39307-3612 Name of Employer (Required) Not Employed	10/14/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed	10/05/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,072.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold P. Naughton Mailing Address PO Box 128 City, State, Zip Code Clinton, MA 01510-0128 Name of Employer (Required) State of Massachusetts	10/05/2023	\$500.00
Occupation (Required) State Representative	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Cherri Lightsey Mailing Address 3701 Crawford Rd City, State, Zip Code Crawford, MS 39743-9629 Name of Employer (Required) Not Employed	10/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$595.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kathryn Davis Mailing Address 777 Shady Oaks Cir City, State, Zip Code Oxford, MS 38655-5450 Name of Employer (Required) Not Employed	10/16/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Bill Stone Mailing Address 200 Johnson Park City, State, Zip Code Holly Springs, MS 38635-2809 Name of Employer (Required) North Mississippi Primary Health Care	10/16/2023	\$500.00
Occupation (Required) Chief Operating Officer	Aggregate year-to-date	\$1,039.40

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Benny Taylor Mailing Address 15229 Highway 51 N City, State, Zip Code Grenada, MS 38901-9578 Name of Employer (Required) Taylor Auction & Realty, Inc.	10/27/2023	\$500.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patrick Evans Mailing Address 2576 Audubon Pl City, State, Zip Code Biloxi, MS 39531-3707 Name of Employer (Required) Self Employed	10/18/2023	\$25.00
Occupation (Required) Psychologist	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Greg White Mailing Address 3811 Fox Valley Dr City, State, Zip Code Rockville, MD 20853-3282 Name of Employer (Required) National Assn of Regulatory Utility Commissioners	10/28/2023	\$50.00
Occupation (Required) Executive	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Rogers Mailing Address 831 Cedar Lake Rd City, State, Zip Code Biloxi, MS 39532-4619 Name of Employer (Required) Not Employed	10/28/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,450.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ford Sutherlin Mailing Address 2211 Odonnell Blvd City, State, Zip Code Gulfport, MS 39507-2147 Name of Employer (Required) Not Employed	10/29/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Vi Risser Mailing Address 377 County Road 653B City, State, Zip Code Saltillo, MS 38866-5716 Name of Employer (Required) Not Employed	10/10/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,414.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bernelle Wells Mailing Address 1136 Hallmark Dr City, State, Zip Code Jackson, MS 39206-2112 Name of Employer (Required) Not Employed	10/20/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed	10/11/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,194.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/22/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert Grenfell Mailing Address 313 Northbay Dr City, State, Zip Code Madison, MS 39110-9174 Name of Employer (Required) Not Employed	10/23/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	10/04/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$490.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kathy Davis Mailing Address 777 Shady Oaks Cir City, State, Zip Code Oxford, MS 38655-5450 Name of Employer (Required) Not Employed	10/24/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$750.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jean E. Ausborn Mailing Address 1928 Bakersfield Dr N City, State, Zip Code Nesbit, MS 38651-6006 Name of Employer (Required) Not Employed	10/24/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/24/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gloria Page Mailing Address 171 Main St City, State, Zip Code Los Altos, CA 94022-2912 Name of Employer (Required) Not Employed	10/24/2023	\$3,300.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Guy Edwards Mailing Address 222 Governors Way City, State, Zip Code Brentwood, TN 37027-8933 Name of Employer (Required) Not Employed	10/15/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$700.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie Fye Mailing Address 5439 Ennis Rd City, State, Zip Code Starkville, MS 39759-4861 Name of Employer (Required) Self Employed	10/25/2023	\$25.00
Occupation (Required) Counselor	Aggregate year-to-date	\$980.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Evelyn Westover Mailing Address 338 Hillview Dr City, State, Zip Code Ridgeland, MS 39157-8606 Name of Employer (Required) Not Employed	10/06/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	10/16/2023	\$25.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,452.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Maureen McKerns Mailing Address 813 42nd Ave City, State, Zip Code Gulfport, MS 39501-1451 Name of Employer (Required) Not Employed	10/26/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$475.00

ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Prewett Services LLC Mailing Address PO Box 386 City, State, Zip Code Southaven, MS 38671-0005 Name of Employer (Required)	10/26/2023	\$25,000.00
Occupation (Required)	Aggregate year-to-date	\$25,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ford Sutherlin Mailing Address 2211 Odonnell Blvd City, State, Zip Code Gulfport, MS 39507-2147 Name of Employer (Required) Not Employed	10/07/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kent Conrad Mailing Address 818 A St SE City, State, Zip Code Washington, DC 20003-1340 Name of Employer (Required) Not Employed	10/17/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Lawhead Mailing Address 718 S 8th St City, State, Zip Code Oxford, MS 38655-4306 Name of Employer (Required) Not Employed	10/27/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$357.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William J. Deas Mailing Address 645 Highland Cir City, State, Zip Code Tupelo, MS 38804-2003 Name of Employer (Required) Liston & Deas PLLC	10/18/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cherri Lightsey Mailing Address 3701 Crawford Rd City, State, Zip Code Crawford, MS 39743-9629 Name of Employer (Required) Not Employed	10/18/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$595.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark Shows Mailing Address 3 S Heron Cv City, State, Zip Code Hattiesburg, MS 39402-8723 Name of Employer (Required) Southern Wood Preserving	10/18/2023	\$500.00
Occupation (Required) President	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sarah Jones Mailing Address 2914 Beachview Dr City, State, Zip Code Ocean Springs, MS 39564-9404 Name of Employer (Required) US Navy	10/28/2023	\$100.00
Occupation (Required) Production Data Analyst	Aggregate year-to-date	\$550.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Long-Bellil Mailing Address 35 Brentwood Dr City, State, Zip Code Holden, MA 01520-1931 Name of Employer (Required) UMMS Center for Health Policy & Research	10/09/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$215.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bryan Patton Mailing Address 741 N Madison St City, State, Zip Code Tupelo, MS 38804-2017 Name of Employer (Required) Hyperion Technology Group, Inc.	10/29/2023	\$50.00
Occupation (Required) Engineer	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Burton Spencer Mailing Address PO Box 26 City, State, Zip Code Charleston, MS 38921-0026 Name of Employer (Required) Not Employed	10/10/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elise Gillespie Mailing Address 1013 S Lamar Blvd City, State, Zip Code Oxford, MS 38655-4739 Name of Employer (Required) University of Mississippi	10/11/2023	\$25.00
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$1,325.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Deborah Clark Mailing Address 252 Hoyer Pace Rd City, State, Zip Code Conehatta, MS 39057-9545 Name of Employer (Required) Not Employed	10/02/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/12/2023	\$20.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$530.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Susan Fino Mailing Address 1030 Augusta Dr City, State, Zip Code Oxford, MS 38655-8142 Name of Employer (Required) Not Employed	10/23/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$585.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Charles Fenner Mailing Address PO Box 759 City, State, Zip Code Edna, TX 77957-0759 Name of Employer (Required) Not Employed	10/23/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne Walsh Mailing Address 2725 White Wing Ln City, State, Zip Code West Palm Beach, FL 33409-2032 Name of Employer (Required) Not Employed	10/04/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$213.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William Sumrall III Mailing Address 108 Brewer Dr City, State, Zip Code Senatobia, MS 38668-1500 Name of Employer (Required) University of Mississippi	10/04/2023	\$500.00
Occupation (Required) Professor	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ruth S. Lockhart Mailing Address 1804 Spruce St City, State, Zip Code Greenville, MS 38703-4438 Name of Employer (Required) Not Employed	10/24/2023	\$53.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$261.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert Katz Mailing Address 960 Cumberland Rd City, State, Zip Code Chattanooga, TN 37419-1002 Name of Employer (Required) Not Employed	10/25/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patricia Berk Mailing Address 1692 Oktoc Rd City, State, Zip Code Starkville, MS 39759-6200 Name of Employer (Required) Not Employed	10/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William N. Graham Mailing Address 1301 Sandlewood Dr City, State, Zip Code Hattiesburg, MS 39402-3042 Name of Employer (Required) Not Employed	10/16/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$383.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Leslie Fye Mailing Address 5439 Ennis Rd City, State, Zip Code Starkville, MS 39759-4861 Name of Employer (Required) Self Employed	10/07/2023	\$50.00
Occupation (Required) Counselor	Aggregate year-to-date	\$980.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brad Cole Mailing Address PO Box 447 City, State, Zip Code Paradise, UT 84328-0447 Name of Employer (Required) Not Employed	10/27/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frances L. Meyer Mailing Address 9750 Troon Ct City, State, Zip Code Blue Ash, OH 45241-3349 Name of Employer (Required) Not Employed	10/08/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ricky Johnston Mailing Address 419 3rd St S City, State, Zip Code Columbus, MS 39701-5632 Name of Employer (Required) Gastroenterology Associates of Columbus	10/28/2023	\$1,000.00
Occupation (Required) Gastroenterologist	Aggregate year-to-date	\$1,925.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sheryl G. Fox Mailing Address 123 Highland Cir City, State, Zip Code Jackson, MS 39211-6455 Name of Employer (Required) Not Employed	10/19/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Critz Mailing Address 797 Springdale Rd NE City, State, Zip Code Atlanta, GA 30306-4615 Name of Employer (Required) Self Employed	10/29/2023	\$3,300.00
Occupation (Required) Physician	Aggregate year-to-date	\$3,300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnnie R. Shows Mailing Address 20 Golf Club Rd City, State, Zip Code Hattiesburg, MS 39402-7953 Name of Employer (Required) Not Employed	10/01/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Smith Mailing Address 136 St Regis Dr City, State, Zip Code Madison, MS 39110-7798 Name of Employer (Required) Mississippi Baptist Medical Center	10/11/2023	\$50.00
Occupation (Required) Pharmacist	Aggregate year-to-date	\$846.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/02/2023	\$5.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Walter W. Nixon III Mailing Address 1412 Graham Rd City, State, Zip Code Jacksonville, AR 72076-3835 Name of Employer (Required) Arkansas Public Service Commission	10/13/2023	\$200.00
Occupation (Required) Attorney	Aggregate year-to-date	\$800.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bruce Bellande Mailing Address 318 N 16th St City, State, Zip Code Oxford, MS 38655-3712 Name of Employer (Required) Not Employed	10/24/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	10/15/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$490.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name M. Beckett Howorth III Mailing Address 921 Hayes Ave City, State, Zip Code Oxford, MS 38655-4615 Name of Employer (Required) Not Employed	10/25/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Q. Evans Mailing Address 321 Water Garden Ter City, State, Zip Code Madison, MS 39110-6954 Name of Employer (Required) Not Employed	10/25/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$515.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Wilson Mailing Address 119 Seaside Dr City, State, Zip Code Ocean Springs, MS 39564-5148 Name of Employer (Required) Self Employed	10/06/2023	\$250.00
Occupation (Required) Physician	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Cunningham Mailing Address 13462 MS Highway 388 City, State, Zip Code Brooksville, MS 39739-9167 Name of Employer (Required) Valley Farm	10/16/2023	\$100.00
Occupation (Required) Farm Worker	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed	10/28/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$575.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Belinda Watkins Mailing Address 1983 E Arden Oaks Dr City, State, Zip Code Germantown, TN 38139-5697 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed	10/29/2023	\$15.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$801.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stacy Evans Mailing Address 4825 Country Rd City, State, Zip Code Louin, MS 39338 Name of Employer (Required) Not Employed	10/01/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Alverson Mailing Address 24327 Rester Rd City, State, Zip Code Picayune, MS 39466-9398 Name of Employer (Required) Self Employed	10/02/2023	\$100.00
Occupation (Required) AWS Engineer	Aggregate year-to-date	\$1,100.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Curtis Baugh Mailing Address 402 Savanna St City, State, Zip Code Jackson, MS 39212-5258 Name of Employer (Required) Not Employed	10/12/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David R. Mann Mailing Address 316 Sonoma Cv City, State, Zip Code Madison, MS 39110-9549 Name of Employer (Required) Not Employed	10/12/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	10/22/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,080.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	10/03/2023	\$6.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,452.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Charles Addington Mailing Address 3747 Crane Blvd City, State, Zip Code Jackson, MS 39216-3606 Name of Employer (Required) Horne LLP	10/13/2023	\$30.00
Occupation (Required) Accountant	Aggregate year-to-date	\$247.25

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles J. Mikhail Mailing Address PO Box 38 City, State, Zip Code Wiggins, MS 39577-0038 Name of Employer (Required) Self Employed	10/25/2023	\$5,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$20,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kay Sims Mailing Address 2501 Pinewood Ave City, State, Zip Code Pascagoula, MS 39567-5242 Name of Employer (Required) Not Employed	10/06/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Calvin C. Williams Jr Mailing Address 1045 Belhaven St City, State, Zip Code Jackson, MS 39202-1748 Name of Employer (Required) Not Employed	10/16/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/26/2023	\$5.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Watkins Wild Mailing Address 188 Cedar Ridge Rd City, State, Zip Code Mccomb, MS 39648-2100 Name of Employer (Required) Not Employed	10/27/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/27/2023	\$10.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stacy White Mailing Address 1191 County Road 506 City, State, Zip Code Shannon, MS 38868-9734 Name of Employer (Required) Cadence Bank	10/27/2023	\$20.00
Occupation (Required) Mortgage Loan Officer	Aggregate year-to-date	\$568.40

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cornelis Gispen Mailing Address 1112 S 11th St City, State, Zip Code Oxford, MS 38655-4610 Name of Employer (Required) Not Employed	10/08/2023	\$400.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,825.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold D. Copeland Mailing Address PO Box 631145 City, State, Zip Code Houston, TX 77263-1145 Name of Employer (Required) Not Employed	10/28/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$562.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/10/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Clark Mailing Address 110 Olympia Flds City, State, Zip Code Jackson, MS 39211-2509 Name of Employer (Required) Not Employed	10/20/2023	\$2,500.00
Occupation (Required) Retired	Aggregate year-to-date	\$26,003.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Austin Mailing Address 1435 Saint Ann St City, State, Zip Code Jackson, MS 39202-1847 Name of Employer (Required) Not Employed	10/21/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Francis Gresock Mailing Address 609 Washington St City, State, Zip Code Natchez, MS 39120-3526 Name of Employer (Required) Not Employed	10/12/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$625.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John Goldin Mailing Address 248 Sam Hill Rd City, State, Zip Code Guilford, CT 06437-2528 Name of Employer (Required) Not Employed	10/03/2023	\$142.86
Occupation (Required) Not Employed	Aggregate year-to-date	\$219.78
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name George B. Schimmel Mailing Address 3630 Kings Hwy City, State, Zip Code Jackson, MS 39216-3321 Name of Employer (Required) Not Employed	10/04/2023	\$1,500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$19,100.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Moore Mailing Address 7113 Flagstaff Ranch St City, State, Zip Code Las Vegas, NV 89166-7144 Name of Employer (Required) University of Mississippi	10/14/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$340.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	10/24/2023	\$20.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,452.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Drake Mailing Address 12018 Oak Hollow Dr City, State, Zip Code Vancleave, MS 39565-3706 Name of Employer (Required) Not Employed	10/24/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,162.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sarah Faulkner Mailing Address 108 Sumach St City, State, Zip Code Lookout Mountai, TN 37350-1132 Name of Employer (Required) None	10/25/2023	\$2,500.00
Occupation (Required) Homemaker	Aggregate year-to-date	\$22,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jimmyle Listenbee Mailing Address 14 County Road 3073 City, State, Zip Code Taylor, MS 38673-4513 Name of Employer (Required) Not Employed	10/25/2023	\$750.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lawrence Brisco Mailing Address PO Box 61 City, State, Zip Code Belden, MS 38826-0061 Name of Employer (Required) Not Employed	10/25/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carol Callaghan Mailing Address 4775 Village Dr City, State, Zip Code Grand Ledge, MI 48837-8112 Name of Employer (Required) Not Employed	10/26/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kerry Hamilton Mailing Address 43 County Road 332 City, State, Zip Code Taylor, MS 38673-4552 Name of Employer (Required) Kerry W Hamilton, Inc	10/26/2023	\$500.00
Occupation (Required) Consultant	Aggregate year-to-date	\$2,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kevin D. Gunn Mailing Address 17 Larkdale Dr City, State, Zip Code Saint Louis, MO 63124-1715 Name of Employer (Required) NextEra Energy Resources	10/26/2023	\$1,000.00
Occupation (Required) Executive Director	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wil Howie Mailing Address 121 County Road 422 City, State, Zip Code Water Valley, MS 38965-3792 Name of Employer (Required) Living Waters for the World	10/26/2023	\$100.00
Occupation (Required) Director	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dennis J. Erby Mailing Address PO Box 2811 City, State, Zip Code Columbus, MS 39704-2811 Name of Employer (Required) Not Employed	10/07/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Collins Mailing Address 1689 State Road 30 W City, State, Zip Code Myrtle, MS 38650-9529 Name of Employer (Required) Self Employed	10/17/2023	\$500.00
Occupation (Required) Farmer	Aggregate year-to-date	\$1,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael J. Stratton Mailing Address 1717 N Downing St City, State, Zip Code Denver, CO 80218-1056 Name of Employer (Required) Brownstein Hyatt Farber Schreck	10/17/2023	\$250.00
Occupation (Required) Senior Policy Director	Aggregate year-to-date	\$2,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Claire Davis Mailing Address 44714 Audubon Sq City, State, Zip Code Ashburn, VA 20147-6295 Name of Employer (Required) Not Employed	10/08/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$995.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stuart Jones Mailing Address 1723 B University Ave City, State, Zip Code Oxford, MS 38655-4109 Name of Employer (Required) Rose B, Inc.	10/18/2023	\$1,000.00
Occupation (Required) Developer	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carol Callaghan Mailing Address 4775 Village Dr City, State, Zip Code Grand Ledge, MI 48837-8112 Name of Employer (Required) Not Employed	10/18/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William R. King Mailing Address 1512 Hill Pl City, State, Zip Code Gulfport, MS 39501-2267 Name of Employer (Required) US Coast Guard	10/18/2023	\$200.00
Occupation (Required) Coast Guardsman	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sheila Newtown Mailing Address 3893 County Route 10 City, State, Zip Code De Peyster, NY 13633-3405 Name of Employer (Required) Not Employed	10/28/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$355.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/19/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Smith Mailing Address PO Box 1865 City, State, Zip Code Gulfport, MS 39502-1865 Name of Employer (Required) Not Employed	10/19/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jacqueline Amos Mailing Address 168 Kilkenny Blvd City, State, Zip Code Jackson, MS 39209-3744 Name of Employer (Required) City of Canton	10/29/2023	\$25.00
Occupation (Required) City Administrator	Aggregate year-to-date	\$410.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Jenkins-Joffe Mailing Address 3825 Legation St NW City, State, Zip Code Washington, DC 20015-2701 Name of Employer (Required) Not Employed	10/29/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$742.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Weslie Janeway Mailing Address 8 E 80th St City, State, Zip Code New York, NY 10075-0110 Name of Employer (Required) Not Employed	10/11/2023	\$5,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Kirkman Mailing Address 10231 County Road 200 City, State, Zip Code Falkner, MS 38629-9700 Name of Employer (Required) Not Employed	10/12/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$207.05

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alicia Margolis Mailing Address 1474 Dover Rd City, State, Zip Code Bentonia, MS 39040-9162 Name of Employer (Required) Bradley Arant Boulton Cummings LLP	10/22/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Hilgeman Mailing Address 1000 38th Ave City, State, Zip Code Gulfport, MS 39501-1628 Name of Employer (Required) Self Employed	10/22/2023	\$100.00
Occupation (Required) Real Estate Management	Aggregate year-to-date	\$381.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/23/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed	10/14/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,254.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bethany Theilman Mailing Address 131 Redbud Trl City, State, Zip Code Brandon, MS 39047-6402 Name of Employer (Required) Diabetes Foundation of MS Occupation (Required) Secretary	10/14/2023	\$25.00
Aggregate year-to-date		\$272.10
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael K. Fitzwilliam Mailing Address 165 Audubon Pl City, State, Zip Code Picayune, MS 39466-8799 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/14/2023	\$1,000.00
Aggregate year-to-date		\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sally Wood Mailing Address 107 Grey Brant Ct City, State, Zip Code Madison, MS 39110-9281 Name of Employer (Required) T2 Financial Occupation (Required) Mortgage Executive	10/05/2023	\$25.00
Aggregate year-to-date		\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jack Lawton Mailing Address 319 Lakes Dr N City, State, Zip Code Oxford, MS 38655-9219 Name of Employer (Required) University of Mississippi Occupation (Required) IT Manager	10/06/2023	\$100.00
Aggregate year-to-date		\$325.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cliff Heaton Mailing Address PO Box 158 City, State, Zip Code Lyon, MS 38645-0158 Name of Employer (Required) Self Employed	10/06/2023	\$2,500.00
Occupation (Required) Farmer	Aggregate year-to-date	\$9,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Henry Bruser Mailing Address 411 Adams St City, State, Zip Code New Orleans, LA 70118-3815 Name of Employer (Required) Not Employed	10/26/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name J. Cal Mayo Jr Mailing Address PO Box 1456 City, State, Zip Code Oxford, MS 38655-1456 Name of Employer (Required) Mayo Mallette PLLC	10/26/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George B. Schimmel Mailing Address 3630 Kings Hwy City, State, Zip Code Jackson, MS 39216-3321 Name of Employer (Required) Not Employed	10/17/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$19,100.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Witherspoon Mailing Address 910 Lincoln Ave City, State, Zip Code Oxford, MS 38655-4328 Name of Employer (Required) Not Employed	10/17/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Carol Hopkins Mailing Address 711 Long Meadow Dr City, State, Zip Code Oxford, MS 38655-9742 Name of Employer (Required) University of Mississippi	10/27/2023	\$25.00
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$308.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Cornelis Gispen Mailing Address 1112 S 11th St City, State, Zip Code Oxford, MS 38655-4610 Name of Employer (Required) Not Employed	10/27/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,825.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed	10/08/2023	\$25.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$801.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stephen Silberman Mailing Address 106 St Annes Bay Ridgeland City, State, Zip Code Ridgeland, MS 39157 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/18/2023	\$50.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Amelia R. Woolums Mailing Address 208 Lisa Ln City, State, Zip Code Starkville, MS 39759-7198 Name of Employer (Required) Mississippi State University Occupation (Required) Veterinarian	10/18/2023	\$200.00
Aggregate year-to-date		\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Katherine Dieterich Mailing Address 301 Franklin Ave City, State, Zip Code Garden City, NY 11530-5964 Name of Employer (Required) Self Employed Occupation (Required) Attorney	10/09/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frances L. Meyer Mailing Address 9750 Troon Ct City, State, Zip Code Blue Ash, OH 45241-3349 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/29/2023	\$25.00
Aggregate year-to-date		\$275.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Burton Spencer Mailing Address PO Box 26 City, State, Zip Code Charleston, MS 38921-0026 Name of Employer (Required) Not Employed	10/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anthony Vita Mailing Address 65 Vaiden Dr City, State, Zip Code Hernando, MS 38632-2313 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$800.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stevenson Weitz Mailing Address 2101 Connecticut Ave NW City, State, Zip Code Washington, DC 20008-1754 Name of Employer (Required) Not Employed	10/29/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugene Perrier Mailing Address 5540 Gibson Rd City, State, Zip Code Vicksburg, MS 39180-6318 Name of Employer (Required) Self Employed	10/10/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$400.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gordon MacInnes Mailing Address 24 Raven Dr City, State, Zip Code Morristown, NJ 07960-6412 Name of Employer (Required) Not Employed	10/20/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dale Lowery Mailing Address 611 Pennsylvania Ave SE City, State, Zip Code Washington, DC 20003-4303 Name of Employer (Required) Not Employed	10/01/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$242.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nona Staten Mailing Address 209 Cedar Lane Dr City, State, Zip Code Kosciusko, MS 39090-3808 Name of Employer (Required) Acadia Health	10/01/2023	\$100.00
Occupation (Required) IEP Coordinator	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/02/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$530.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Seth Taylor Mailing Address 5501 Glenridge Dr City, State, Zip Code Atlanta, GA 30342-4907 Name of Employer (Required) Ascensus	10/12/2023	\$25.00
Occupation (Required) Senior Actuarial Analyst	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steve Tadlock Mailing Address 2985 Beaumont Cv City, State, Zip Code Pearl, MS 39208-5324 Name of Employer (Required) Broderick Advertising	10/12/2023	\$25.00
Occupation (Required) Creative Director	Aggregate year-to-date	\$345.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Gray Mailing Address 3514 35th Ave City, State, Zip Code Meridian, MS 39307-3612 Name of Employer (Required) Not Employed	10/22/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Collins Mailing Address 1826 Ray St City, State, Zip Code Ocean Springs, MS 39564-2930 Name of Employer (Required) Not Employed	10/03/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,350.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raymond Godshall Mailing Address 310 Riverside Dr City, State, Zip Code New York, NY 10025-4123 Name of Employer (Required) Not Employed	10/23/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Troy Hill Mailing Address 511 Fox Bay Rdg City, State, Zip Code Brandon, MS 39047-8963 Name of Employer (Required) Self Employed	10/04/2023	\$59.75
Occupation (Required) Accountant	Aggregate year-to-date	\$653.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brian Rifkin Mailing Address 131 W Canebrake Blvd City, State, Zip Code Hattiesburg, MS 39402-8341 Name of Employer (Required) Hattiesburg Clinic	10/14/2023	\$1,000.00
Occupation (Required) Physician	Aggregate year-to-date	\$3,200.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Andrew Jenkins Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Tech. Services	10/24/2023	\$50.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$6,475.00

ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Walker Group, PC Mailing Address 1410 Livingston Ln City, State, Zip Code Jackson, MS 39213-8016 Name of Employer (Required)	10/16/2023	\$500.00
Occupation (Required)	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George B. Schimmel Mailing Address 3630 Kings Hwy City, State, Zip Code Jackson, MS 39216-3321 Name of Employer (Required) Not Employed	10/26/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$19,100.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Coleman Mailing Address 4013 Pinehaven Dr City, State, Zip Code Jackson, MS 39209-9736 Name of Employer (Required) Hinds County Board of Supervisors	10/07/2023	\$25.00
Occupation (Required) Fiscal Officer	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janet Shanks Mailing Address 125 Northpointe Pkwy City, State, Zip Code Jackson, MS 39211-2411 Name of Employer (Required) Not Employed	10/07/2023	\$200.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,750.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gary Taylor Mailing Address 933 Bordeaux St City, State, Zip Code New Orleans, LA 70115-2822 Name of Employer (Required) Self Employed	10/27/2023	\$100.00
Occupation (Required) Mariner	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lillie Randolph Mailing Address 117 Harris St City, State, Zip Code Nettleton, MS 38858-5964 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gene Bell Mailing Address 300 Courthouse Dr S City, State, Zip Code Grenada, MS 38901-5588 Name of Employer (Required) Renasant Bank	10/27/2023	\$250.00
Occupation (Required) Banker	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/18/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathleen Coward Mailing Address 6245 Woodland Cir City, State, Zip Code Meridian, MS 39305-9082 Name of Employer (Required) Not Employed	10/29/2023	\$35.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$240.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed	10/29/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Reginald Rodges Mailing Address 124 North St City, State, Zip Code Cleveland, MS 38732-2744 Name of Employer (Required) Chiro/Elite Med Back Institute	10/20/2023	\$10.00
Occupation (Required) Chiropractor	Aggregate year-to-date	\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Rose M. Juzang Mailing Address 601 N Forest Dr City, State, Zip Code Gulfport, MS 39507-2031 Name of Employer (Required) Not Employed	10/20/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Keith Johnson Mailing Address PO Box 421 City, State, Zip Code Nesbit, MS 38651-0421 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/20/2023	\$50.00
Aggregate year-to-date		\$1,400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	10/20/2023	\$10.00
Aggregate year-to-date		\$1,452.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard W. Ratcliffe Mailing Address 154 Tallulah Rdg City, State, Zip Code Hattiesburg, MS 39402-7626 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/01/2023	\$1,000.00
Aggregate year-to-date		\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Josephine W. Ashmead Mailing Address 540 E Van Dorn Ave City, State, Zip Code Holly Springs, MS 38635-2515 Name of Employer (Required) Self Employed Occupation (Required) Physician	10/21/2023	\$200.00
Aggregate year-to-date		\$700.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leonard Lubinsky Mailing Address 135 E 83rd St City, State, Zip Code New York, NY 10028-2419 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/02/2023	\$30.00
Aggregate year-to-date		\$215.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	10/02/2023	\$16.00
Aggregate year-to-date		\$801.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Curtina Morelandyoung Mailing Address 5915 Huntview Dr City, State, Zip Code Jackson, MS 39206-2128 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/12/2023	\$150.00
Aggregate year-to-date		\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bennie Hairston Mailing Address 115 Yazoo St City, State, Zip Code Lexington, MS 39095-3618 Name of Employer (Required) Self Employed Occupation (Required) Funeral Home Owner	10/22/2023	\$50.00
Aggregate year-to-date		\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hope Devenney Mailing Address 117 Honeysuckle Ln City, State, Zip Code Columbus, MS 39705-1218 Name of Employer (Required) Not Employed	10/13/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Caulfeild Leak II Mailing Address 1864 Highway 24 E City, State, Zip Code Woodville, MS 39669-4219 Name of Employer (Required) Not Employed	10/13/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Fisher-Wirth Mailing Address 610 N 14th St City, State, Zip Code Oxford, MS 38655-3220 Name of Employer (Required) Not Employed	10/24/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	10/24/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$490.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sumati Thomas Mailing Address 4146 Crestview Pl City, State, Zip Code Jackson, MS 39211-6404 Name of Employer (Required) Change Research	10/15/2023	\$10.00
Occupation (Required) Analyst	Aggregate year-to-date	\$723.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann J. Abadie Mailing Address 2238 Lee Loop City, State, Zip Code Oxford, MS 38655-4920 Name of Employer (Required) Not Employed	10/25/2023	\$5.00
Occupation (Required) Retired	Aggregate year-to-date	\$845.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas Adams Mailing Address 4527 Union Ave City, State, Zip Code Nettleton, MS 38858-6037 Name of Employer (Required) Mississippi Public Service Commission	10/25/2023	\$5.00
Occupation (Required) Chief Investigator	Aggregate year-to-date	\$278.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/25/2023	\$5.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda J. Davis Mailing Address 179 Little Sawmill Rd City, State, Zip Code Laurel, MS 39443-9157 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/06/2023	\$100.00
Aggregate year-to-date		\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Walter Taylor Mailing Address 1054 County Road 36 City, State, Zip Code Thaxton, MS 38871-9507 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/16/2023	\$50.00
Aggregate year-to-date		\$2,550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Kaplan Mailing Address 6044 51st Ave NE City, State, Zip Code Seattle, WA 98115-7708 Name of Employer (Required) University of Washington Occupation (Required) Professor	10/17/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	10/17/2023	\$15.00
Aggregate year-to-date		\$801.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nan Tarlton Mailing Address 210 Meadowlane Dr City, State, Zip Code Madison, MS 39110-9611 Name of Employer (Required) Not Employed	10/27/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,475.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Dorsey R. Carson Jr Mailing Address 2431 Lake Cir City, State, Zip Code Jackson, MS 39211-6622 Name of Employer (Required) Carson Law Group	10/27/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$7,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Thomas V. Obrien Mailing Address 511 Dabbs St City, State, Zip Code Hattiesburg, MS 39401-3941 Name of Employer (Required) University of Southern Mississippi	10/27/2023	\$70.00
Occupation (Required) Professor	Aggregate year-to-date	\$370.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Tammy Taylor-Bufford Mailing Address 335 Hotophia Hill Dr City, State, Zip Code Batesville, MS 38606-5724 Name of Employer (Required) Delta Gastroenterology	10/08/2023	\$100.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$1,023.40

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Neville Mailing Address 1425 County Road 50 City, State, Zip Code Ada, OH 45810-9433 Name of Employer (Required) Big Brothers Big Sisters	10/18/2023	\$250.00
Occupation (Required) Executive Director	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	10/19/2023	\$10.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,452.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny D. Jones Mailing Address 611 S Pear Orchard Rd City, State, Zip Code Ridgeland, MS 39157-4836 Name of Employer (Required) The DELTA Project	10/19/2023	\$100.00
Occupation (Required) CEO	Aggregate year-to-date	\$1,886.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Rabalais Mailing Address 132 Sara Fox Dr City, State, Zip Code Brandon, MS 39047-5526 Name of Employer (Required) Not Employed	10/29/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$377.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne H. Robinson Mailing Address 206 Wood St City, State, Zip Code Water Valley, MS 38965-2603 Name of Employer (Required) Not Employed	10/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Bradly S. Macnealy Mailing Address 164 Gene Lester Rd City, State, Zip Code Isola, MS 38754-9239 Name of Employer (Required) Self Employed	10/10/2023	\$2,000.00
Occupation (Required) Farmer	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/20/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/21/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jan Willis Mailing Address 1628 Carr Ave City, State, Zip Code Memphis, TN 38104-5010 Name of Employer (Required) Grace-St. Luke's Episcopal School Library Occupation (Required) Director of Library Services	10/02/2023	\$100.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cherri Musser Mailing Address 105 Piute Cir City, State, Zip Code Loudon, TN 37774-2138 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/02/2023	\$100.00
Aggregate year-to-date		\$800.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melanie Wagner Mailing Address PO Box 1074 City, State, Zip Code Florence, MS 39073-1074 Name of Employer (Required) WORR Occupation (Required) President	10/22/2023	\$10.00
Aggregate year-to-date		\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine Occupation (Required) Caretaker	10/22/2023	\$10.00
Aggregate year-to-date		\$245.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dustin Thomas Mailing Address 1413 Woodhaven St City, State, Zip Code Pascagoula, MS 39581-2245 Name of Employer (Required) Self Employed	10/22/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lola W. Heyer Mailing Address 75 Horse Creek Rd City, State, Zip Code Mc Henry, MS 39561-6050 Name of Employer (Required) Not Employed	10/22/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joe Grist Mailing Address 2611 Pemberton Ave City, State, Zip Code Tupelo, MS 38801-4131 Name of Employer (Required) North Ms State Hospital	10/03/2023	\$5.00
Occupation (Required) CFO	Aggregate year-to-date	\$305.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	10/04/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,080.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Don A. Zatroch Mailing Address 2366 17th Ave NW City, State, Zip Code Saint Paul, MN 55112-5204 Name of Employer (Required) Not Employed	10/14/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Morgan Walker Mailing Address 13675 Coursey Blvd City, State, Zip Code Baton Rouge, LA 70817-1349 Name of Employer (Required) Self Employed	10/05/2023	\$500.00
Occupation (Required) Teacher	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	10/05/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,080.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Vannewkirk Mailing Address 245 Seven Farms Dr City, State, Zip Code Daniel Island, SC 29492-8500 Name of Employer (Required) Cross	10/25/2023	\$25.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy	10/25/2023	\$25.00
Aggregate year-to-date		\$965.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathy Howard Mailing Address 1213 Huntcliff Way City, State, Zip Code Clinton, MS 39056-3425 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/16/2023	\$25.00
Aggregate year-to-date		\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jason Wilson Mailing Address 612 S Flower St City, State, Zip Code Los Angeles, CA 90017-2810 Name of Employer (Required) Willenken LLP Occupation (Required) Attorney	10/17/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melanie Wadkins Mailing Address 304 Shiloh Dr City, State, Zip Code Oxford, MS 38655-5012 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/17/2023	\$22.00
Aggregate year-to-date		\$220.60

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hope Devenney Mailing Address 117 Honeysuckle Ln City, State, Zip Code Columbus, MS 39705-1218 Name of Employer (Required) Not Employed	10/27/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Stefan Massong Mailing Address 307 Wisteria St City, State, Zip Code Ocean Springs, MS 39564-2840 Name of Employer (Required) Self Employed	10/27/2023	\$125.00
Occupation (Required) Psychologist	Aggregate year-to-date	\$1,025.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Toni D. Cooley Mailing Address 1028 Whitsett Walk City, State, Zip Code Jackson, MS 39206-6158 Name of Employer (Required) Systems Electro Coating	10/27/2023	\$2,500.00
Occupation (Required) Entrepreneur	Aggregate year-to-date	\$8,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name KQ Troendle Mailing Address 305 State St City, State, Zip Code Bay Saint Louis, MS 39520-4433 Name of Employer (Required) Not Employed	10/27/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William D. Booth Mailing Address 2829 NE 33rd Ct City, State, Zip Code Fort Lauderdale, FL 33306-2028 Name of Employer (Required) Self Employed	10/09/2023	\$5,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$5,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bethany Theilman Mailing Address 131 Redbud Trl City, State, Zip Code Brandon, MS 39047-6402 Name of Employer (Required) Diabetes Foundation of MS	10/29/2023	\$25.00
Occupation (Required) Secretary	Aggregate year-to-date	\$272.10
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald Henley Mailing Address 700 Harris St City, State, Zip Code Charlottesville, VA 22903-4584 Name of Employer (Required) Self Employed	10/21/2023	\$100.00
Occupation (Required) Musician	Aggregate year-to-date	\$950.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Benjamin Griffith Mailing Address PO Box 2248 City, State, Zip Code Oxford, MS 38655-7248 Name of Employer (Required) Griffith Law Firm	10/13/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,125.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathryn J. Irby Mailing Address 730 Tegarden Rd City, State, Zip Code Gulfport, MS 39507-2625 Name of Employer (Required) Not Employed	10/23/2023	\$60.00
Occupation (Required) Retired	Aggregate year-to-date	\$528.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Gambetta Mailing Address 130 Harvesters Sq City, State, Zip Code Tupelo, MS 38801-9510 Name of Employer (Required) Mueller Co.	10/14/2023	\$50.00
Occupation (Required) Engineer	Aggregate year-to-date	\$517.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Lynch Mailing Address 617 Camelia Trl City, State, Zip Code Brandon, MS 39047-6316 Name of Employer (Required) Not Employed	10/24/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,675.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Howard D. Pittman Mailing Address 1407 Emerson St NW City, State, Zip Code Washington, DC 20011-3827 Name of Employer (Required) Not Employed	10/05/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rubye D. Harden Mailing Address 114 N Spring St City, State, Zip Code Tupelo, MS 38804-3922 Name of Employer (Required) Harden Enterprises	10/15/2023	\$100.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$950.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Katz Mailing Address PO Box 410A City, State, Zip Code Saint Helena, CA 94574-0430 Name of Employer (Required) Self Employed	10/25/2023	\$10.00
Occupation (Required) Real Estate Investor	Aggregate year-to-date	\$244.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Shanti Fry Mailing Address 8 Berkeley St City, State, Zip Code Cambridge, MA 02138-3464 Name of Employer (Required) Not Employed	10/16/2023	\$2,500.00
Occupation (Required) Retired	Aggregate year-to-date	\$7,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John P. Sullivan Mailing Address 1239 Winwood Cv City, State, Zip Code Tupelo, MS 38801-6472 Name of Employer (Required) Sullivan Insurance Solutions	10/16/2023	\$500.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$1,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sidney Whitehurst Mailing Address PO Box 966 City, State, Zip Code Iuka, MS 38852-0966 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/07/2023	\$100.00
Aggregate year-to-date		\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marilyn Vandemark Mailing Address 412 Highpoint Dr City, State, Zip Code Diamondhead, MS 39525-3719 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/17/2023	\$100.00
Aggregate year-to-date		\$1,350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed Occupation (Required) Accountant	10/18/2023	\$3.00
Aggregate year-to-date		\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathleen Holmes Mailing Address 330 Crestmont Cv City, State, Zip Code Cordova, TN 38018-6904 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/28/2023	\$5.00
Aggregate year-to-date		\$305.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Earl Savage Mailing Address 543 Shreve Oak Cir City, State, Zip Code Oxford, MS 38655-1060 Name of Employer (Required) Fiserv Occupation (Required) Architect	10/28/2023	\$500.00
Aggregate year-to-date		\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Foster Campbell Mailing Address 1800 Jimmie Davis Hwy City, State, Zip Code Bossier City, LA 71112-4595 Name of Employer (Required) State Of Louisiana Occupation (Required) Commissioner	10/09/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anne Bailey Mailing Address 705 N Overlook Dr City, State, Zip Code Alexandria, VA 22305-1223 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/09/2023	\$50.00
Aggregate year-to-date		\$725.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joseph Sheppard Mailing Address PO Box 327 City, State, Zip Code Cuero, TX 77954-0327 Name of Employer (Required) Self Employed Occupation (Required) Attorney	10/20/2023	\$500.00
Aggregate year-to-date		\$2,950.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gerald H. Blessey Mailing Address 2577 Chatham Ct City, State, Zip Code Biloxi, MS 39531-2758 Name of Employer (Required) Self Employed	10/20/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,733.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/21/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Diane Irvin Mailing Address 4047 Wyandot St City, State, Zip Code Denver, CO 80211-2140 Name of Employer (Required) Strategic Programs, Inc.	10/12/2023	\$10.00
Occupation (Required) Corporate Secretary	Aggregate year-to-date	\$573.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/12/2023	\$5.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Rabalais Mailing Address 132 Sara Fox Dr City, State, Zip Code Brandon, MS 39047-5526 Name of Employer (Required) Not Employed	10/22/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$377.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mack Lowery Mailing Address 5055 Myers Rd City, State, Zip Code Terry, MS 39170-9429 Name of Employer (Required) Aamco Transmission	10/03/2023	\$50.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$665.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Margo Salone Mailing Address 71 Matherville Frost Bridge Rd City, State, Zip Code Shubuta, MS 39360-9201 Name of Employer (Required) Not Employed	10/03/2023	\$20.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$272.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Troy Hill Mailing Address 511 Fox Bay Rdg City, State, Zip Code Brandon, MS 39047-8963 Name of Employer (Required) Self Employed	10/13/2023	\$41.55
Occupation (Required) Accountant	Aggregate year-to-date	\$653.25

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Glenn Taylor Mailing Address 3644 Old Canton Rd City, State, Zip Code Jackson, MS 39216-3313 Name of Employer (Required) Copeland Cook Taylor & Bush	10/23/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$625.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Creaghan Mailing Address 6298 Sevenoaks Ave City, State, Zip Code Baton Rouge, LA 70806-7330 Name of Employer (Required) AUX Initives LLC	10/04/2023	\$500.00
Occupation (Required) Consulting	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Patton Mailing Address 5102 Canton Heights Dr City, State, Zip Code Jackson, MS 39211-4515 Name of Employer (Required) Not Employed	10/14/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bonnie Sides Mailing Address 1510 Pinehurst Pl City, State, Zip Code Jackson, MS 39202-1819 Name of Employer (Required) Not Employed	10/24/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,275.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bruce Davis Mailing Address 777 Shady Oaks Cir City, State, Zip Code Oxford, MS 38655-5450 Name of Employer (Required) Not Employed	10/24/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$505.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Emilie Hall Mailing Address 17800 River Walk Dr City, State, Zip Code Vancleave, MS 39565-8342 Name of Employer (Required) Not Employed	10/24/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Douglas Masterson Mailing Address 43 Palm Tree Loop City, State, Zip Code Petal, MS 39465-9251 Name of Employer (Required) University of Southern Mississippi	10/05/2023	\$25.00
Occupation (Required) Chemist	Aggregate year-to-date	\$640.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Harry Sellers Mailing Address 221 NW 62nd St City, State, Zip Code Seattle, WA 98107-2040 Name of Employer (Required) Not Employed	10/15/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie Steverson Mailing Address 2313 Farrell Cir City, State, Zip Code Gulfport, MS 39507-2222 Name of Employer (Required) Not Employed	10/25/2023	\$5.00
Occupation (Required) Retired	Aggregate year-to-date	\$425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Gloria D. Kellum Mailing Address 213 Colonial Rd City, State, Zip Code Oxford, MS 38655-2634 Name of Employer (Required) Not Employed	10/25/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Don Keim Mailing Address 202 S Deer Creek Dr W City, State, Zip Code Leland, MS 38756-3129 Name of Employer (Required) Not Employed	10/16/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$775.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Leslie Fye Mailing Address 5439 Ennis Rd City, State, Zip Code Starkville, MS 39759-4861 Name of Employer (Required) Self Employed	10/26/2023	\$25.00
Occupation (Required) Counselor	Aggregate year-to-date	\$980.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Emilee C. Young Mailing Address 1194 Highway 370 City, State, Zip Code Dumas, MS 38625-9604 Name of Employer (Required) Tippah County Hospital	10/18/2023	\$2,500.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$13,950.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nanci Youngblood Mailing Address 105 Turtle Xing City, State, Zip Code Hattiesburg, MS 39402-7692 Name of Employer (Required) Not Employed	10/18/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name R. H. Cooper Mailing Address 12 County Road 3070 City, State, Zip Code Oxford, MS 38655-8277 Name of Employer (Required) Not Employed	10/28/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joe York Mailing Address 315 Panola St City, State, Zip Code Water Valley, MS 38965-2408 Name of Employer (Required) Self Employed	10/28/2023	\$1,000.00
Occupation (Required) Video Producer	Aggregate year-to-date	\$1,600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steve McAlilly Mailing Address 1019 Fawn Dr City, State, Zip Code Tupelo, MS 38804-1923 Name of Employer (Required) Methodist Senior Services	10/29/2023	\$1,000.00
Occupation (Required) CEO	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carver Construction Company LLC Mailing Address 214 Village Sq City, State, Zip Code Pleasant View, TN 37146-7173 Name of Employer (Required)	10/10/2023	\$5,000.00
Occupation (Required)	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Troy Hill Mailing Address 511 Fox Bay Rdg City, State, Zip Code Brandon, MS 39047-8963 Name of Employer (Required) Self Employed	10/12/2023	\$32.90
Occupation (Required) Accountant	Aggregate year-to-date	\$653.25

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/22/2023	\$5.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Q. Evans Mailing Address 321 Water Garden Ter City, State, Zip Code Madison, MS 39110-6954 Name of Employer (Required) Not Employed	10/13/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$515.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janet D. Kennedy Mailing Address 158 Pleasant Grove Dr City, State, Zip Code Brandon, MS 39042-2617 Name of Employer (Required) Not Employed	10/23/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Troy Hill Mailing Address 511 Fox Bay Rdg City, State, Zip Code Brandon, MS 39047-8963 Name of Employer (Required) Self Employed	10/23/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$653.25

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carol Hopkins Mailing Address 711 Long Meadow Dr City, State, Zip Code Oxford, MS 38655-9742 Name of Employer (Required) University of Mississippi	10/23/2023	\$50.00
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$308.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dot Courson Mailing Address 63 Hidden Crk City, State, Zip Code Pontotoc, MS 38863-7514 Name of Employer (Required) Self Employed	10/04/2023	\$50.00
Occupation (Required) Artist	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lida McDowell Mailing Address 1904 Fuller St City, State, Zip Code Hattiesburg, MS 39401-7544 Name of Employer (Required) Not Employed	10/24/2023	\$400.00
Occupation (Required) Retired	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/24/2023	\$5.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/25/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/25/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Lynch Mailing Address 617 Camelia Trl City, State, Zip Code Brandon, MS 39047-6316 Name of Employer (Required) Not Employed	10/06/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,675.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dempsey M. Levi Mailing Address 401 E Beach Dr City, State, Zip Code Ocean Springs, MS 39564-5132 Name of Employer (Required) Not Employed	10/06/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lana Richardson Mailing Address 10611 County Road 500 City, State, Zip Code Ripley, MS 38663-9199 Name of Employer (Required) Not Employed	10/16/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$905.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lynn Dobbs Mailing Address 43 Dobbs Dr City, State, Zip Code Columbus, MS 39701-9619 Name of Employer (Required) Not Employed	10/08/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lowry Lomax Mailing Address 404 Tyler Ave City, State, Zip Code Oxford, MS 38655-3822 Name of Employer (Required) Lomax Law Firm	10/18/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joyce Leech Mailing Address 214 Main St S City, State, Zip Code Amory, MS 38821-4218 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$760.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Darryl Gibbs Mailing Address 128 Livingston Dr City, State, Zip Code Madison, MS 39110-2000 Name of Employer (Required) Chhabra & Gibbs, P.A.	10/28/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert Ward Mailing Address 1807 E Church Street Ext City, State, Zip Code Martinsville, VA 24112-3140 Name of Employer (Required) Virginia Indigent Defense Commission	10/09/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Karen Clarke Mailing Address 122 Shadowlawn Ave City, State, Zip Code Pass Christian, MS 39571-4817 Name of Employer (Required) Ochsner Health System	10/29/2023	\$30.00
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$430.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jacqueline Amos Mailing Address 168 Kilkenny Blvd City, State, Zip Code Jackson, MS 39209-3744 Name of Employer (Required) City of Canton	10/20/2023	\$10.00
Occupation (Required) City Administrator	Aggregate year-to-date	\$410.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine Occupation (Required) Caretaker	10/11/2023	\$20.00
Aggregate year-to-date		\$245.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Benjamin Griffith Mailing Address PO Box 2248 City, State, Zip Code Oxford, MS 38655-7248 Name of Employer (Required) Griffith Law Firm Occupation (Required) Attorney	10/02/2023	\$50.00
Aggregate year-to-date		\$1,125.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marc Doyle Mailing Address 704 State St City, State, Zip Code Natchez, MS 39120-3543 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/12/2023	\$100.00
Aggregate year-to-date		\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Maja Head Mailing Address 608 Fairway Trl City, State, Zip Code Springfield, TN 37172-4703 Name of Employer (Required) Nordstrom Occupation (Required) Sales Associate	10/12/2023	\$300.00
Aggregate year-to-date		\$800.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Henry Ha Mailing Address 4730 Fairmount St City, State, Zip Code Dallas, TX 75219-1199 Name of Employer (Required) Wells Fargo N.A.	10/03/2023	\$20.00
Occupation (Required) Lead Analytics Consultant	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark Ford Mailing Address 501 Jefferson St City, State, Zip Code Clinton, MS 39056-4243 Name of Employer (Required) Entergy	10/23/2023	\$20.00
Occupation (Required) Technician	Aggregate year-to-date	\$249.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hannah Banks Mailing Address 107 Garland Rd City, State, Zip Code Newton, MA 02459-1741 Name of Employer (Required) Not Employed	10/23/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$280.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Butts Mailing Address 1914 Patton Ln City, State, Zip Code Austin, TX 78723-1236 Name of Employer (Required) Self Employed	10/23/2023	\$250.00
Occupation (Required) Political Consultant	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny Sneed Mailing Address 9300 Wilshire Blvd City, State, Zip Code Beverly Hills, CA 90212-3209 Name of Employer (Required) Self Employed	10/24/2023	\$500.00
Occupation (Required) Actor	Aggregate year-to-date	\$4,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugene Bramlett Jr Mailing Address 1123 College St City, State, Zip Code Columbus, MS 39701-5810 Name of Employer (Required) Covenant United Methodist Church	10/05/2023	\$50.00
Occupation (Required) Minister	Aggregate year-to-date	\$1,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Davis Mailing Address 900 Olde Creek Ln City, State, Zip Code Oxford, MS 38655-4422 Name of Employer (Required) Not Employed	10/25/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine	10/25/2023	\$20.00
Occupation (Required) Caretaker	Aggregate year-to-date	\$245.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/17/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Claire Davis Mailing Address 44714 Audubon Sq City, State, Zip Code Ashburn, VA 20147-6295 Name of Employer (Required) Not Employed	10/17/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$995.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary J. Westerlund Mailing Address 1201 Cowden Dr City, State, Zip Code Amory, MS 38821-1306 Name of Employer (Required) Not Employed	10/08/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	10/18/2023	\$6.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,452.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Billy Atwood Mailing Address 714 Old Brock Rd City, State, Zip Code Weatherford, TX 76088-8708 Name of Employer (Required) Not Employed	10/28/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,100.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ford Sutherlin Mailing Address 2211 Odonnell Blvd City, State, Zip Code Gulfport, MS 39507-2147 Name of Employer (Required) Not Employed	10/09/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John B. Clark Mailing Address 167 Rolling Meadows Rd City, State, Zip Code Ridgeland, MS 39157-9488 Name of Employer (Required) Not Employed	10/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$4,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joyce Ellis Mailing Address 106 Napa Valley Dr City, State, Zip Code Clinton, MS 39056-5732 Name of Employer (Required) Not Employed	10/11/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$619.60

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael R. O'Neal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic	10/01/2023	\$500.00
Occupation (Required) Physician	Aggregate year-to-date	\$3,026.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Witherspoon Mailing Address 910 Lincoln Ave City, State, Zip Code Oxford, MS 38655-4328 Name of Employer (Required) Not Employed	10/02/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mack Lowery Mailing Address 5055 Myers Rd City, State, Zip Code Terry, MS 39170-9429 Name of Employer (Required) Aamco Transmission	10/12/2023	\$25.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$665.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bill May Mailing Address PO Box 2009 City, State, Zip Code Meridian, MS 39302-2009 Name of Employer (Required) Barry, Thaggard, and May LLP	10/12/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathaleen Miller Mailing Address 13509 Circle G Ranch Rd City, State, Zip Code Picayune, MS 39466-9586 Name of Employer (Required) Not Employed	10/22/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed	10/24/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Donna S. Smith Mailing Address 711 6TH Ave City, State, Zip Code Columbus, MS 39701 Name of Employer (Required) Self Employed	10/25/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Dennis Truax Mailing Address 913 Southgate Dr City, State, Zip Code Starkville, MS 39759-9434 Name of Employer (Required) Self Employed	10/25/2023	\$100.00
Occupation (Required) Engineer	Aggregate year-to-date	\$1,821.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Curt Brinson Mailing Address 311 Southwind Dr City, State, Zip Code Richland, MS 39218-9235 Name of Employer (Required) Not Employed	10/25/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Walker Mailing Address 1302 E Second St City, State, Zip Code Pass Christian, MS 39571-3110 Name of Employer (Required) Cardinal Financial	10/06/2023	\$100.00
Occupation (Required) Branch Manager	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Murphy Mailing Address 7818 Tapp Rd City, State, Zip Code Ocean Springs, MS 39564-8646 Name of Employer (Required) Self Employed	10/06/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Seth Taylor Mailing Address 5501 Glenridge Dr City, State, Zip Code Atlanta, GA 30342-4907 Name of Employer (Required) Ascensus	10/16/2023	\$25.00
Occupation (Required) Senior Actuarial Analyst	Aggregate year-to-date	\$225.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jamie Barnett Mailing Address 801 Yorkshire Ct City, State, Zip Code Oxford, MS 38655-4441 Name of Employer (Required) Viasat	10/26/2023	\$150.00
Occupation (Required) Vice President, Global Communications Solutions	Aggregate year-to-date	\$1,214.75
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church	10/17/2023	\$25.00
Occupation (Required) Clergy	Aggregate year-to-date	\$965.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gail Stratton Mailing Address 956 Highway 7 N City, State, Zip Code Abbeville, MS 38601-9620 Name of Employer (Required) Not Employed	10/18/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$575.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Murdock Mailing Address 123 Pitcher Pt City, State, Zip Code Long Beach, MS 39560-5607 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/28/2023	\$50.00
Aggregate year-to-date		\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Wasson Mailing Address 9611 Attala Road 2101 City, State, Zip Code Ethel, MS 39067-6320 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/19/2023	\$25.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Betsy Dickson Mailing Address 807 S 19th Ave City, State, Zip Code Hattiesburg, MS 39401-7464 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/11/2023	\$50.00
Aggregate year-to-date		\$575.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ford Sutherlin Mailing Address 2211 Odonnell Blvd City, State, Zip Code Gulfport, MS 39507-2147 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/21/2023	\$10.00
Aggregate year-to-date		\$220.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Philip Rhodesg Mailing Address 1002 Windy Oaks Dr City, State, Zip Code Oxford, MS 38655-9237 Name of Employer (Required) Not Employed	10/12/2023	\$2,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cherie Kusman Mailing Address 11 Teddy Bear Trl City, State, Zip Code Santa Fe, NM 87505-8118 Name of Employer (Required) Not Employed	10/12/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sheryl Jones Mailing Address 630 Savannah Estates Blvd City, State, Zip Code Biloxi, MS 39532-3703 Name of Employer (Required) Not Employed	10/22/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Chris Rakestraw Mailing Address 1555 Columbine Dr City, State, Zip Code Tupelo, MS 38801-8470 Name of Employer (Required) Rare	10/13/2023	\$1,000.00
Occupation (Required) Broker	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Santa Cruz Mailing Address 5825 Cedar Rd City, State, Zip Code Ocean Springs, MS 39564-2250 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/23/2023	\$10.00
Aggregate year-to-date		\$470.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Larry Hoellwarth Mailing Address 5510 N Magnolia Ave City, State, Zip Code Chicago, IL 60640-1307 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/23/2023	\$25.00
Aggregate year-to-date		\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marla Stroup Mailing Address 2657 Palmer Dr City, State, Zip Code Gulfport, MS 39507-2846 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/14/2023	\$25.00
Aggregate year-to-date		\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sherry W. Mcwhorter Mailing Address 781 Versailles Dr City, State, Zip Code Ridgeland, MS 39157-5148 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/14/2023	\$200.00
Aggregate year-to-date		\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sara Morris Schock Mailing Address 286 River Rd City, State, Zip Code Hattiesburg, MS 39401-8418 Name of Employer (Required) Sakalarios Blackwell & Schock PLLC	10/25/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed	10/26/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,072.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pamela C. Howorth Mailing Address 6531 Jackson Raymond Rd City, State, Zip Code Raymond, MS 39154-9007 Name of Employer (Required) Not Employed	10/26/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugene Perrier Mailing Address 5540 Gibson Rd City, State, Zip Code Vicksburg, MS 39180-6318 Name of Employer (Required) Self Employed	10/17/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$400.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sheila W. Varnado Mailing Address PO Box 16958 City, State, Zip Code Hattiesburg, MS 39404-6958 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/18/2023	\$500.00
Aggregate year-to-date		\$850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny D. Jones Mailing Address 611 S Pear Orchard Rd City, State, Zip Code Ridgeland, MS 39157-4836 Name of Employer (Required) The DELTA Project Occupation (Required) CEO	10/28/2023	\$25.00
Aggregate year-to-date		\$1,886.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco Occupation (Required) Laborer	10/28/2023	\$5.00
Aggregate year-to-date		\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Louis Lacour Mailing Address 206 Keller St City, State, Zip Code Bay Saint Louis, MS 39520-4318 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/19/2023	\$250.00
Aggregate year-to-date		\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed	10/29/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$360.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Gaudet Mailing Address 99 Midtown Sq City, State, Zip Code Hattiesburg, MS 39402-7513 Name of Employer (Required) Wesley Medical Center	10/29/2023	\$25.00
Occupation (Required) Physician	Aggregate year-to-date	\$1,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marshall Morgan Mailing Address 281 Pat Lockett Rd City, State, Zip Code Canton, MS 39046-8952 Name of Employer (Required) NetDoor	10/11/2023	\$100.00
Occupation (Required) President	Aggregate year-to-date	\$403.75
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nancy Foley Mailing Address 216 Court St City, State, Zip Code Clarksdale, MS 38614-2712 Name of Employer (Required) Not Employed	10/21/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Claire Davis Mailing Address 44714 Audubon Sq City, State, Zip Code Ashburn, VA 20147-6295 Name of Employer (Required) Not Employed	10/22/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$995.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/03/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Albert Pettigrew Mailing Address 401 Inverness Ct City, State, Zip Code Ocean Springs, MS 39564-8409 Name of Employer (Required) Pettigrew law firm	10/23/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kathleen M. Yadrick Mailing Address 419 S 40th Ave City, State, Zip Code Hattiesburg, MS 39402-1724 Name of Employer (Required) Not Employed	10/14/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$375.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mack Lowery Mailing Address 5055 Myers Rd City, State, Zip Code Terry, MS 39170-9429 Name of Employer (Required) Aamco Transmission	10/25/2023	\$35.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$665.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dale Lowery Mailing Address 611 Pennsylvania Ave SE City, State, Zip Code Washington, DC 20003-4303 Name of Employer (Required) Not Employed	10/25/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$242.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tina N. Owen Mailing Address 2370 Lark St City, State, Zip Code New Orleans, LA 70122-4320 Name of Employer (Required) Not Employed	10/26/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anne Winter Mailing Address 13 Horizon Hill Rd City, State, Zip Code Asheville, NC 28804-2429 Name of Employer (Required) Not Employed	10/17/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required) Not Employed	10/17/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gerald Harville Mailing Address 312 E Bankhead St City, State, Zip Code Fulton, MS 38843-1222 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie Fye Mailing Address 5439 Ennis Rd City, State, Zip Code Starkville, MS 39759-4861 Name of Employer (Required) Self Employed	10/27/2023	\$25.00
Occupation (Required) Counselor	Aggregate year-to-date	\$980.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John F. Mcquillan Mailing Address 200 Innerbelt Rd City, State, Zip Code Somerville, MA 02143-4430 Name of Employer (Required) Tax Executives Institute, Inc.	10/27/2023	\$5,000.00
Occupation (Required) Executive	Aggregate year-to-date	\$10,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required) Not Employed	10/08/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brett Montague Mailing Address 112 2nd Ave City, State, Zip Code Hattiesburg, MS 39401-3860 Name of Employer (Required) End It For Good, Inc.	10/18/2023	\$15.00
Occupation (Required) Nonprofit Executive	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/18/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Somers Mailing Address 2008 Kostka Ln City, State, Zip Code Germantown, TN 38139-3448 Name of Employer (Required) FedEx	10/28/2023	\$100.00
Occupation (Required) Pilot	Aggregate year-to-date	\$400.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary A. Alford Mailing Address 2182 Attala Road 1162 City, State, Zip Code Kosciusko, MS 39090-6916 Name of Employer (Required) Not Employed	10/09/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Daniel Palladino Mailing Address 82 State St City, State, Zip Code Brooklyn, NY 11201-5519 Name of Employer (Required) Amazon Studios	10/19/2023	\$1,000.00
Occupation (Required) Writer	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan McCready Mailing Address 112 Pine Dr City, State, Zip Code Ocean Springs, MS 39564-5002 Name of Employer (Required) University Of South Alabama	10/19/2023	\$50.00
Occupation (Required) Educator	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Anderson Mailing Address 828 Battle Rd City, State, Zip Code Byhalia, MS 38611-8999 Name of Employer (Required) Not Employed	10/19/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eva Lantrip Mailing Address 3239 Big Ben S City, State, Zip Code Hernando, MS 38632-6918 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/29/2023	\$50.00
Aggregate year-to-date		\$310.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold D. Copeland Mailing Address PO Box 631145 City, State, Zip Code Houston, TX 77263-1145 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/29/2023	\$50.00
Aggregate year-to-date		\$562.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Larry V. Holland Mailing Address 17 New Bethel Rd City, State, Zip Code Tylertown, MS 39667-6608 Name of Employer (Required) Self Employed Occupation (Required) Farmer	10/29/2023	\$2,500.00
Aggregate year-to-date		\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wil Howie Mailing Address 121 County Road 422 City, State, Zip Code Water Valley, MS 38965-3792 Name of Employer (Required) Living Waters for the World Occupation (Required) Director	10/10/2023	\$100.00
Aggregate year-to-date		\$300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gerald Washington Mailing Address 10960 Highway 341 City, State, Zip Code Randolph, MS 38864-9185 Name of Employer (Required) The Fuel Stop of MS Occupation (Required) Business Owner	10/20/2023	\$1,000.00
Aggregate year-to-date		\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George B. Schimmel Mailing Address 3630 Kings Hwy City, State, Zip Code Jackson, MS 39216-3321 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/01/2023	\$1,000.00
Aggregate year-to-date		\$19,100.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gwendolyn Prater Mailing Address PO Box 90 City, State, Zip Code Canton, MS 39046-0090 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/11/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Fred Hurst Jr Mailing Address 68 Redfern Trl City, State, Zip Code Petal, MS 39465-9415 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/21/2023	\$100.00
Aggregate year-to-date		\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paul Suskie Mailing Address 103 Alton Cv City, State, Zip Code Little Rock, AR 72211-2192 Name of Employer (Required) Southwest Power Pool	10/12/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Veronica Starling Mailing Address 2210 Talbert Dr City, State, Zip Code Yazoo City, MS 39194-2545 Name of Employer (Required) Self Employed	10/22/2023	\$1,500.00
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$6,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frances L. Meyer Mailing Address 9750 Troon Ct City, State, Zip Code Blue Ash, OH 45241-3349 Name of Employer (Required) Not Employed	10/23/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Betsy Dickson Mailing Address 807 S 19th Ave City, State, Zip Code Hattiesburg, MS 39401-7464 Name of Employer (Required) Not Employed	10/23/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$575.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Terry Mangialardi Mailing Address 1181 Mcgowan Dr City, State, Zip Code Southaven, MS 38671-8430 Name of Employer (Required) Desoto County	10/14/2023	\$25.00
Occupation (Required) Teacher	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Claude Clayton Mailing Address 115 N Broadway St City, State, Zip Code Tupelo, MS 38804-3901 Name of Employer (Required) Clayton O'Donnell PLLC	10/14/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,650.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Oktibbeha County Democratic Executive Co Mailing Address PO Box 1900 City, State, Zip Code Starkville, MS 39760-1900 Name of Employer (Required)	10/25/2023	\$500.00
Occupation (Required)	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Friendship Medical Clinic, LLC Mailing Address PO Box 46 City, State, Zip Code Ecpu, MS 38841-0046 Name of Employer (Required)	10/16/2023	\$5,000.00
Occupation (Required)	Aggregate year-to-date	\$5,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/16/2023	\$5.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Emilie Hall Mailing Address 17800 River Walk Dr City, State, Zip Code Vancleave, MS 39565-8342 Name of Employer (Required) Not Employed	10/26/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Francis Springer Mailing Address 136 Wildwood Dr City, State, Zip Code Madison, MS 39110-7044 Name of Employer (Required) Springer Law Office PLLC	10/07/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Regina Quinn Mailing Address 728 N Congress St City, State, Zip Code Jackson, MS 39202-3008 Name of Employer (Required) Self Employed	10/27/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,550.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed	10/19/2023	\$18.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$801.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Gratia Karmes Mailing Address 417 Chapin St City, State, Zip Code Starkville, MS 39759-2620 Name of Employer (Required) Not Employed	10/29/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$520.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Janice Antonow Mailing Address 3336 Whippoorwill Ln City, State, Zip Code Oxford, MS 38655-5311 Name of Employer (Required) City of Oxford	10/29/2023	\$25.00
Occupation (Required) Alderman	Aggregate year-to-date	\$825.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Karen Kirkman Mailing Address 10231 County Road 200 City, State, Zip Code Falkner, MS 38629-9700 Name of Employer (Required) Not Employed	10/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$207.05

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert B. Lampton III Mailing Address 2404 N Cheryl Dr City, State, Zip Code Jackson, MS 39211-4907 Name of Employer (Required) Not Employed	10/29/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nicolle M. Jordan Mailing Address 511 Dabbs St City, State, Zip Code Hattiesburg, MS 39401-3941 Name of Employer (Required) University of Southern MS	10/10/2023	\$113.00
Occupation (Required) Professor	Aggregate year-to-date	\$218.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kerry Hamilton Mailing Address 43 County Road 332 City, State, Zip Code Taylor, MS 38673-4552 Name of Employer (Required) Kerry W Hamilton, Inc	10/20/2023	\$250.00
Occupation (Required) Consultant	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melody Umstead Mailing Address 38 El Camino Tesoros City, State, Zip Code Sedona, AZ 86336-5057 Name of Employer (Required) Not Employed	10/11/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Shibata Mailing Address 10433 Larwin Ave City, State, Zip Code Chatsworth, CA 91311-2059 Name of Employer (Required) Self Employed	10/21/2023	\$25.00
Occupation (Required) Insurance Broker	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Constance E. Parham Mailing Address 2607 Sterling Dr City, State, Zip Code Oxford, MS 38655-4269 Name of Employer (Required) Not Employed	10/21/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melita Thorpe Mailing Address 5 Douglas Rd City, State, Zip Code Ellisville, MS 39437-4805 Name of Employer (Required) Not Employed	10/02/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Claire Davis Mailing Address 44714 Audubon Sq City, State, Zip Code Ashburn, VA 20147-6295 Name of Employer (Required) Not Employed	10/03/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$995.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/03/2023	\$5.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kerry Hamilton Mailing Address 43 County Road 332 City, State, Zip Code Taylor, MS 38673-4552 Name of Employer (Required) Kerry W Hamilton, Inc	10/13/2023	\$250.00
Occupation (Required) Consultant	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rose Trigg Mailing Address 2800 W Main St City, State, Zip Code Tupelo, MS 38801-3027 Name of Employer (Required) Not Employed	10/04/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hannah Banks Mailing Address 107 Garland Rd City, State, Zip Code Newton, MA 02459-1741 Name of Employer (Required) Not Employed	10/14/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$280.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Len Pinkley Mailing Address 60010 Indian Cv City, State, Zip Code Amory, MS 38821-6007 Name of Employer (Required) Not Employed	10/24/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steve C. Shurden Mailing Address 2122 Taryn Ln City, State, Zip Code Nesbit, MS 38651-9513 Name of Employer (Required) Not Employed	10/05/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roger Klingler Mailing Address 7844 E Sandalwood Dr City, State, Zip Code Scottsdale, AZ 85250-7269 Name of Employer (Required) Not Employed	10/15/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$950.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anthony Collins Mailing Address 2310 Mariposa Dr City, State, Zip Code O Fallon, MO 63368-3571 Name of Employer (Required) Not Employed	10/15/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$344.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hope Devenney Mailing Address 117 Honeysuckle Ln City, State, Zip Code Columbus, MS 39705-1218 Name of Employer (Required) Not Employed	10/25/2023	\$20.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Rod Luther Mailing Address 13963 Highway 5 City, State, Zip Code Mountain View, AR 72560-8044 Name of Employer (Required) Not Employed	10/06/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$207.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ruth S. Lockhart Mailing Address 1804 Spruce St City, State, Zip Code Greenville, MS 38703-4438 Name of Employer (Required) Not Employed	10/16/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$261.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ann Smith Mailing Address PO Box 1865 City, State, Zip Code Gulfport, MS 39502-1865 Name of Employer (Required) Not Employed	10/16/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Democratic Governors Association Mailing Address 1225 Eye St NW City, State, Zip Code Washington, DC 20005-3914 Name of Employer (Required)	10/26/2023	\$650,000.00
Occupation (Required)	Aggregate year-to-date	\$5,850,171.72
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William F. Wallace Mailing Address 30 Saint Andrews City, State, Zip Code Hattiesburg, MS 39401-8214 Name of Employer (Required) Not Employed	10/26/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Victor Fleitas Mailing Address 148 Midway Dr City, State, Zip Code Tupelo, MS 38804-2800 Name of Employer (Required) Victor I. Fleitas, P.A.	10/17/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$800.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jacqueline Amos Mailing Address 168 Kilkenny Blvd City, State, Zip Code Jackson, MS 39209-3744 Name of Employer (Required) City of Canton	10/27/2023	\$10.00
Occupation (Required) City Administrator	Aggregate year-to-date	\$410.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patrick Benvenuto Mailing Address PO Box 2014 City, State, Zip Code Bay Saint Louis, MS 39521-2014 Name of Employer (Required) Bay Motor Winding	10/27/2023	\$100.00
Occupation (Required) Vice President of Sales & Marketing	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Perry Hood Mailing Address 402 Lake Hazle Dr City, State, Zip Code Hazlehurst, MS 39083-2210 Name of Employer (Required) J & K Interest Inc	10/27/2023	\$1,000.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$10,960.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patrick J. O'Connor Mailing Address 541 E Scenic Dr City, State, Zip Code Pass Christian, MS 39571-4510 Name of Employer (Required) Self Employed	10/27/2023	\$2,000.00
Occupation (Required) Director	Aggregate year-to-date	\$12,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Katz Mailing Address PO Box 410A City, State, Zip Code Saint Helena, CA 94574-0430 Name of Employer (Required) Self Employed	10/08/2023	\$17.00
Occupation (Required) Real Estate Investor	Aggregate year-to-date	\$244.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine Occupation (Required) Caretaker	10/18/2023	\$10.00
Aggregate year-to-date		\$245.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Seth Taylor Mailing Address 5501 Glenridge Dr City, State, Zip Code Atlanta, GA 30342-4907 Name of Employer (Required) Ascensus Occupation (Required) Senior Actuarial Analyst	10/18/2023	\$25.00
Aggregate year-to-date		\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Conwill Mailing Address 1005 County Road 357 City, State, Zip Code New Albany, MS 38652-8981 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/28/2023	\$50.00
Aggregate year-to-date		\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Grace Terpstra Mailing Address 2700 Virginia Ave NW City, State, Zip Code Washington, DC 20037-1909 Name of Employer (Required) Self Employed Occupation (Required) Advocacy Consultant	10/19/2023	\$500.00
Aggregate year-to-date		\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Glenda Glover Mailing Address 3500 John A Merritt Blvd City, State, Zip Code Nashville, TN 37209-1500 Name of Employer (Required) Tennessee State University	10/29/2023	\$1,000.00
Occupation (Required) President	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed	10/20/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James F. Sallis Jr Mailing Address 1220 Archer St City, State, Zip Code San Diego, CA 92109-1227 Name of Employer (Required) Not Employed	10/02/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Riddell Mailing Address 519 E Peace St City, State, Zip Code Canton, MS 39046-4712 Name of Employer (Required) Not Employed	10/22/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine Occupation (Required) Caretaker	10/22/2023	\$5.00
Aggregate year-to-date		\$245.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Q. Evans Mailing Address 321 Water Garden Ter City, State, Zip Code Madison, MS 39110-6954 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/03/2023	\$10.00
Aggregate year-to-date		\$515.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Davis Davis Mailing Address 179 Little Sawmill Rd City, State, Zip Code Laurel, MS 39443-9157 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/23/2023	\$250.00
Aggregate year-to-date		\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Carroll Mailing Address 675 Beulah Grove Rd City, State, Zip Code Pontotoc, MS 38863-7704 Name of Employer (Required) Ashley Distribution Services Occupation (Required) Truck Driver	10/04/2023	\$100.00
Aggregate year-to-date		\$1,195.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Douglas Masterson Mailing Address 43 Palm Tree Loop City, State, Zip Code Petal, MS 39465-9251 Name of Employer (Required) University of Southern Mississippi	10/14/2023	\$25.00
Occupation (Required) Chemist	Aggregate year-to-date	\$640.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Irene Mason Mailing Address 235 Pine Ridge Dr City, State, Zip Code Waveland, MS 39576-3929 Name of Employer (Required) MEBA Union	10/25/2023	\$50.00
Occupation (Required) Merchant Mariner	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Lalli Mailing Address 140 State St City, State, Zip Code Brooklyn, NY 11201-6039 Name of Employer (Required) Not Employed	10/25/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jane M. Walman Mailing Address 2408 W Wellsgate Dr City, State, Zip Code Oxford, MS 38655-5977 Name of Employer (Required) Not Employed	10/16/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Allan Johannesen Mailing Address 4 Carleton Rd City, State, Zip Code Rochdale, MA 01542-1144 Name of Employer (Required) Not Employed	10/07/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Christine R. Ulrich Mailing Address 139 Deer Path City, State, Zip Code Cobbs Creek, VA 23035-2160 Name of Employer (Required) Not Employed	10/27/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gregory Schussele Mailing Address 29 Illmo Dr City, State, Zip Code Springfield, IL 62711-7908 Name of Employer (Required) Not Employed	10/28/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$216.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stephen Schear Mailing Address 805 Santa Ray Ave City, State, Zip Code Oakland, CA 94610-1738 Name of Employer (Required) Self Employed	10/28/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,750.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald W. Medley Mailing Address 902 W Pine St City, State, Zip Code Hattiesburg, MS 39401-4262 Name of Employer (Required) Self Employed	10/29/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,150.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Gray Mailing Address 1425 Jackson St City, State, Zip Code Corinth, MS 38834-3423 Name of Employer (Required) Self Employed	10/02/2023	\$100.00
Occupation (Required) Architect	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Reilly Morse Mailing Address 929 Bridge St City, State, Zip Code Gulfport, MS 39507-3432 Name of Employer (Required) Not Employed	10/12/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,975.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anthony Collins Mailing Address 2310 Mariposa Dr City, State, Zip Code O Fallon, MO 63368-3571 Name of Employer (Required) Not Employed	10/03/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$344.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/13/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edward F. Donovan Mailing Address 2559 River Place Blvd City, State, Zip Code Biloxi, MS 39531-2752 Name of Employer (Required) Self Employed	10/23/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine	10/04/2023	\$15.00
Occupation (Required) Caretaker	Aggregate year-to-date	\$245.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Lynch Mailing Address 617 Camelia Trl City, State, Zip Code Brandon, MS 39047-6316 Name of Employer (Required) Not Employed	10/14/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,675.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bob Malone Mailing Address PO Box 979 City, State, Zip Code Gulf Shores, AL 36547-0979 Name of Employer (Required) Coastal Real Estate and Development	10/24/2023	\$10.00
Occupation (Required) Realtor	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anne Gremillion Mailing Address 7589 W Lakeshore Dr City, State, Zip Code Shreveport, LA 71107-5629 Name of Employer (Required) Not Employed	10/05/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jonathan N. Larkin Mailing Address 5750 Bou Ave City, State, Zip Code N Bethesda, MD 20852-5626 Name of Employer (Required) Hospitality Lighting Management	10/05/2023	\$500.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Vi Risser Mailing Address 377 County Road 653B City, State, Zip Code Saltillo, MS 38866-5716 Name of Employer (Required) Not Employed	10/25/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,414.60

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ed Hargett Mailing Address 1007 Hargett Dr City, State, Zip Code Charleston, MS 38921-9726 Name of Employer (Required) Corrections Management Services, Inc.	10/16/2023	\$250.00
Occupation (Required) Corrections	Aggregate year-to-date	\$1,450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Henry Mazaleski Mailing Address 1010 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5021 Name of Employer (Required) HEM BizLaw	10/17/2023	\$200.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sandra Hayes Mailing Address 129 Country Club Dr City, State, Zip Code Madison, MS 39110-8808 Name of Employer (Required) Institute for the Advancement of Minority Health	10/17/2023	\$250.00
Occupation (Required) CEO	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed	10/27/2023	\$11.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$501.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Copeland Mailing Address 5193 Old Brandon Rd City, State, Zip Code Pearl, MS 39208-9025 Name of Employer (Required) Copeland & Johns Occupation (Required) CEO	10/27/2023	\$10,000.00
Aggregate year-to-date		\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy	10/08/2023	\$25.00
Aggregate year-to-date		\$965.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Zilla Spencer Mailing Address 382 Highway 341 S City, State, Zip Code Vardaman, MS 38878-9581 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/09/2023	\$50.00
Aggregate year-to-date		\$515.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Rhoden Mailing Address 778 Gillespie St City, State, Zip Code Jackson, MS 39202-1711 Name of Employer (Required) Self Employed Occupation (Required) Physician	10/09/2023	\$30.00
Aggregate year-to-date		\$715.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Annette Sowell Mailing Address 574 Nellwood Dr City, State, Zip Code Hattiesburg, MS 39402-9277 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lynn Fuller Mailing Address 2949 Divisadero St City, State, Zip Code San Francisco, CA 94123-3822 Name of Employer (Required) Self Employed	10/29/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joshua Phillips Mailing Address 184 Sundown Cv City, State, Zip Code Madison, MS 39110-8168 Name of Employer (Required) Mississippi Asthma and Allergy Clinic	10/10/2023	\$100.00
Occupation (Required) Physician	Aggregate year-to-date	\$903.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Casey Mailing Address 229 Peachtree Hills Ave NE City, State, Zip Code Atlanta, GA 30305-4413 Name of Employer (Required) Not Employed	10/10/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,075.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Miller Mailing Address 1294 Kensington Dr City, State, Zip Code Biloxi, MS 39530-1620 Name of Employer (Required) Not Employed	10/20/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John Grisham Mailing Address 5120 Cove Garden Rd City, State, Zip Code North Garden, VA 22959-2334 Name of Employer (Required) Self Employed	10/20/2023	\$25,000.00
Occupation (Required) Writer	Aggregate year-to-date	\$30,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/03/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$530.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Anne Buffington Mailing Address 249 Lincoln Dr City, State, Zip Code Starkville, MS 39759-3690 Name of Employer (Required) Self Employed	10/13/2023	\$50.00
Occupation (Required) Writer	Aggregate year-to-date	\$212.30

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Molly Gochman Mailing Address PO Box 540205 City, State, Zip Code Houston, TX 77254-0205 Name of Employer (Required) Self Employed	10/04/2023	\$5,000.00
Occupation (Required) Artist	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Thormeyer Mailing Address 3113 Little Creek Ln City, State, Zip Code Alexandria, VA 22309-2125 Name of Employer (Required) Federal Energy Regulatory Commission	10/04/2023	\$50.00
Occupation (Required) Public Affairs	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bonnie Sides Mailing Address 1510 Pinehurst Pl City, State, Zip Code Jackson, MS 39202-1819 Name of Employer (Required) Not Employed	10/24/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine	10/25/2023	\$5.00
Occupation (Required) Caretaker	Aggregate year-to-date	\$245.00

Reporting Period 10/1/2023 through 10/29/2023

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Reilly Morse Mailing Address 929 Bridge St City, State, Zip Code Gulfport, MS 39507-3432 Name of Employer (Required) Not Employed	10/25/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,975.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2029 Name of Employer (Required) Not Employed	10/25/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$861.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required) Not Employed	10/26/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Staci Morgan Mailing Address 6946 Weir Panhandle Rd City, State, Zip Code Weir, MS 39772 Name of Employer (Required) Self Employed	10/07/2023	\$100.00
Occupation (Required) Conference Director	Aggregate year-to-date	\$1,439.15

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/07/2023	\$1.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Triplette Advisors, LLC Mailing Address PO Box 2566 City, State, Zip Code Oxford, MS 38655-4900 Name of Employer (Required)	10/27/2023	\$250.00
Occupation (Required)	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jay M. Colbert Mailing Address PO Box 284 City, State, Zip Code Houston, MS 38851-0284 Name of Employer (Required) Colbert Land Services LLC	10/18/2023	\$1,000.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Frank A. Yates Mailing Address 722 Woodrun Dr City, State, Zip Code Pearl, MS 39208-7901 Name of Employer (Required) Not Employed	10/18/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Irvin Mailing Address 4047 Wyandot St City, State, Zip Code Denver, CO 80211-2140 Name of Employer (Required) Strategic Programs, Inc.	10/19/2023	\$10.00
Occupation (Required) Corporate Secretary	Aggregate year-to-date	\$573.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/29/2023	\$10.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jacqueline Amos Mailing Address 168 Kilkenny Blvd City, State, Zip Code Jackson, MS 39209-3744 Name of Employer (Required) City of Canton	10/10/2023	\$25.00
Occupation (Required) City Administrator	Aggregate year-to-date	\$410.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nan Tarlton Mailing Address 210 Meadowlane Dr City, State, Zip Code Madison, MS 39110-9611 Name of Employer (Required) Not Employed	10/21/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,475.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James W. Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code Madison, MS 39110-7494 Name of Employer (Required) Bradley Arant	10/02/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/12/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,008.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Hutto Mailing Address 62 Redfern Trl City, State, Zip Code Petal, MS 39465-9415 Name of Employer (Required) Self Employed	10/12/2023	\$25.00
Occupation (Required) Education Consultant	Aggregate year-to-date	\$692.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Lipsey Mailing Address 7277 Exchequer Dr City, State, Zip Code Baton Rouge, LA 70809-4910 Name of Employer (Required) Lipsey's LLC	10/23/2023	\$1,000.00
Occupation (Required) Wholesale	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donna M. Krebs Mailing Address 3530 River Rd City, State, Zip Code Moss Point, MS 39563-5013 Name of Employer (Required) Cumbest, Cumbest, Hunter & McCormick, P.A.	10/24/2023	\$50.00
Occupation (Required) Paralegal	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Claire Levine Mailing Address 6400 N Montana Ave City, State, Zip Code Portland, OR 97217-4879 Name of Employer (Required) Not Employed	10/24/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$530.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert B. McDuff Mailing Address 767 N Congress St City, State, Zip Code Jackson, MS 39202-3009 Name of Employer (Required) Law Office of Robert McDuff	10/25/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine	10/25/2023	\$10.00
Occupation (Required) Caretaker	Aggregate year-to-date	\$245.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Long-Bellil Mailing Address 35 Brentwood Dr City, State, Zip Code Holden, MA 01520-1931 Name of Employer (Required) UMMS Center for Health Policy & Research	10/25/2023	\$75.00
Occupation (Required) Professor	Aggregate year-to-date	\$215.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Daniel Smith Mailing Address 4404 O Leary Ave City, State, Zip Code Pascagoula, MS 39581-2353 Name of Employer (Required) Not Employed	10/06/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Obie M. McNair Jr Mailing Address 102 Cirencester Dr City, State, Zip Code Ridgeland, MS 39157-9788 Name of Employer (Required) Central Mississippi Medical Center	10/16/2023	\$25.00
Occupation (Required) Health Care	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bonnie Sides Mailing Address 1510 Pinehurst Pl City, State, Zip Code Jackson, MS 39202-1819 Name of Employer (Required) Not Employed	10/16/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,275.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed	10/27/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,254.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Walter T. Moore Mailing Address 103 Waterstone Dr City, State, Zip Code Oxford, MS 38655-0009 Name of Employer (Required) Not Employed	10/27/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Cagle Mailing Address 411 N Montgomery St City, State, Zip Code Starkville, MS 39759-2605 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$357.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Reed Mailing Address 3436 Magazine St City, State, Zip Code New Orleans, LA 70115-2480 Name of Employer (Required) Not Employed	10/28/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Henry Ha Mailing Address 4730 Fairmount St City, State, Zip Code Dallas, TX 75219-1199 Name of Employer (Required) Wells Fargo N.A.	10/28/2023	\$10.00
Occupation (Required) Lead Analytics Consultant	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed	10/09/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$360.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nicole Burnett Mailing Address 736 Central Ave City, State, Zip Code Sykesville, MD 21784-7509 Name of Employer (Required) Not Employed	10/29/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$235.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cari White Mailing Address 92 -1553 Aliinui Dr City, State, Zip Code Kapolei, HI 96707-2228 Name of Employer (Required) Not Employed	10/10/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Christine Weeks Mailing Address 455 Dewberry Rd City, State, Zip Code Jonesboro, LA 71251-6414 Name of Employer (Required) Not Employed	10/12/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary-Martha Wilson Mailing Address 106 Saint Charles Ave City, State, Zip Code Starkville, MS 39759-2649 Name of Employer (Required) Not Employed	10/23/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Lalli Mailing Address 140 State St City, State, Zip Code Brooklyn, NY 11201-6039 Name of Employer (Required) Not Employed	10/23/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stacy White Mailing Address 1191 County Road 506 City, State, Zip Code Shannon, MS 38868-9734 Name of Employer (Required) Cadence Bank	10/14/2023	\$20.00
Occupation (Required) Mortgage Loan Officer	Aggregate year-to-date	\$568.40

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Haresh Chatlani Mailing Address 2596 Robinson St City, State, Zip Code Jackson, MS 39209-7029 Name of Employer (Required) In Style	10/24/2023	\$20.00
Occupation (Required) Retail	Aggregate year-to-date	\$263.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/15/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joe Grist Mailing Address 2611 Pemberton Ave City, State, Zip Code Tupelo, MS 38801-4131 Name of Employer (Required) North Ms State Hospital	10/25/2023	\$300.00
Occupation (Required) CFO	Aggregate year-to-date	\$305.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rheta Johnson Mailing Address 117 County Road 259 City, State, Zip Code Iuka, MS 38852-8542 Name of Employer (Required) Not Employed	10/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,471.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donna S. Smith	10/25/2023	\$100.00
Mailing Address 711 6TH Ave		
City, State, Zip Code Columbus, MS 39701		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lucy S. Selman	10/06/2023	\$500.00
Mailing Address 421 Elegans Ct		
City, State, Zip Code Ocean Springs, MS 39564-2673		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeffrey Blum	10/17/2023	\$100.00
Mailing Address 425 Riverside Dr		
City, State, Zip Code New York, NY 10025-7737		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Caleb Dana	10/17/2023	\$10.00
Mailing Address 103 Pinetrail Pl		
City, State, Zip Code Madison, MS 39110-8008		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$282.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Shirley Gray Mailing Address 520 College Hill Rd City, State, Zip Code Oxford, MS 38655-2000 Name of Employer (Required) Not Employed	10/28/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,299.85
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name James Lynch Mailing Address 617 Camelia Trl City, State, Zip Code Brandon, MS 39047-6316 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,675.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Leslie Steverson Mailing Address 2313 Farrell Cir City, State, Zip Code Gulfport, MS 39507-2222 Name of Employer (Required) Not Employed	10/10/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name George Q. Evans Mailing Address 321 Water Garden Ter City, State, Zip Code Madison, MS 39110-6954 Name of Employer (Required) Not Employed	10/20/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$515.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tiffany H. Treece Mailing Address 1309 Dayton Ave City, State, Zip Code Alameda, CA 94501-4009 Name of Employer (Required) Omada Health	10/01/2023	\$500.00
Occupation (Required) Recruiter	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia Groya Mailing Address 5371 Fairway St City, State, Zip Code Jackson, MS 39211-4251 Name of Employer (Required) Hinds County Community College	10/12/2023	\$100.00
Occupation (Required) Art Instructor	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	10/22/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,080.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Hutto Mailing Address 62 Redfern Trl City, State, Zip Code Petal, MS 39465-9415 Name of Employer (Required) Self Employed	10/03/2023	\$5.00
Occupation (Required) Education Consultant	Aggregate year-to-date	\$692.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alan Saleski Mailing Address 2116 Harrison St City, State, Zip Code Evanston, IL 60201-2223 Name of Employer (Required) Loyola University Chicago Occupation (Required) Professor	10/23/2023	\$25.00
Aggregate year-to-date		\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Bryant-Angotti Mailing Address 129 Hedges Cv City, State, Zip Code Oxford, MS 38655-1146 Name of Employer (Required) Kent State University Occupation (Required) Professor	10/04/2023	\$50.00
Aggregate year-to-date		\$435.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Latham Mailing Address 2090 Jefferson Pkwy City, State, Zip Code Hernando, MS 38632-5905 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/24/2023	\$250.00
Aggregate year-to-date		\$2,150.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/24/2023	\$25.00
Aggregate year-to-date		\$717.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jo Durst Mailing Address 799 Pine Cir City, State, Zip Code Starkville, MS 39759-3729 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/05/2023	\$100.00
Aggregate year-to-date		\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda McLendon Mailing Address 4283 Highway 18 E City, State, Zip Code Quitman, MS 39355-8728 Name of Employer (Required) Ochsner Rush Health Occupation (Required) Midwife	10/15/2023	\$10.00
Aggregate year-to-date		\$204.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anu Khosla Mailing Address 393 Cumberland St City, State, Zip Code San Francisco, CA 94114-2515 Name of Employer (Required) Self Employed Occupation (Required) Brand Strategist	10/06/2023	\$5,000.00
Aggregate year-to-date		\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Raymond Mailing Address 733 Huckleberry Rd City, State, Zip Code Bay Saint Louis, MS 39520-1621 Name of Employer (Required) Self Employed Occupation (Required) Financial Consultant	10/26/2023	\$1,000.00
Aggregate year-to-date		\$6,080.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Gaudet Mailing Address 99 Midtown Sq City, State, Zip Code Hattiesburg, MS 39402-7513 Name of Employer (Required) Wesley Medical Center	10/07/2023	\$50.00
Occupation (Required) Physician	Aggregate year-to-date	\$1,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Not Employed	10/18/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,150.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gail Stratton Mailing Address 956 Highway 7 N City, State, Zip Code Abbeville, MS 38601-9620 Name of Employer (Required) Not Employed	10/18/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$575.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cypress Creek Renewables LLC Mailing Address 3402 Pico Blvd City, State, Zip Code Santa Monica, CA 90405-2025 Name of Employer (Required)	10/19/2023	\$5,000.00
Occupation (Required)	Aggregate year-to-date	\$5,000.00

ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Family Health Center, Inc. Mailing Address 117 S 11th Ave City, State, Zip Code Laurel, MS 39440-4312 Name of Employer (Required)	10/01/2023	\$250.00
Occupation (Required)	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Larry Williams Mailing Address 649 Virginia Ave NE City, State, Zip Code Brookhaven, MS 39601-9443 Name of Employer (Required) Cophiah County School District	10/11/2023	\$100.00
Occupation (Required) Educator	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Deval Patrick Mailing Address 245 Furnace Rd City, State, Zip Code Richmond, MA 01254-5010 Name of Employer (Required) Harvard Kennedy School	10/12/2023	\$3,000.00
Occupation (Required) Professor	Aggregate year-to-date	\$5,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Don A. Zatroch Mailing Address 2366 17th Ave NW City, State, Zip Code Saint Paul, MN 55112-5204 Name of Employer (Required) Not Employed	10/22/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jamie Barnett Mailing Address 801 Yorkshire Ct City, State, Zip Code Oxford, MS 38655-4441 Name of Employer (Required) Viasat	10/23/2023	\$64.75
Occupation (Required) Vice President, Global Communications Solutions	Aggregate year-to-date	\$1,214.75
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David K. Sauer Mailing Address 121 Oak Blvd City, State, Zip Code Waveland, MS 39576-3917 Name of Employer (Required) Not Employed	10/14/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie-Burl McLemore Mailing Address 7900 Michael Dr City, State, Zip Code Lake Cormorant, MS 38641-8211 Name of Employer (Required) Not Employed	10/14/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dale Viola Mailing Address 76533 Highway 1082 City, State, Zip Code Covington, LA 70435-6715 Name of Employer (Required) Not Employed	10/24/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gwendolyn Gray Mailing Address 688 Pleasant Ridge Rd City, State, Zip Code Sturgis, MS 39769-6620 Name of Employer (Required) Not Employed	10/25/2023	\$550.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thorne Butler Mailing Address 3942 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3411 Name of Employer (Required) Not Employed	10/16/2023	\$22.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$692.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William A. Cox Mailing Address 1739 Swann St NW City, State, Zip Code Washington, DC 20009-5536 Name of Employer (Required) Not Employed	10/26/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,915.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	10/27/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$490.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Butts Mailing Address 1914 Patton Ln City, State, Zip Code Austin, TX 78723-1236 Name of Employer (Required) Self Employed Occupation (Required) Political Consultant	10/18/2023	\$250.00
Aggregate year-to-date		\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/18/2023	\$50.00
Aggregate year-to-date		\$2,700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas Daschle Mailing Address 1155 23rd St NW City, State, Zip Code Washington, DC 20037-3301 Name of Employer (Required) The Daschle Group Occupation (Required) Consultant	10/28/2023	\$1,000.00
Aggregate year-to-date		\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rubye D. Harden Mailing Address 114 N Spring St City, State, Zip Code Tupelo, MS 38804-3922 Name of Employer (Required) Harden Enterprises Occupation (Required) Business Owner	10/28/2023	\$100.00
Aggregate year-to-date		\$950.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sheryl Jones Mailing Address 630 Savannah Estates Blvd City, State, Zip Code Biloxi, MS 39532-3703 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John R. Bradley Mailing Address 107 Philip Rd City, State, Zip Code Oxford, MS 38655-2013 Name of Employer (Required) Not Employed	10/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$10,560.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Curtis Gray Mailing Address 37 County Road 317 City, State, Zip Code Heidelberg, MS 39439-3679 Name of Employer (Required) Jasper	10/29/2023	\$25.00
Occupation (Required) County Supervisor	Aggregate year-to-date	\$310.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Francis Gresock Mailing Address 609 Washington St City, State, Zip Code Natchez, MS 39120-3526 Name of Employer (Required) Not Employed	10/10/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$625.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name American Federation of Teachers Committe Mailing Address 555 New Jersey Ave NW City, State, Zip Code Washington, DC 20001-2029 Name of Employer (Required) Occupation (Required)	10/20/2023	\$50,000.00
Aggregate year-to-date		\$50,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cherri Musser Mailing Address 105 Piute Cir City, State, Zip Code Loudon, TN 37774-2138 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/11/2023	\$100.00
Aggregate year-to-date		\$800.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cindy Akins Mailing Address 86449 Meadowwood Dr City, State, Zip Code Yulee, FL 32097-6427 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/21/2023	\$50.00
Aggregate year-to-date		\$896.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Warlick Mailing Address 100 Princess St City, State, Zip Code Alexandria, VA 22314-2325 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/12/2023	\$500.00
Aggregate year-to-date		\$2,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nona Staten Mailing Address 209 Cedar Lane Dr City, State, Zip Code Kosciusko, MS 39090-3808 Name of Employer (Required) Acadia Health	10/12/2023	\$30.00
Occupation (Required) IEP Coordinator	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/03/2023	\$5.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Richardson Mailing Address 6008 Vista Cir City, State, Zip Code Gulfport, MS 39507-4634 Name of Employer (Required) Chism Strategies	10/13/2023	\$250.00
Occupation (Required) Consultant	Aggregate year-to-date	\$1,600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name R. H. Cooper Mailing Address 12 County Road 3070 City, State, Zip Code Oxford, MS 38655-8277 Name of Employer (Required) Not Employed	10/23/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Christopher Melin Mailing Address 14 The Battery City, State, Zip Code Orange Beach, AL 36561-3073 Name of Employer (Required) Not Employed	10/04/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Clinton Mayes Jr Mailing Address 100 Chilton Pl City, State, Zip Code Madison, MS 39110-7810 Name of Employer (Required) Family Health Care Clinic	10/14/2023	\$100.00
Occupation (Required) COO	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patsy Turner Mailing Address 160 Kirkwood Pl City, State, Zip Code Jackson, MS 39211-6022 Name of Employer (Required) Not Employed	10/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Wasson Mailing Address 9611 Attala Road 2101 City, State, Zip Code Ethel, MS 39067-6320 Name of Employer (Required) Not Employed	10/26/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gladstone Jones Mailing Address 4130 Cove Garden Rd City, State, Zip Code North Garden, VA 22959-2305 Name of Employer (Required) Jones Swanson Huddell	10/26/2023	\$5,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$10,698.36
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George B. Ready Mailing Address PO Box 127 City, State, Zip Code Hernando, MS 38632-0127 Name of Employer (Required) Self Employed	10/26/2023	\$2,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$8,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kari Conrad Mailing Address 8 Shiner St City, State, Zip Code Glen Ullin, ND 58631-1200 Name of Employer (Required) Not Employed	10/07/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rhonda Reich Mailing Address 22450 Rue La Terre City, State, Zip Code Kiln, MS 39556-6655 Name of Employer (Required) Not Employed	10/07/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold D. Copeland Mailing Address PO Box 631145 City, State, Zip Code Houston, TX 77263-1145 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$562.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Alan Arendale Mailing Address 345 Woodstone Rd City, State, Zip Code Clinton, MS 39056-4945 Name of Employer (Required) Cannon Toyota Vicksburg	10/08/2023	\$25.00
Occupation (Required) Sales Consultant	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William Walker Mailing Address 1302 E Second St City, State, Zip Code Pass Christian, MS 39571-3110 Name of Employer (Required) Cardinal Financial	10/18/2023	\$100.00
Occupation (Required) Branch Manager	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ruth S. Lockhart Mailing Address 1804 Spruce St City, State, Zip Code Greenville, MS 38703-4438 Name of Employer (Required) Not Employed	10/29/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$261.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eddie Powell Mailing Address 2620 Northplace Dr City, State, Zip Code Tupelo, MS 38804-5019 Name of Employer (Required) Not Employed	10/29/2023	\$2,500.00
Occupation (Required) Retired	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/10/2023	\$5.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Terri Jaudon Mailing Address 267 Silvertree Xing City, State, Zip Code Tupelo, MS 38801-6024 Name of Employer (Required) Brooks Grocery	10/10/2023	\$50.00
Occupation (Required) Grocery Bagger	Aggregate year-to-date	\$220.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tammy Taylor-Bufford Mailing Address 335 Hotophia Hill Dr City, State, Zip Code Batesville, MS 38606-5724 Name of Employer (Required) Delta Gastroenterology	10/20/2023	\$250.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$1,023.40

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Allen Lind Mailing Address 286 Lighthouse Ln City, State, Zip Code Brandon, MS 39047-7012 Name of Employer (Required) Not Employed	10/11/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Beverly Johnson Mailing Address PO Box 376 City, State, Zip Code Kosciusko, MS 39090-0376 Name of Employer (Required) Not Employed	10/02/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cliff Johnson Mailing Address 1275 Highway 7 S City, State, Zip Code Water Valley, MS 38965-3758 Name of Employer (Required) MacArthur Justice Center	10/12/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,014.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed	10/12/2023	\$25.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$520.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cherri Musser Mailing Address 105 Piute Cir City, State, Zip Code Loudon, TN 37774-2138 Name of Employer (Required) Not Employed	10/22/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$800.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Oktibbeha County Federation of Democrati Mailing Address 60 Aztec Dr City, State, Zip Code Starkville, MS 39759-2083 Name of Employer (Required)	10/25/2023	\$500.00
Occupation (Required)	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Stephen Stray Mailing Address 418 River Pl City, State, Zip Code Jackson, MS 39211-3022 Name of Employer (Required) University of Mississippi Medical Center	10/25/2023	\$250.00
Occupation (Required) Medical Research	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed	10/06/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name R. W. Whitaker Jr Mailing Address 4206 Ridgemont Dr City, State, Zip Code Belden, MS 38826-9783 Name of Employer (Required) Whitaker Sales, Inc	10/16/2023	\$1,000.00
Occupation (Required) President	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/16/2023	\$10.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/26/2023	\$5.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rod Luther Mailing Address 13963 Highway 5 City, State, Zip Code Mountain View, AR 72560-8044 Name of Employer (Required) Not Employed	10/17/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$207.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leonard A. Blackwell II Mailing Address 11857 Lorraine Rd City, State, Zip Code Gulfport, MS 39503-3951 Name of Employer (Required) Brunini Law Firm	10/27/2023	\$150.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Mcinnis Mailing Address 2509 Promenade Blvd City, State, Zip Code Ocean Springs, MS 39564-8720 Name of Employer (Required) Not Employed	10/19/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Jenkins-Joffe Mailing Address 3825 Legation St NW City, State, Zip Code Washington, DC 20015-2701 Name of Employer (Required) Not Employed	10/19/2023	\$82.00
Occupation (Required) Retired	Aggregate year-to-date	\$742.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lynn Haspel Mailing Address 256 Eastbrooke St City, State, Zip Code Jackson, MS 39216-4716 Name of Employer (Required) Not Employed	10/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$269.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Burke Mailing Address 109 Allison Ct City, State, Zip Code Lansdale, PA 19446-1961 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/29/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Democratic Governors Association Mailing Address 1225 Eye St NW City, State, Zip Code Washington, DC 20005-3914 Name of Employer (Required)	10/20/2023	\$250,000.00
Aggregate year-to-date		\$5,850,171.72
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bethany Theilman Mailing Address 131 Redbud Trl City, State, Zip Code Brandon, MS 39047-6402 Name of Employer (Required) Diabetes Foundation of MS Occupation (Required) Secretary	10/20/2023	\$5.00
Aggregate year-to-date		\$272.10
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ricky Johnston Mailing Address 419 3rd St S City, State, Zip Code Columbus, MS 39701-5632 Name of Employer (Required) Gastroenterology Associates of Columbus Occupation (Required) Gastroenterologist	10/21/2023	\$50.00
Aggregate year-to-date		\$1,925.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dennis Greenia Mailing Address 4514 Keswick Rd City, State, Zip Code Baltimore, MD 21210-2515 Name of Employer (Required) Green America Occupation (Required) HR Director	10/02/2023	\$1,000.00
Aggregate year-to-date		\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paul Boudreau Mailing Address 2208 Church St City, State, Zip Code Oxford, MS 38655-4902 Name of Employer (Required) University of Mississippi Occupation (Required) Assistant Professor	10/22/2023	\$500.00
Aggregate year-to-date		\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joyce Leech Mailing Address 214 Main St S City, State, Zip Code Amory, MS 38821-4218 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/13/2023	\$50.00
Aggregate year-to-date		\$760.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Regina Quinn Mailing Address 728 N Congress St City, State, Zip Code Jackson, MS 39202-3008 Name of Employer (Required) Self Employed Occupation (Required) Attorney	10/13/2023	\$500.00
Aggregate year-to-date		\$1,550.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed	10/23/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie-Burl McLemore Mailing Address 7900 Michael Dr City, State, Zip Code Lake Cormorant, MS 38641-8211 Name of Employer (Required) Not Employed	10/04/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne Elkins Mailing Address 58 Hatcher Rd City, State, Zip Code Purvis, MS 39475-3234 Name of Employer (Required) Not Employed	10/05/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lee Carson Mailing Address 2288 Waggoner Rd City, State, Zip Code Carthage, MS 39051-9303 Name of Employer (Required) N. L. Carson Const	10/25/2023	\$100.00
Occupation (Required) Construction	Aggregate year-to-date	\$2,800.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/25/2023	\$130.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerutha Steptoe Mailing Address PO Box 1906 City, State, Zip Code Ridgeland, MS 39158-1906 Name of Employer (Required) Not Employed	10/16/2023	\$400.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ginny Troutt Mailing Address 185 Oakley Rd City, State, Zip Code Senatobia, MS 38668-6481 Name of Employer (Required) Not Employed	10/26/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed	10/17/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$4,625.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed	10/27/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Barbara M. Brandon Mailing Address 1005 4th Ave N City, State, Zip Code Columbus, MS 39701-4653 Name of Employer (Required) Not Employed	10/18/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ashley N. Wicks Mailing Address 63 Springridge Cir City, State, Zip Code Jackson, MS 39211-2903 Name of Employer (Required) Butler Snow	10/29/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,150.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Dale Pierce Mailing Address P0 City, State, Zip Code Aberdeen, MS 39730 Name of Employer (Required) Self Employed	10/29/2023	\$500.00
Occupation (Required) Accountant	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lise Pearlman Mailing Address 1147 Clarendon Cres City, State, Zip Code Oakland, CA 94610-1807 Name of Employer (Required) Self Employed	10/10/2023	\$50.00
Occupation (Required) Author	Aggregate year-to-date	\$405.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David M. Ott Mailing Address 310 S 22nd Ave City, State, Zip Code Hattiesburg, MS 39401-7313 Name of Employer (Required) Bryan Nelson P.A.	10/11/2023	\$200.00
Occupation (Required) Attorney	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/21/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold D. Copeland Mailing Address PO Box 631145 City, State, Zip Code Houston, TX 77263-1145 Name of Employer (Required) Not Employed	10/22/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$562.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Audrey Mcbride Mailing Address 503 Academy Rd City, State, Zip Code Starkville, MS 39759-4047 Name of Employer (Required) McBride & Co. Real Estate, Broker/Owner	10/22/2023	\$50.00
Occupation (Required) Realtor	Aggregate year-to-date	\$615.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jane Alexander Mailing Address 2015 E Northside Dr City, State, Zip Code Jackson, MS 39211-6125 Name of Employer (Required) Not Employed	10/23/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$433.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Makayla Hallmark Mailing Address 100 Regents Gate Ct City, State, Zip Code Simpsonville, SC 29681-3611 Name of Employer (Required) United Parcel Service	10/04/2023	\$250.00
Occupation (Required) Cashier	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/14/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Reed Hillen Mailing Address 2595 Mount Vernon Rd City, State, Zip Code Tupelo, MS 38804-7102 Name of Employer (Required) Hillen, Wicker & Tapscott, P.A.	10/05/2023	\$200.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,200.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alan Du Mailing Address 523 Franklin Ave City, State, Zip Code Brooklyn, NY 11238-6842 Name of Employer (Required) Facebook	10/15/2023	\$750.00
Occupation (Required) Research Engineer	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melanie Wadkins Mailing Address 304 Shiloh Dr City, State, Zip Code Oxford, MS 38655-5012 Name of Employer (Required) Not Employed	10/25/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Witherspoon Mailing Address 910 Lincoln Ave City, State, Zip Code Oxford, MS 38655-4328 Name of Employer (Required) Not Employed	10/25/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,050.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathryn L. Wiener Mailing Address 3858 Redbud Rd City, State, Zip Code Jackson, MS 39211-6711 Name of Employer (Required) Not Employed	10/16/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Santa Cruz Mailing Address 5825 Cedar Rd City, State, Zip Code Ocean Springs, MS 39564-2250 Name of Employer (Required) Not Employed	10/16/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$470.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John G. Green Mailing Address PO Box 2068 City, State, Zip Code Grenada, MS 38902-2068 Name of Employer (Required) Green Realty Management	10/27/2023	\$1,500.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Faye Cox Mailing Address 704 Northpointe Cv City, State, Zip Code Oxford, MS 38655-7708 Name of Employer (Required) Not Employed	10/18/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barry Bertolet Mailing Address 988 Charleston Blvd City, State, Zip Code Tupelo, MS 38801-8435 Name of Employer (Required) Cardiology Associates Occupation (Required) Physician	10/28/2023	\$500.00
Aggregate year-to-date		\$1,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roy D. Campbell III Mailing Address 835 Avondale St City, State, Zip Code Jackson, MS 39216-3316 Name of Employer (Required) Bradley Occupation (Required) Attorney	10/09/2023	\$1,000.00
Aggregate year-to-date		\$4,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joyce Leech Mailing Address 214 Main St S City, State, Zip Code Amory, MS 38821-4218 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/29/2023	\$25.00
Aggregate year-to-date		\$760.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Cox Mailing Address 12 Estate Dr City, State, Zip Code Long Beach, MS 39560-3912 Name of Employer (Required) Veterans Health Administration Occupation (Required) Psychologist	10/20/2023	\$50.00
Aggregate year-to-date		\$725.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Claudean Ervin Mailing Address 4989 W Northside Dr City, State, Zip Code Clinton, MS 39056-9402 Name of Employer (Required) US Dept of Housing and Urban Development	10/20/2023	\$50.00
Occupation (Required) Community Planning	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert M. Pugh Mailing Address 5924 Whitestone Rd City, State, Zip Code Jackson, MS 39206-2515 Name of Employer (Required) Not Employed	10/11/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Larry Hoellwarth Mailing Address 5510 N Magnolia Ave City, State, Zip Code Chicago, IL 60640-1307 Name of Employer (Required) Not Employed	10/21/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Galloway Mailing Address 17 Baytowne Row City, State, Zip Code Madison, MS 39110-9179 Name of Employer (Required) Not Employed	10/02/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,408.60

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anthony Collins Mailing Address 2310 Mariposa Dr City, State, Zip Code O Fallon, MO 63368-3571 Name of Employer (Required) Not Employed	10/03/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$344.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugenia M. Franklin Mailing Address 198 Patton Place Rd City, State, Zip Code Lexington, MS 39095-5802 Name of Employer (Required) Not Employed	10/23/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine	10/04/2023	\$20.00
Occupation (Required) Caretaker	Aggregate year-to-date	\$245.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stacy Evans Mailing Address 4825 County Road 23 City, State, Zip Code Louin, MS 39338-3367 Name of Employer (Required) SE Land Management LLC	10/24/2023	\$500.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$1,072.40

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John A. Waits Mailing Address 6609 Persimmon Tree Rd City, State, Zip Code Cabin John, MD 20818-1217 Name of Employer (Required) Not Employed	10/05/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Julie S. Harris Mailing Address 1208 Pine St City, State, Zip Code New Orleans, LA 70118-5219 Name of Employer (Required) Magnit/Workforce Logiq	10/25/2023	\$5.00
Occupation (Required) Foundation Consultant	Aggregate year-to-date	\$505.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nan Shiverdecker Mailing Address 306 Alabama St City, State, Zip Code New Albany, MS 38652-4137 Name of Employer (Required) Not Employed	10/25/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Vaughan Mcrae Mailing Address 1515 N State St City, State, Zip Code Jackson, MS 39202-1646 Name of Employer (Required) Not Employed	10/16/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David E. Rozier Jr Mailing Address PO Box 2388 City, State, Zip Code Oxford, MS 38655-7000 Name of Employer (Required) McAngus Goudelock & Courie	10/16/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie Steverson Mailing Address 2313 Farrell Cir City, State, Zip Code Gulfport, MS 39507-2222 Name of Employer (Required) Not Employed	10/16/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name R. Clark Webb Mailing Address 846 Van Duzer St City, State, Zip Code Staten Island, NY 10304-1816 Name of Employer (Required) Metropolitan Transportation Authority	10/07/2023	\$6.00
Occupation (Required) It Professional	Aggregate year-to-date	\$293.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Collins Mailing Address 1826 Ray St City, State, Zip Code Ocean Springs, MS 39564-2930 Name of Employer (Required) Not Employed	10/18/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,350.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Emilie Hall Mailing Address 17800 River Walk Dr City, State, Zip Code Vancleave, MS 39565-8342 Name of Employer (Required) Not Employed	10/09/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Helen R. Meek Mailing Address 1 Oak Pl City, State, Zip Code Oxford, MS 38655-2519 Name of Employer (Required) Oxford Publishing Inc.	10/10/2023	\$1,000.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Donald Henley Mailing Address 700 Harris St City, State, Zip Code Charlottesville, VA 22903-4584 Name of Employer (Required) Self Employed	10/10/2023	\$100.00
Occupation (Required) Musician	Aggregate year-to-date	\$950.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Luther Ott Mailing Address 4015 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3414 Name of Employer (Required) Not Employed	10/20/2023	\$2,500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed Occupation (Required) Accountant	10/21/2023	\$50.00
Aggregate year-to-date		\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patty Davis Mailing Address 2711 William Dr City, State, Zip Code Tupelo, MS 38801-8101 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/02/2023	\$100.00
Aggregate year-to-date		\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/12/2023	\$25.00
Aggregate year-to-date		\$1,072.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann White Mailing Address 3434 Mossey Cup Dr City, State, Zip Code Saltillo, MS 38866-5803 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/22/2023	\$10.00
Aggregate year-to-date		\$205.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Gambetta Mailing Address 130 Harvesters Sq City, State, Zip Code Tupelo, MS 38801-9510 Name of Employer (Required) Mueller Co.	10/03/2023	\$5.00
Occupation (Required) Engineer	Aggregate year-to-date	\$517.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lucy Dorsett Mailing Address 1702 N Gun Club Rd City, State, Zip Code Tupelo, MS 38801-0323 Name of Employer (Required) Not Employed	10/23/2023	\$300.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald L. Kilgore Mailing Address 435 Center Ave N City, State, Zip Code Philadelphia, MS 39350-2918 Name of Employer (Required) Self Employed	10/23/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$800.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jamie Amos Mailing Address 2109 Acklen Ave City, State, Zip Code Nashville, TN 37212-3501 Name of Employer (Required) Self Employed	10/04/2023	\$2,000.00
Occupation (Required) Film Producer	Aggregate year-to-date	\$12,250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed	10/14/2023	\$10.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$801.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James O. Nelson II Mailing Address 113 Excursion City, State, Zip Code Irvine, CA 92618-0819 Name of Employer (Required) First American Title Ins Co	10/24/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Spencer Mailing Address 120 District Blvd City, State, Zip Code Jackson, MS 39211-6387 Name of Employer (Required) Not Employed	10/24/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine	10/25/2023	\$10.00
Occupation (Required) Caretaker	Aggregate year-to-date	\$245.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Jenkins-Joffe Mailing Address 3825 Legation St NW City, State, Zip Code Washington, DC 20015-2701 Name of Employer (Required) Not Employed	10/25/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$742.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Drew Roberts Mailing Address 450 K St NW City, State, Zip Code Washington, DC 20001-2959 Name of Employer (Required) Latham & Watkins LLP	10/06/2023	\$311.40
Occupation (Required) Attorney	Aggregate year-to-date	\$311.40
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sheila Newtown Mailing Address 3893 County Route 10 City, State, Zip Code De Peyster, NY 13633-3405 Name of Employer (Required) Not Employed	10/16/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$355.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dale Lowery Mailing Address 611 Pennsylvania Ave SE City, State, Zip Code Washington, DC 20003-4303 Name of Employer (Required) Not Employed	10/16/2023	\$22.00
Occupation (Required) Retired	Aggregate year-to-date	\$242.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dale Lowery Mailing Address 611 Pennsylvania Ave SE City, State, Zip Code Washington, DC 20003-4303 Name of Employer (Required) Not Employed	10/07/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$242.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brown Services, LLC. Mailing Address 1024 Byrd Dr City, State, Zip Code Crystal Springs, MS 39059-9725 Name of Employer (Required)	10/27/2023	\$250.00
Occupation (Required)	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jak Smith Mailing Address PO Box 7213 City, State, Zip Code Tupelo, MS 38802-7213 Name of Employer (Required) Self Employed	10/18/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed	10/18/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$360.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles J. Mikhail Mailing Address PO Box 38 City, State, Zip Code Wiggins, MS 39577-0038 Name of Employer (Required) Self Employed	10/18/2023	\$5,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$20,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Francis Turner Mailing Address 166 Steep Holw City, State, Zip Code Hattiesburg, MS 39402-7004 Name of Employer (Required) Self Employed	10/28/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Pinkard Mailing Address 403 Brickworks Cir NE City, State, Zip Code Atlanta, GA 30307-5515 Name of Employer (Required) Coca-Cola	10/28/2023	\$250.00
Occupation (Required) Marketing Operations	Aggregate year-to-date	\$1,094.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Thormeyer Mailing Address 3113 Little Creek Ln City, State, Zip Code Alexandria, VA 22309-2125 Name of Employer (Required) Federal Energy Regulatory Commission	10/29/2023	\$50.00
Occupation (Required) Public Affairs	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Grantland Mailing Address 2400 Scott Dr NW City, State, Zip Code Hartselle, AL 35640-7771 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Cheryl Brownstein Mailing Address 497 Miles Patrick Rd City, State, Zip Code Winder, GA 30680-3511 Name of Employer (Required) Not Employed	10/12/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Donald Henley Mailing Address 700 Harris St City, State, Zip Code Charlottesville, VA 22903-4584 Name of Employer (Required) Self Employed	10/23/2023	\$250.00
Occupation (Required) Musician	Aggregate year-to-date	\$950.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/23/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Terri Dreyer Mailing Address 1317 Moss St City, State, Zip Code New Orleans, LA 70119-2905 Name of Employer (Required) NANO, LLC Occupation (Required) Managing Partner	10/24/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sibyl M. Child Mailing Address 1935 E Bourne Pl City, State, Zip Code Jackson, MS 39211-6714 Name of Employer (Required) Keifer's Occupation (Required) Manager	10/24/2023	\$100.00
Aggregate year-to-date		\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Gilmore Mailing Address 522 E 5th St City, State, Zip Code Corinth, MS 38834-3443 Name of Employer (Required) Magnolia Regional Health Center Occupation (Required) Physician	10/24/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brandy Burnette Mailing Address 7069 Tudor Ln City, State, Zip Code Horn Lake, MS 38637-1259 Name of Employer (Required) Young Williams Occupation (Required) Attorney	10/25/2023	\$15.00
Aggregate year-to-date		\$231.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Theresa Steinberger Mailing Address 909 Eastwood St City, State, Zip Code Pascagoula, MS 39567-7549 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/25/2023	\$100.00
Aggregate year-to-date		\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ray Johansmeier Mailing Address 753 E Second St City, State, Zip Code Pass Christian, MS 39571-4613 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/06/2023	\$200.00
Aggregate year-to-date		\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Marcin Mailing Address 1 Central Park W City, State, Zip Code New York, NY 10023-7703 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/26/2023	\$5,000.00
Aggregate year-to-date		\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Moore Mailing Address 7113 Flagstaff Ranch St City, State, Zip Code Las Vegas, NV 89166-7144 Name of Employer (Required) University of Mississippi Occupation (Required) Professor	10/07/2023	\$25.00
Aggregate year-to-date		\$340.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jay Murphy Mailing Address 121 Maison Deville City, State, Zip Code Starkville, MS 39759-4164 Name of Employer (Required) Starkville Properties	10/27/2023	\$100.00
Occupation (Required) Real Estate Broker	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carol Callaghan Mailing Address 4775 Village Dr City, State, Zip Code Grand Ledge, MI 48837-8112 Name of Employer (Required) Not Employed	10/27/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Liz Brister Mailing Address 4380 Brook Dr City, State, Zip Code Jackson, MS 39206-5931 Name of Employer (Required) Design4Good	10/08/2023	\$50.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael F. Fink Mailing Address 3439 Brae Bourn Dr City, State, Zip Code Huntingdon Vall, PA 19006-4003 Name of Employer (Required) Not Employed	10/29/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kenneth Mayfield Mailing Address 106 W Franklin St City, State, Zip Code Tupelo, MS 38804-3930 Name of Employer (Required) Mayfield Law Firm	10/10/2023	\$200.00
Occupation (Required) Attorney	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Blaine B. Eaton Mailing Address 503 Gambrell St City, State, Zip Code Taylorsville, MS 39168-4284 Name of Employer (Required) Southern Pine Electric Cooperative	10/01/2023	\$1,000.00
Occupation (Required) Director	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name The Baptist Law Firm PLLC Mailing Address 1305 Church Rd E City, State, Zip Code Southaven, MS 38671-9711 Name of Employer (Required)	10/21/2023	\$1,000.00
Occupation (Required)	Aggregate year-to-date	\$1,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jayne Buttross Mailing Address 329 E Mayes St City, State, Zip Code Jackson, MS 39206-5718 Name of Employer (Required) Not Employed	10/12/2023	\$200.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,450.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Liz Brister Mailing Address 4380 Brook Dr City, State, Zip Code Jackson, MS 39206-5931 Name of Employer (Required) Design4Good Occupation (Required) Business Owner	10/22/2023	\$50.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Douglas A. Horne Mailing Address 412 N Cedar Bluff Rd City, State, Zip Code Knoxville, TN 37923-3609 Name of Employer (Required) Horne Properties, Inc. Occupation (Required) President	10/03/2023	\$250.00
Aggregate year-to-date		\$77,900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Painter Mailing Address 203 Eastbrooke St City, State, Zip Code Jackson, MS 39216-4716 Name of Employer (Required) Self Employed Occupation (Required) Attorney	10/23/2023	\$250.00
Aggregate year-to-date		\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Lalli Mailing Address 140 State St City, State, Zip Code Brooklyn, NY 11201-6039 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/23/2023	\$15.00
Aggregate year-to-date		\$205.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ruth S. Lockhart Mailing Address 1804 Spruce St City, State, Zip Code Greenville, MS 38703-4438 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/04/2023	\$5.00
Aggregate year-to-date		\$261.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Meadors Mailing Address PO Box 369 City, State, Zip Code Kiln, MS 39556-0369 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/24/2023	\$25.00
Aggregate year-to-date		\$310.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/24/2023	\$50.00
Aggregate year-to-date		\$3,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	10/25/2023	\$6.00
Aggregate year-to-date		\$1,452.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cecil Simmons Mailing Address 91 Spring Valley Rd City, State, Zip Code Mathiston, MS 39752-9411 Name of Employer (Required) Not Employed	10/25/2023	\$5,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Smith Mailing Address 136 St Regis Dr City, State, Zip Code Madison, MS 39110-7798 Name of Employer (Required) Mississippi Baptist Medical Center	10/25/2023	\$50.00
Occupation (Required) Pharmacist	Aggregate year-to-date	\$846.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Benvenuto Mailing Address PO Box 2639 City, State, Zip Code Bay Saint Louis, MS 39521-2639 Name of Employer (Required) Not Employed	10/16/2023	\$1,500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$6,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Clifford Hudson Mailing Address 131 Park Ave City, State, Zip Code Oklahoma City, OK 73102-9051 Name of Employer (Required) Crowe & Dunlevy	10/26/2023	\$5,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$5,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anne Bailey Mailing Address 705 N Overlook Dr City, State, Zip Code Alexandria, VA 22305-1223 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$725.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Coleman Mailing Address 4013 Pinehaven Dr City, State, Zip Code Jackson, MS 39209-9736 Name of Employer (Required) Hinds County Board of Supervisors	10/08/2023	\$25.00
Occupation (Required) Fiscal Officer	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bradford Cobb Mailing Address 2750 Cobb Rd City, State, Zip Code Tunica, MS 38676-9433 Name of Employer (Required) Direct Management Group	10/18/2023	\$2,500.00
Occupation (Required) Talent Manager	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ted Wilson Mailing Address 364 Whitt Rd City, State, Zip Code Eupora, MS 39744-2531 Name of Employer (Required) Not Employed	10/28/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary-Martha Wilson Mailing Address 106 Saint Charles Ave City, State, Zip Code Starkville, MS 39759-2649 Name of Employer (Required) Not Employed	10/20/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Russell Hannon Mailing Address PO Box 153 City, State, Zip Code Amory, MS 38821-0153 Name of Employer (Required) Self Employed	10/11/2023	\$1,000.00
Occupation (Required) Sales	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sumati Thomas Mailing Address 4146 Crestview Pl City, State, Zip Code Jackson, MS 39211-6404 Name of Employer (Required) Change Research	10/11/2023	\$100.00
Occupation (Required) Analyst	Aggregate year-to-date	\$723.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jimmy Walker Mailing Address 750 Island Dr City, State, Zip Code Memphis, TN 38103-0801 Name of Employer (Required) Not Employed	10/01/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,200.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Denise Pilgrim Mailing Address 108 Bellingham Dr City, State, Zip Code Madison, MS 39110-8524 Name of Employer (Required) Not Employed	10/12/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$722.90
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Timothy H. Moore Mailing Address 426 Mannsdale Rd City, State, Zip Code Madison, MS 39110-7575 Name of Employer (Required) Mississippi Hospital Association	10/12/2023	\$1,000.00
Occupation (Required) President	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Frances L. Meyer Mailing Address 9750 Troon Ct City, State, Zip Code Blue Ash, OH 45241-3349 Name of Employer (Required) Not Employed	10/22/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Bob Malone Mailing Address PO Box 979 City, State, Zip Code Gulf Shores, AL 36547-0979 Name of Employer (Required) Coastal Real Estate and Development	10/03/2023	\$10.00
Occupation (Required) Realtor	Aggregate year-to-date	\$205.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John B. Clark Mailing Address 167 Rolling Meadows Rd City, State, Zip Code Ridgeland, MS 39157-9488 Name of Employer (Required) Not Employed	10/23/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$4,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed	10/23/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$360.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Nancy Groninger Mailing Address 5361 Saratoga St City, State, Zip Code Yorba Linda, CA 92886-4825 Name of Employer (Required) Not Employed	10/14/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$283.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kathleen Matthews Mailing Address 313 Water Garden Ter City, State, Zip Code Madison, MS 39110-6954 Name of Employer (Required) Not Employed	10/24/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$225.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Kaufman Mailing Address 156 County Road 303 City, State, Zip Code Iuka, MS 38852-7516 Name of Employer (Required) Not Employed	10/24/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$332.92
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Paula Temperilli Mailing Address 15231 Rainhollow Dr City, State, Zip Code Houston, TX 77070-1328 Name of Employer (Required) Not Employed	10/15/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$860.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ollie Bailey Mailing Address 122 Victoria Ln City, State, Zip Code Pass Christian, MS 39571-4824 Name of Employer (Required) State Farm	10/25/2023	\$500.00
Occupation (Required) Insurance	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Crymes G. Pittman Mailing Address 2213 Heritage Hill Dr City, State, Zip Code Jackson, MS 39211-5822 Name of Employer (Required) Self Employed	10/25/2023	\$10,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$10,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Nevels Mailing Address 614 Wendover Dr City, State, Zip Code Ridgeland, MS 39157-2849 Name of Employer (Required) Self Employed	10/25/2023	\$50.00
Occupation (Required) Medical Psychologist	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bob Malone Mailing Address PO Box 979 City, State, Zip Code Gulf Shores, AL 36547-0979 Name of Employer (Required) Coastal Real Estate and Development	10/25/2023	\$10.00
Occupation (Required) Realtor	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Wilhelm Mailing Address 2580 Fair Ave City, State, Zip Code Columbus, OH 43209-2115 Name of Employer (Required) Hecate Global	10/06/2023	\$500.00
Occupation (Required) CEO	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas A. Blanton Mailing Address 707 Hardy St City, State, Zip Code Hattiesburg, MS 39401-3666 Name of Employer (Required) Self Employed	10/06/2023	\$1,000.00
Occupation (Required) Oil Producer	Aggregate year-to-date	\$2,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Blake Macon Mailing Address 1407 Singleton Ave City, State, Zip Code Austin, TX 78702-1831 Name of Employer (Required) Defense Contract Management Agency	10/16/2023	\$25.00
Occupation (Required) Computer Engineer	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Lindsay Mailing Address 1256 Belvoir Pl City, State, Zip Code Jackson, MS 39202-1205 Name of Employer (Required) City of Jackson	10/26/2023	\$50.00
Occupation (Required) Elected Official	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Constance Roth Mailing Address 346 Main St City, State, Zip Code Bay Saint Louis, MS 39520-4412 Name of Employer (Required) Not Employed	10/26/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$215.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hannah Banks Mailing Address 107 Garland Rd City, State, Zip Code Newton, MA 02459-1741 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$280.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John R. Bradley Mailing Address 107 Philip Rd City, State, Zip Code Oxford, MS 38655-2013 Name of Employer (Required) Not Employed	10/08/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$10,560.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed	10/09/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$575.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed	10/19/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$360.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Leslie Steverson Mailing Address 2313 Farrell Cir City, State, Zip Code Gulfport, MS 39507-2222 Name of Employer (Required) Not Employed	10/29/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$425.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cheryl Brownstein Mailing Address 497 Miles Patrick Rd City, State, Zip Code Winder, GA 30680-3511 Name of Employer (Required) Not Employed	10/10/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Glen Davidson Jr Mailing Address 1123 Quail Creek Cv City, State, Zip Code Tupelo, MS 38801-7257 Name of Employer (Required) Not Employed	10/20/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$273.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jasper County Democratic Executive Commi Mailing Address 3331 County Road 24 City, State, Zip Code Hickory, MS 39332-2812 Name of Employer (Required)	10/01/2023	\$500.00
Occupation (Required)	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Kavanagh Mailing Address 134 Saint Jude St City, State, Zip Code Biloxi, MS 39530-3603 Name of Employer (Required) Tellabs	10/21/2023	\$100.00
Occupation (Required) Sales Vice President	Aggregate year-to-date	\$275.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/02/2023	\$5.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Rankin Mailing Address PO Box 219 City, State, Zip Code Braxton, MS 39044-0219 Name of Employer (Required) Not Employed	10/23/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda McLendon Mailing Address 4283 Highway 18 E City, State, Zip Code Quitman, MS 39355-8728 Name of Employer (Required) Ochsner Rush Health	10/23/2023	\$10.00
Occupation (Required) Midwife	Aggregate year-to-date	\$204.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Carroll Mailing Address 675 Beulah Grove Rd City, State, Zip Code Pontotoc, MS 38863-7704 Name of Employer (Required) Ashley Distribution Services	10/24/2023	\$25.00
Occupation (Required) Truck Driver	Aggregate year-to-date	\$1,195.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James D. Abbott Mailing Address 1107 E Wellsgate Dr City, State, Zip Code Oxford, MS 38655-5952 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/25/2023	\$300.00
Aggregate year-to-date		\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Maxie Gordon Mailing Address 5 Charleston Ave City, State, Zip Code Clinton, MS 39056-9776 Name of Employer (Required) Self Employed Occupation (Required) Physician	10/16/2023	\$50.00
Aggregate year-to-date		\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paul Carter Mailing Address 2615 Blackfoot Rd City, State, Zip Code Vancleave, MS 39565-8447 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/26/2023	\$50.00
Aggregate year-to-date		\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael T. Kayes Mailing Address 510 Evergreen Dr City, State, Zip Code Long Beach, MS 39560-3228 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/26/2023	\$300.00
Aggregate year-to-date		\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Somers Mailing Address 2008 Kostka Ln City, State, Zip Code Germantown, TN 38139-3448 Name of Employer (Required) FedEx	10/07/2023	\$100.00
Occupation (Required) Pilot	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Carol Halliburton Mailing Address 5032 Sunnyvale Dr City, State, Zip Code Jackson, MS 39211-4843 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$491.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Reba M. Greer Mailing Address 9005 Bristol Cv City, State, Zip Code Oxford, MS 38655-7086 Name of Employer (Required) Self Employed	10/09/2023	\$1,000.00
Occupation (Required) Teacher	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Keith Johnson Mailing Address PO Box 421 City, State, Zip Code Nesbit, MS 38651-0421 Name of Employer (Required) Not Employed	10/09/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,400.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Tuepker Mailing Address 103 Driftwood Dr City, State, Zip Code Long Beach, MS 39560-5810 Name of Employer (Required) Not Employed	10/19/2023	\$200.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dennis Bond Mailing Address 4463 East Dr City, State, Zip Code Belden, MS 38826-9597 Name of Employer (Required) Not Employed	10/20/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martha VanLandingham Mailing Address 4830 Old West Point Rd City, State, Zip Code Starkville, MS 39759-8190 Name of Employer (Required) Not Employed	10/20/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marsha Laufer Mailing Address 1750 S Ocean Blvd City, State, Zip Code Lantana, FL 33462-6222 Name of Employer (Required) Not Employed	10/11/2023	\$5,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$5,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth West Mailing Address PO Box 40 City, State, Zip Code Pickwick Dam, TN 38365-0040 Name of Employer (Required) Not Employed	10/21/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/21/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Len Tao Mailing Address 3948 Taney Ave City, State, Zip Code Alexandria, VA 22304-2622 Name of Employer (Required) Southwest Power Pool	10/12/2023	\$100.00
Occupation (Required) Policy Director	Aggregate year-to-date	\$1,350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold D. Copeland Mailing Address PO Box 631145 City, State, Zip Code Houston, TX 77263-1145 Name of Employer (Required) Not Employed	10/22/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$562.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed	10/22/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$575.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Garry Breland Mailing Address 138 Jervis Mims Rd City, State, Zip Code Hattiesburg, MS 39401-8854 Name of Employer (Required) Not Employed	10/03/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rachel Waide Mailing Address 1110 Belledeer Dr City, State, Zip Code Tupelo, MS 38804-1914 Name of Employer (Required) Waide and Associates, PA	10/13/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$6,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Hamilton Mailing Address 3701 58th Ave City, State, Zip Code Meridian, MS 39307-2905 Name of Employer (Required) Self Employed	10/14/2023	\$10.00
Occupation (Required) Restauranteur	Aggregate year-to-date	\$305.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara A. Easterling Mailing Address 415 Demontluzin Ave City, State, Zip Code Bay Saint Louis, MS 39520-3503 Name of Employer (Required) Self Employed	10/14/2023	\$500.00
Occupation (Required) Physician	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wes Ehrhardt Mailing Address 204 Sycamore St City, State, Zip Code Como, MS 38619-7330 Name of Employer (Required) Patterson & Ehrhardt PLLC	10/25/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$319.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rathi Iyer Mailing Address 130 Whippoorwill Rd City, State, Zip Code Brandon, MS 39047-6429 Name of Employer (Required) Not Employed	10/16/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Fred Kency Jr Mailing Address 503 Pinebrook Cv City, State, Zip Code Brandon, MS 39047-7827 Name of Employer (Required) Baptist Medical	10/27/2023	\$25.00
Occupation (Required) Physician	Aggregate year-to-date	\$485.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carl Black Mailing Address 1704 Poplar Blvd City, State, Zip Code Jackson, MS 39202-2119 Name of Employer (Required) Not Employed	10/27/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$243.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Boone Mailing Address 14 Mansfield Ter City, State, Zip Code Middletown, CT 06457-3723 Name of Employer (Required) Not Employed	10/27/2023	\$300.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margo Salone Mailing Address 71 Matherville Frost Bridge Rd City, State, Zip Code Shubuta, MS 39360-9201 Name of Employer (Required) Not Employed	10/08/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$272.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeanette R. Aday Mailing Address 2472 Heather Rdg City, State, Zip Code Southaven, MS 38672-9259 Name of Employer (Required) Not Employed	10/18/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church	10/28/2023	\$10.00
Occupation (Required) Clergy	Aggregate year-to-date	\$965.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary V. Risser Mailing Address 377 County Road 653B City, State, Zip Code Saltillo, MS 38866-5716 Name of Employer (Required) Not Employed	10/09/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Moore Mailing Address 7113 Flagstaff Ranch St City, State, Zip Code Las Vegas, NV 89166-7144 Name of Employer (Required) University of Mississippi	10/19/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$340.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	10/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,080.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	10/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,080.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Judy M. Guice Mailing Address 125 Holcomb Blvd City, State, Zip Code Ocean Springs, MS 39564-5028 Name of Employer (Required) Not Employed	10/29/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Kaufman Mailing Address 156 County Road 303 City, State, Zip Code Iuka, MS 38852-7516 Name of Employer (Required) Not Employed	10/10/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$332.92
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Henry L. Coaxum Jr Mailing Address 231 Harbor Cir City, State, Zip Code New Orleans, LA 70126-1103 Name of Employer (Required) Coaxum Enterprises, Inc.	10/21/2023	\$500.00
Occupation (Required) Restauranteur	Aggregate year-to-date	\$2,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Chris Powell Mailing Address PO Box 1263 City, State, Zip Code Cleveland, MS 38732-1263 Name of Employer (Required) Chris Powell Attorney at Law, PLLC	10/12/2023	\$250.00
Occupation (Required) attorney	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roy D. Campbell III Mailing Address 835 Avondale St City, State, Zip Code Jackson, MS 39216-3316 Name of Employer (Required) Bradley	10/22/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$4,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joe Love Mailing Address PO Box 802 City, State, Zip Code Summit, MS 39666-0802 Name of Employer (Required) Not Employed	10/03/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Felicia Brown-Williams Mailing Address 4010 Council Cir City, State, Zip Code Jackson, MS 39206-5813 Name of Employer (Required) David & Lucile Packard Foundation	10/14/2023	\$50.00
Occupation (Required) Advisor	Aggregate year-to-date	\$600.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Hogan Mailing Address 2026 Raymond Bolton Rd City, State, Zip Code Raymond, MS 39154-9501 Name of Employer (Required) Not Employed	10/24/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$475.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name James H. Mason Mailing Address 163 Lake Trail Dr City, State, Zip Code Flora, MS 39071-9500 Name of Employer (Required) Not Employed	10/05/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,625.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed	10/05/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed	10/15/2023	\$34.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,254.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marion County Democratic Executive Commi	10/25/2023	\$500.00
Mailing Address 123 Christopher Rd		
City, State, Zip Code Columbia, MS 39429-8179		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Louis Zachos	10/25/2023	\$25.00
Mailing Address 1202 Front St		
City, State, Zip Code Oxford, MS 38655-4904		
Name of Employer (Required) Law Offices of Susan G Zachos		
Occupation (Required) Attorney	Aggregate year-to-date	\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Molly Zuckerman	10/25/2023	\$50.00
Mailing Address 414 Meadow Rd		
City, State, Zip Code Starkville, MS 39759-5955		
Name of Employer (Required) Mississippi state university		
Occupation (Required) Professor	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugene Bramlett Jr	10/16/2023	\$25.00
Mailing Address 1123 College St		
City, State, Zip Code Columbus, MS 39701-5810		
Name of Employer (Required) Covenant United Methodist Church		
Occupation (Required) Minister	Aggregate year-to-date	\$1,250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marie McKellar Mailing Address 425 Davis St City, State, Zip Code Evanston, IL 60201-4830 Name of Employer (Required) Not Employed	10/16/2023	\$2,500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$12,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ashley N. Wicks Mailing Address 63 Springridge Cir City, State, Zip Code Jackson, MS 39211-2903 Name of Employer (Required) Butler Snow	10/07/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,150.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeannette Bolte Mailing Address PO Box 195 City, State, Zip Code Pass Christian, MS 39571-0195 Name of Employer (Required) Self Employed	10/27/2023	\$500.00
Occupation (Required) Psychologist	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Peter Norris Mailing Address 19 Blueberry Ridge Ln City, State, Zip Code Chilmark, MA 02535-2801 Name of Employer (Required) Not Employed	10/28/2023	\$261.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Conwill Mailing Address 1005 County Road 357 City, State, Zip Code New Albany, MS 38652-8981 Name of Employer (Required) Not Employed	10/19/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hudson Hickman Mailing Address 412 S Central Ave City, State, Zip Code New Albany, MS 38652-3701 Name of Employer (Required) Self Employed	10/29/2023	\$250.00
Occupation (Required) Film Producer	Aggregate year-to-date	\$1,200.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Democratic Governors Association Mailing Address 1225 Eye St NW City, State, Zip Code Washington, DC 20005-3914 Name of Employer (Required)	10/10/2023	\$900,000.00
Occupation (Required)	Aggregate year-to-date	\$5,850,171.72

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marcia B. King Mailing Address 550 Post Rd City, State, Zip Code Ridgeland, MS 39157-9678 Name of Employer (Required) Not Employed	10/10/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeffrey Williams Mailing Address 755 Hazel St City, State, Zip Code Livermore, CA 94550-2332 Name of Employer (Required) Not Employed	10/20/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Salmon Mailing Address 429 George Cossar Blvd City, State, Zip Code Charleston, MS 38921 Name of Employer (Required) Southern Discount Drugs	10/21/2023	\$2,500.00
Occupation (Required) President	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nikolaos Kritzilis Mailing Address 514 Fawn Cv City, State, Zip Code Canton, MS 39046-9417 Name of Employer (Required) C Spire	10/02/2023	\$100.00
Occupation (Required) Electrical Engineer	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Molly Macwade Mailing Address 4234 Brussels Dr City, State, Zip Code Jackson, MS 39211-6105 Name of Employer (Required) St. Philip's Occupation (Required) Episcopal Priest	10/02/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leigh Soares Mailing Address 2605 Pin Oak Dr City, State, Zip Code Starkville, MS 39759-3514 Name of Employer (Required) Mississippi State University Occupation (Required) Professor	10/22/2023	\$100.00
Aggregate year-to-date		\$475.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Deborah Clark Mailing Address 252 Hoyer Pace Rd City, State, Zip Code Conehatta, MS 39057-9545 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/13/2023	\$25.00
Aggregate year-to-date		\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Randy Hall Mailing Address 104 Peninsula Dr City, State, Zip Code Carriere, MS 39426-7738 Name of Employer (Required) Trace7 Services Occupation (Required) Consultant	10/13/2023	\$500.00
Aggregate year-to-date		\$1,250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Augusta Scattergood Mailing Address 3050 Military Rd NW City, State, Zip Code Washington, DC 20015-1393 Name of Employer (Required) Not Employed	10/14/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/24/2023	\$20.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Barry J. Walker Mailing Address PO Box 1023 City, State, Zip Code Tupelo, MS 38802-1023 Name of Employer (Required) Self Employed	10/05/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Liz Brister Mailing Address 4380 Brook Dr City, State, Zip Code Jackson, MS 39206-5931 Name of Employer (Required) Design4Good	10/15/2023	\$50.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carla Bing Mailing Address 8124 Maywood Dr City, State, Zip Code Olive Branch, MS 38654-9474 Name of Employer (Required) Not Employed	10/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark Goldberg Mailing Address 321 Cornerstone Dr City, State, Zip Code Brandon, MS 39042-2712 Name of Employer (Required) Cosmich Simmons & Brown PLLC	10/25/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ellen Lake Mailing Address 4230 Lakeshore Ave City, State, Zip Code Oakland, CA 94610-1136 Name of Employer (Required) Not Employed	10/07/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia I. Mitchell Mailing Address 1620 Anne Dr City, State, Zip Code Clarksdale, MS 38614-1802 Name of Employer (Required) Not Employed	10/17/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,100.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joanna Shows Mailing Address 1388 Lampton Hilltop Rd City, State, Zip Code Columbia, MS 39429-8035 Name of Employer (Required) Not Employed	10/27/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,175.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name L. T. Ezell Mailing Address 110 Mattie Florence Dr City, State, Zip Code Belden, MS 38826-7025 Name of Employer (Required) Not Employed	10/27/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joseph O'Gorman Mailing Address 99 Pittman Rd City, State, Zip Code Ocean Springs, MS 39564-1011 Name of Employer (Required) Self Employed	10/27/2023	\$250.00
Occupation (Required) Physician	Aggregate year-to-date	\$1,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brett Hildenbrand Mailing Address 2667 Marigold Cv City, State, Zip Code Tupelo, MS 38801-7114 Name of Employer (Required) Main St Family Dentistry	10/08/2023	\$1,000.00
Occupation (Required) Dentist	Aggregate year-to-date	\$3,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Leak Mailing Address 1864 Highway 24 E City, State, Zip Code Woodville, MS 39669-4219 Name of Employer (Required) Not Employed	10/19/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lera Jones Mailing Address 1246 Boggan Dr City, State, Zip Code Tupelo, MS 38801-4602 Name of Employer (Required) Not Employed	10/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	10/10/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,080.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Barbara Hogan Mailing Address 2026 Raymond Bolton Rd City, State, Zip Code Raymond, MS 39154-9501 Name of Employer (Required) Not Employed	10/10/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$475.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Smith Mailing Address PO Box 1865 City, State, Zip Code Gulfport, MS 39502-1865 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/11/2023	\$10.00
Aggregate year-to-date		\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathi Tomsky Mailing Address 1018 Morton Rounds City, State, Zip Code New Albany, MS 38652-6035 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/21/2023	\$25.00
Aggregate year-to-date		\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed Occupation (Required) Attorney	10/02/2023	\$100.00
Aggregate year-to-date		\$4,625.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jonathan Eichelberger Mailing Address 741 Gillespie St City, State, Zip Code Jackson, MS 39202-1712 Name of Employer (Required) Eichelberger Law Firm Occupation (Required) Attorney	10/22/2023	\$500.00
Aggregate year-to-date		\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed	10/03/2023	\$15.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$801.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sara Jackson Mailing Address 104 Bristol Way City, State, Zip Code Madison, MS 39110-5029 Name of Employer (Required) Takeda	10/23/2023	\$50.00
Occupation (Required) Sales	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Fortenberry Mailing Address 79 Deer Run City, State, Zip Code Columbus, MS 39705-1293 Name of Employer (Required) Pioneer	10/24/2023	\$50.00
Occupation (Required) Pharmacist	Aggregate year-to-date	\$315.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Christie Yoste Mailing Address 1514 19th Ave City, State, Zip Code Gulfport, MS 39501-2124 Name of Employer (Required) Not Employed	10/24/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed	10/15/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,072.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/25/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Andrew Jenkins Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Tech. Services	10/25/2023	\$25.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$6,475.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Sonny Bolls Mailing Address 1735 Jimmy Williams Rd City, State, Zip Code Clinton, MS 39056-9492 Name of Employer (Required) Not Employed	10/16/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stacy Callender Mailing Address 4047 Pine Hill Dr City, State, Zip Code Jackson, MS 39206-5739 Name of Employer (Required) MS Dept of Health	10/07/2023	\$100.00
Occupation (Required) Director	Aggregate year-to-date	\$1,100.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/07/2023	\$10.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Sens Mailing Address 580 Middle Rte City, State, Zip Code Gilmanon, NH 03237-4215 Name of Employer (Required) Not Employed	10/27/2023	\$15.00
Occupation (Required) Retired	Aggregate year-to-date	\$343.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dannie Ball Mailing Address 104 Bay View Ct City, State, Zip Code Bay Saint Louis, MS 39520-4602 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ernest G. Flora IV Mailing Address 142 Oxford Creek Dr City, State, Zip Code Oxford, MS 38655-2242 Name of Employer (Required) University of Mississippi	10/27/2023	\$5.00
Occupation (Required) Education	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Christopher Herron Mailing Address 1018 Byrd Dr City, State, Zip Code Crystal Springs, MS 39059-9725 Name of Employer (Required) Boys and Girls Clubs of Central Mississippi	10/27/2023	\$250.00
Occupation (Required) CFO	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patrick Evans Mailing Address 2576 Audubon Pl City, State, Zip Code Biloxi, MS 39531-3707 Name of Employer (Required) Self Employed	10/28/2023	\$25.00
Occupation (Required) Psychologist	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Oliver Clark Mailing Address 311 Coahoma Ave City, State, Zip Code Clarksdale, MS 38614-5364 Name of Employer (Required) Chapman, Lewis, And Swan	10/09/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$240.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/19/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sanford Johnson Mailing Address 643 W 2nd St City, State, Zip Code Clarksdale, MS 38614-3801 Name of Employer (Required) Mississippi First	10/19/2023	\$50.00
Occupation (Required) Public Policy Advocate	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marilyn Vandemark Mailing Address 412 Highpoint Dr City, State, Zip Code Diamondhead, MS 39525-3719 Name of Employer (Required) Not Employed	10/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dalaney Mecham Mailing Address 1600 30th Ave City, State, Zip Code Gulfport, MS 39501-2740 Name of Employer (Required) Self Employed	10/29/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Barrett Mailing Address 2086 Old Taylor Rd City, State, Zip Code Oxford, MS 38655-5500 Name of Employer (Required) Law Offices of Richard R. Barrett, PLLC	10/29/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Taylor Mailing Address 814 N Beach Blvd City, State, Zip Code Bay St Louis, MS 39520-3706 Name of Employer (Required) Self Employed	10/10/2023	\$250.00
Occupation (Required) Advertising Specialty Products	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark McLain Mailing Address 120 Hickory Gln City, State, Zip Code Madison, MS 39110-7605 Name of Employer (Required) Mississippi Neuropsychiatric Clinic	10/11/2023	\$50.00
Occupation (Required) Psychiatrist	Aggregate year-to-date	\$494.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sheila Newtown Mailing Address 3893 County Route 10 City, State, Zip Code De Peyster, NY 13633-3405 Name of Employer (Required) Not Employed	10/21/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$355.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Lynch Mailing Address 617 Camelia Trl City, State, Zip Code Brandon, MS 39047-6316 Name of Employer (Required) Not Employed	10/22/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,675.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Peter Norris Mailing Address 19 Blueberry Ridge Ln City, State, Zip Code Chilmark, MA 02535-2801 Name of Employer (Required) Not Employed	10/23/2023	\$139.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Miotke Mailing Address 1626 Francisco St City, State, Zip Code Berkeley, CA 94703-1255 Name of Employer (Required) Self Employed	10/23/2023	\$5.00
Occupation (Required) Musician	Aggregate year-to-date	\$526.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Lacavera Mailing Address 1459 Forbes Dr City, State, Zip Code Byram, MS 39272-9459 Name of Employer (Required) Eastpointe	10/23/2023	\$50.00
Occupation (Required) Utilization Mngmnt	Aggregate year-to-date	\$475.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Caleb Dana Mailing Address 103 Pinetrail Pl City, State, Zip Code Madison, MS 39110-8008 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/04/2023	\$25.00
Aggregate year-to-date		\$282.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann White Mailing Address 3434 Mossey Cup Dr City, State, Zip Code Saltillo, MS 38866-5803 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/04/2023	\$5.00
Aggregate year-to-date		\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ruth S. Lockhart Mailing Address 1804 Spruce St City, State, Zip Code Greenville, MS 38703-4438 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/14/2023	\$5.00
Aggregate year-to-date		\$261.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Larry Ward Mailing Address 4460 Clairmont Ave S City, State, Zip Code Birmingham, AL 35222-3756 Name of Employer (Required) Raymond James Morgan Keegan Occupation (Required) Manager	10/05/2023	\$250.00
Aggregate year-to-date		\$750.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Mercier Mailing Address 501 E Shiloh Rd City, State, Zip Code Corinth, MS 38834-3460 Name of Employer (Required) OfficePRO	10/15/2023	\$100.00
Occupation (Required) President	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John F. Lucas III Mailing Address 5 Mize Pl City, State, Zip Code Greenwood, MS 38930-2369 Name of Employer (Required) Greenwood Leflore Hospital	10/25/2023	\$100.00
Occupation (Required) Surgeon	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carl Thul Mailing Address 195 Spring Beauty Drr City, State, Zip Code Lawrenceville, NJ 08648 Name of Employer (Required) Not Employed	10/16/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$265.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mike P. Sturdivant Jr Mailing Address PO Box 230 City, State, Zip Code Glendora, MS 38928-0230 Name of Employer (Required) Self Employed	10/16/2023	\$500.00
Occupation (Required) Entrepreneur	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cathy C. Grace Mailing Address 1502 Winter Valley Dr City, State, Zip Code Tupelo, MS 38801-8120 Name of Employer (Required) North Mississippi Education Consortium	10/16/2023	\$50.00
Occupation (Required) Educator	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronnye Purvis Mailing Address 1107 56th St City, State, Zip Code Meridian, MS 39305-1443 Name of Employer (Required) Self Employed	10/26/2023	\$100.00
Occupation (Required) Physician	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed	10/27/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$501.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jimmie McGuire Mailing Address PO Box 808 City, State, Zip Code Waveland, MS 39576-0808 Name of Employer (Required) Self Employed	10/27/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dennis Sweet Mailing Address 158 E Pascagoula St City, State, Zip Code Jackson, MS 39201-3901 Name of Employer (Required) Self Employed	10/28/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roxann Jackson Mailing Address 1713 Reserve Dr City, State, Zip Code Clinton, MS 39056-5667 Name of Employer (Required) Submittable	10/09/2023	\$50.00
Occupation (Required) Campaign Support Lead	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bob Malone Mailing Address PO Box 979 City, State, Zip Code Gulf Shores, AL 36547-0979 Name of Employer (Required) Coastal Real Estate and Development	10/29/2023	\$10.00
Occupation (Required) Realtor	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Munford Mailing Address 5510 Wisconsin Ave City, State, Zip Code Chevy Chase, MD 20815-4403 Name of Employer (Required) Not Employed	10/10/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,275.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/21/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/21/2023	\$10.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Lynch Mailing Address 617 Camelia Trl City, State, Zip Code Brandon, MS 39047-6316 Name of Employer (Required) Not Employed	10/02/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,675.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lillie Randolph Mailing Address 117 Harris St City, State, Zip Code Nettleton, MS 38858-5964 Name of Employer (Required) Not Employed	10/03/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cristen Hemmins Mailing Address 101 County Road 178 City, State, Zip Code Oxford, MS 38655-8479 Name of Employer (Required) Self Employed	10/23/2023	\$50.00
Occupation (Required) Ad Sales	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/23/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,008.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karla Jurvetson Mailing Address 350 2nd St City, State, Zip Code Los Altos, CA 94022-3602 Name of Employer (Required) Self Employed	10/04/2023	\$50,000.00
Occupation (Required) Physician	Aggregate year-to-date	\$55,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	10/24/2023	\$15.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,452.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James M. Priest Jr Mailing Address 1316 Poplar Blvd City, State, Zip Code Jackson, MS 39202-2111 Name of Employer (Required) Self Employed	10/24/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Katz Mailing Address PO Box 410A City, State, Zip Code Saint Helena, CA 94574-0430 Name of Employer (Required) Self Employed	10/24/2023	\$17.00
Occupation (Required) Real Estate Investor	Aggregate year-to-date	\$244.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan M. Glisson Mailing Address 9 Meaders Ln City, State, Zip Code Oxford, MS 38655-6074 Name of Employer (Required) Self Employed	10/25/2023	\$100.00
Occupation (Required) Facilitator	Aggregate year-to-date	\$390.75
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Fisher-Wirth Mailing Address 610 N 14th St City, State, Zip Code Oxford, MS 38655-3220 Name of Employer (Required) Not Employed	10/16/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kate Lehrer Mailing Address 3556 Macomb St NW City, State, Zip Code Washington, DC 20016-3162 Name of Employer (Required) Self Employed	10/16/2023	\$50.00
Occupation (Required) Writer	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Q. Evans Mailing Address 321 Water Garden Ter City, State, Zip Code Madison, MS 39110-6954 Name of Employer (Required) Not Employed	10/26/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$515.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Troy Hill Mailing Address 511 Fox Bay Rdg City, State, Zip Code Brandon, MS 39047-8963 Name of Employer (Required) Self Employed	10/07/2023	\$59.75
Occupation (Required) Accountant	Aggregate year-to-date	\$653.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	10/27/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$490.00

ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carpenter Construction Company Mailing Address PO Box 1608 City, State, Zip Code Grenada, MS 38902-1608 Name of Employer (Required)	10/27/2023	\$2,500.00
Occupation (Required)	Aggregate year-to-date	\$7,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronnie Shows Mailing Address 20 Golf Club Rd City, State, Zip Code Hattiesburg, MS 39402-7953 Name of Employer (Required) Aux Initiatives, LLC	10/18/2023	\$300.00
Occupation (Required) Government Relations Consultant	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Minter Mailing Address 1246 Ostrander Rd City, State, Zip Code Kelso, WA 98626-9395 Name of Employer (Required) University of New Mexico	10/19/2023	\$20.00
Occupation (Required) Business Analyst	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/29/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed	10/10/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$501.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Sylvia G. Lenhoff Mailing Address 304 Dogwood Dr City, State, Zip Code Oxford, MS 38655-9670 Name of Employer (Required) Not Employed	10/12/2023	\$118.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$336.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Thomas Adams Mailing Address 4527 Union Ave City, State, Zip Code Nettleton, MS 38858-6037 Name of Employer (Required) Mississippi Public Service Commission	10/23/2023	\$25.00
Occupation (Required) Chief Investigator	Aggregate year-to-date	\$278.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Myron Labat Sr Mailing Address 217 Third St City, State, Zip Code Bay St Louis, MS 39520-4228 Name of Employer (Required) Not Employed	10/24/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$270.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dannie Ball Mailing Address 104 Bay View Ct City, State, Zip Code Bay Saint Louis, MS 39520-4602 Name of Employer (Required) Not Employed	10/24/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brenda Roberts Mailing Address 709 Northdale Pl City, State, Zip Code Brandon, MS 39047-5110 Name of Employer (Required) Not Employed	10/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$875.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Tom Schneidau Mailing Address 14000 W El Bonito Dr City, State, Zip Code Ocean Springs, MS 39564-2573 Name of Employer (Required) Not Employed	10/06/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lindbergh Porter Mailing Address 333 Bush St City, State, Zip Code San Francisco, CA 94104-2806 Name of Employer (Required) Self Employed	10/16/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tatia C. Kiser Mailing Address 35 Greystone Dr City, State, Zip Code Madison, MS 39110-9033 Name of Employer (Required) Dickerson Companies	10/07/2023	\$20.00
Occupation (Required) Accountant	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name English Devoss Mailing Address 121 Carriage Ln City, State, Zip Code Madison, MS 39110-9205 Name of Employer (Required) Little Cook Lab	10/27/2023	\$25.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Tyson Mailing Address 2694 E Randal Pl City, State, Zip Code Fayetteville, AR 72703-4900 Name of Employer (Required) Tyson Foods	10/27/2023	\$150.00
Occupation (Required) Member Board of Directors	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Gray-Lewis Mailing Address 101 Dendron Dr City, State, Zip Code Jackson, MS 39211-4713 Name of Employer (Required) Rimkus Consulting Group	10/08/2023	\$10.00
Occupation (Required) Forensic Engineer	Aggregate year-to-date	\$210.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda McLendon Mailing Address 4283 Highway 18 E City, State, Zip Code Quitman, MS 39355-8728 Name of Employer (Required) Ochsner Rush Health	10/19/2023	\$10.00
Occupation (Required) Midwife	Aggregate year-to-date	\$204.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John Gaudet Mailing Address 99 Midtown Sq City, State, Zip Code Hattiesburg, MS 39402-7513 Name of Employer (Required) Wesley Medical Center	10/10/2023	\$250.00
Occupation (Required) Physician	Aggregate year-to-date	\$1,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Evelyn Baugh Mailing Address 151 Cypress Rd City, State, Zip Code Byram, MS 39272-6051 Name of Employer (Required) UBC Hospital MS Clinic	10/02/2023	\$50.00
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Miriam Harrington Mailing Address 3800 Fairfax Dr City, State, Zip Code Arlington, VA 22203-1720 Name of Employer (Required) Not Employed	10/12/2023	\$29.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$463.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Gaudet Mailing Address 99 Midtown Sq City, State, Zip Code Hattiesburg, MS 39402-7513 Name of Employer (Required) Wesley Medical Center	10/12/2023	\$50.00
Occupation (Required) Physician	Aggregate year-to-date	\$1,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John C. Henegan Mailing Address 1921 E Bourne Pl City, State, Zip Code Jackson, MS 39211-6714 Name of Employer (Required) Not Employed	10/12/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$6,787.27
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jason Lee Shelton Mailing Address 1317 Wilson St City, State, Zip Code Tupelo, MS 38804-6017 Name of Employer (Required) General Services Administration	10/22/2023	\$500.00
Occupation (Required) Regional Administrator	Aggregate year-to-date	\$5,086.39
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed	10/13/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Feldman Mailing Address 915 Gillespie St City, State, Zip Code Jackson, MS 39202-1717 Name of Employer (Required) Not Employed	10/23/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Aleta Sullivan Mailing Address 1253 Scr 52 City, State, Zip Code Raleigh, MS 39153-5153 Name of Employer (Required) Not Employed	10/23/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Gambetta Mailing Address 130 Harvesters Sq City, State, Zip Code Tupelo, MS 38801-9510 Name of Employer (Required) Mueller Co.	10/04/2023	\$10.00
Occupation (Required) Engineer	Aggregate year-to-date	\$517.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Lewis Mailing Address 404 Galleria Dr City, State, Zip Code Oxford, MS 38655-4383 Name of Employer (Required) Self Employed	10/24/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$335.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sharon E. Crane Mailing Address 299 Bismark Rd City, State, Zip Code Jayess, MS 39641-3588 Name of Employer (Required) Not Employed	10/24/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Maureen McKerns Mailing Address 813 42nd Ave City, State, Zip Code Gulfport, MS 39501-1451 Name of Employer (Required) Not Employed	10/15/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$475.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mahalia Jackson Mailing Address 470 Hopson Pixley Rd City, State, Zip Code Clarksdale, MS 38614-9044 Name of Employer (Required) Aaron E. Henry Community Health Services Center	10/06/2023	\$15.00
Occupation (Required) Program Coordinator	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Rebecca Long Mailing Address 1496 W Lakeshore Dr City, State, Zip Code Starkville, MS 39759-6343 Name of Employer (Required) Mississippi State University	10/16/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$385.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/26/2023	\$25.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeffrey Blum Mailing Address 425 Riverside Dr City, State, Zip Code New York, NY 10025-7737 Name of Employer (Required) Not Employed	10/17/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Casey Mailing Address 229 Peachtree Hills Ave NE City, State, Zip Code Atlanta, GA 30305-4413 Name of Employer (Required) Not Employed	10/28/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,075.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Sweet Mailing Address 25 Kenmore St City, State, Zip Code Newton, MA 02459-2105 Name of Employer (Required) Not Employed	10/20/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$350.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William C. Eisenhauer Mailing Address 354 9th St NE City, State, Zip Code Atlanta, GA 30309-4209 Name of Employer (Required) Not Employed	10/20/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Claire Crews Mailing Address 101 County Road 413 City, State, Zip Code Oxford, MS 38655-7601 Name of Employer (Required) Not Employed	10/11/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William R. Ruffin Mailing Address PO Box 565 City, State, Zip Code Bay Springs, MS 39422-0565 Name of Employer (Required) Self Employed	10/01/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Jenkins Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Tech. Services	10/12/2023	\$50.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$6,475.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa M. Ross Mailing Address PO Box 11264 City, State, Zip Code Jackson, MS 39283-1264 Name of Employer (Required) Law Offices of Lisa M. Ross	10/12/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed	10/03/2023	\$2.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$501.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Heather Carver Mailing Address 3635 Baxter Rd City, State, Zip Code Joelton, TN 37080-8755 Name of Employer (Required) Carver	10/24/2023	\$5,000.00
Occupation (Required) CEO	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed	10/15/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,254.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harry Sellers Mailing Address 221 NW 62nd St City, State, Zip Code Seattle, WA 98107-2040 Name of Employer (Required) Not Employed	10/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Dickson Mailing Address 807 Sth 19Th Ave City, State, Zip Code Hattiesburg, MS 39401 Name of Employer (Required) Not Employed	10/06/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Catherine H. Jacobs Mailing Address 425 Porter Ave City, State, Zip Code Ocean Springs, MS 39564-3715 Name of Employer (Required) Law Offices of Catherine H. Jacobs	10/06/2023	\$300.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joseph Biderman Mailing Address 3117 Arroyo Seco City, State, Zip Code Palm Springs, CA 92264-9688 Name of Employer (Required) Joseph Biderman PC	10/16/2023	\$250.00
Occupation (Required) Mediator	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William F. Wallace Mailing Address 30 Saint Andrews City, State, Zip Code Hattiesburg, MS 39401-8214 Name of Employer (Required) Not Employed	10/16/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sharon Burke Mailing Address 84 Mesa Mount Olive Rd City, State, Zip Code Tylertown, MS 39667-5851 Name of Employer (Required) Not Employed	10/27/2023	\$45.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$206.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Don A. Zatroch Mailing Address 2366 17th Ave NW City, State, Zip Code Saint Paul, MN 55112-5204 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Douglas McKenzie Mailing Address 18160 Cottonwood Rd City, State, Zip Code Sunriver, OR 97707-9317 Name of Employer (Required) Not Employed	10/08/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Meg Sinervo Mailing Address 16 County Road 2055 City, State, Zip Code Oxford, MS 38655-8831 Name of Employer (Required) Meek Foundation	10/18/2023	\$500.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$816.75
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Glenn Oliver Mailing Address 5642 Gibson Rd City, State, Zip Code Vicksburg, MS 39180-6320 Name of Employer (Required) Not Employed	10/28/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$315.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/09/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/19/2023	\$31.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dorothy Bedford Mailing Address PO Box 512 City, State, Zip Code Valley Forge, PA 19481-0512 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Dannie Ball Mailing Address 104 Bay View Ct City, State, Zip Code Bay Saint Louis, MS 39520-4602 Name of Employer (Required) Not Employed	10/29/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mary-Martha Wilson Mailing Address 106 Saint Charles Ave City, State, Zip Code Starkville, MS 39759-2649 Name of Employer (Required) Not Employed	10/02/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert Rubin Mailing Address 911 Park Ave City, State, Zip Code New York, NY 10075-0385 Name of Employer (Required) Centerview Partners	10/12/2023	\$5,000.00
Occupation (Required) Senior Counselor	Aggregate year-to-date	\$11,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bob Malone Mailing Address PO Box 979 City, State, Zip Code Gulf Shores, AL 36547-0979 Name of Employer (Required) Coastal Real Estate and Development	10/12/2023	\$25.00
Occupation (Required) Realtor	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donna Martin Gambill Mailing Address 5758 Morganton Dr City, State, Zip Code Olive Branch, MS 38654-3545 Name of Employer (Required) Not Employed	10/22/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Zilla Spencer Mailing Address 382 Highway 341 S City, State, Zip Code Vardaman, MS 38878-9581 Name of Employer (Required) Not Employed	10/23/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$515.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Sumrall III Mailing Address 108 Brewer Dr City, State, Zip Code Senatobia, MS 38668-1500 Name of Employer (Required) University of Mississippi	10/14/2023	\$100.00
Occupation (Required) Professor	Aggregate year-to-date	\$600.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Irvin Mailing Address 4047 Wyandot St City, State, Zip Code Denver, CO 80211-2140 Name of Employer (Required) Strategic Programs, Inc.	10/26/2023	\$10.00
Occupation (Required) Corporate Secretary	Aggregate year-to-date	\$573.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/26/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joyce Aboussie Mailing Address 76 Overhills Dr City, State, Zip Code Saint Louis, MO 63124-1532 Name of Employer (Required) Telephone Contact Inc	10/26/2023	\$1,500.00
Occupation (Required) CEO	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard F. Scruggs Mailing Address 700 Faulkner Woods Pl City, State, Zip Code Oxford, MS 38655-4620 Name of Employer (Required) 2nd Chance MS	10/26/2023	\$10,000.00
Occupation (Required) Philanthropy	Aggregate year-to-date	\$22,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marie L. Lamb Mailing Address 127 Terrace Ave City, State, Zip Code Pass Christian, MS 39571-3510 Name of Employer (Required) Self Employed	10/26/2023	\$100.00
Occupation (Required) Artist	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ramona Bernard Mailing Address 301 Panola St City, State, Zip Code Water Valley, MS 38965-2424 Name of Employer (Required) Not Employed	10/17/2023	\$20.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$380.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Gray Mailing Address 3514 35th Ave City, State, Zip Code Meridian, MS 39307-3612 Name of Employer (Required) Not Employed	10/27/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ford Sutherlin Mailing Address 2211 Odonnell Blvd City, State, Zip Code Gulfport, MS 39507-2147 Name of Employer (Required) Not Employed	10/27/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Kohlhaas Mailing Address 410 Court St City, State, Zip Code Clarksdale, MS 38614-2716 Name of Employer (Required) Self Employed	10/18/2023	\$100.00
Occupation (Required) Teacher	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joyce Johnson Mailing Address 178 Victoria Pl City, State, Zip Code Madison, MS 39110-5502 Name of Employer (Required) Veterans Health Administration	10/28/2023	\$250.00
Occupation (Required) Physician	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/28/2023	\$25.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael B. McMahan Mailing Address 46 Longwood Dr City, State, Zip Code Hattiesburg, MS 39402-3083 Name of Employer (Required) Self Employed	10/09/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold D. Copeland Mailing Address PO Box 631145 City, State, Zip Code Houston, TX 77263-1145 Name of Employer (Required) Not Employed	10/09/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$562.50
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sierra Club Political Committee Mailing Address 2101 Webster St City, State, Zip Code Oakland, CA 94612-3546 Name of Employer (Required)	10/19/2023	\$25,000.00
Occupation (Required)	Aggregate year-to-date	\$25,093.40
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Ogden Mailing Address 11333 Corliss Ave City, State, Zip Code Charlotte, NC 28277-3316 Name of Employer (Required) Not Employed	10/19/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gloria Dilworth Mailing Address 16209 Cervantes Ct City, State, Zip Code Biloxi, MS 39532-3895 Name of Employer (Required) Not Employed	10/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name B. Easterling Mailing Address 415 Demontluzin Ave City, State, Zip Code Bay Saint Louis, MS 39520-3503 Name of Employer (Required) Not Employed	10/29/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Carroll Mailing Address 675 Beulah Grove Rd City, State, Zip Code Pontotoc, MS 38863-7704 Name of Employer (Required) Ashley Distribution Services	10/10/2023	\$50.00
Occupation (Required) Truck Driver	Aggregate year-to-date	\$1,195.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name W. M. Jones Mailing Address PO Box 282 City, State, Zip Code Petal, MS 39465-0282 Name of Employer (Required) Self Employed	10/12/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alvin Williams Mailing Address 508 Green Hills Dr City, State, Zip Code Hattiesburg, MS 39402-9208 Name of Employer (Required) University of South Alabama	10/12/2023	\$100.00
Occupation (Required) Professor	Aggregate year-to-date	\$550.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed	10/23/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name David Rushing Mailing Address 102 N Sunflower Ave City, State, Zip Code Indianola, MS 38751-2552 Name of Employer (Required) Not Employed	10/14/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$814.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Sarah Jones Mailing Address 2914 Beachview Dr City, State, Zip Code Ocean Springs, MS 39564-9404 Name of Employer (Required) US Navy	10/14/2023	\$100.00
Occupation (Required) Production Data Analyst	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Larry George Mailing Address 1999 Brasher Rd City, State, Zip Code Biloxi, MS 39532-4357 Name of Employer (Required) Not Employed	10/25/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Greg Ward Mailing Address 670 Highway 4 W City, State, Zip Code Ripley, MS 38663-8002 Name of Employer (Required) Not Employed	10/16/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael E. Stept Mailing Address 1675 Lakeland Dr City, State, Zip Code Jackson, MS 39216-4843 Name of Employer (Required) Not Employed	10/26/2023	\$300.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,800.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alexander Kassoff Mailing Address 1151 Greymont Ave City, State, Zip Code Jackson, MS 39202-2151 Name of Employer (Required) Thomson Reuters	10/07/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joanna Shows Mailing Address 1388 Lampton Hilltop Rd City, State, Zip Code Columbia, MS 39429-8035 Name of Employer (Required) Not Employed	10/17/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,175.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George L. Jordan Mailing Address 1087 Augusta Dr City, State, Zip Code Oxford, MS 38655-6187 Name of Employer (Required) Oxford Hotels & Resorts, LLC	10/27/2023	\$1,500.00
Occupation (Required) President	Aggregate year-to-date	\$19,001.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann White Mailing Address 3434 Mossey Cup Dr City, State, Zip Code Saltillo, MS 38866-5803 Name of Employer (Required) Not Employed	10/08/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James D. Bryan Mailing Address PO Box 636 City, State, Zip Code West Point, MS 39773-0636 Name of Employer (Required) Prairie Wildlife Preserve	10/18/2023	\$500.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$2,400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William T. Reed Mailing Address PO Box 446 City, State, Zip Code Pascagoula, MS 39568-0446 Name of Employer (Required) Self Employed	10/09/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name J. Michael Pearson Mailing Address 10401 Grosvenor Pl City, State, Zip Code North Bethesda, MD 20852-4632 Name of Employer (Required) Mathematical Association of America Occupation (Required) Executive Director	10/19/2023	\$100.00
Aggregate year-to-date		\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Inez Kelleher Mailing Address 914 N Country Club Ln City, State, Zip Code Biloxi, MS 39532-3204 Name of Employer (Required) Memorial Hospital Gulfport Occupation (Required) Physician	10/29/2023	\$100.00
Aggregate year-to-date		\$1,850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Catherine Dunham Mailing Address 1629 Treehouse Cir City, State, Zip Code Sarasota, FL 34231-7671 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/29/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martha Martin Mailing Address 136 Forrest Field Dr City, State, Zip Code Pontotoc, MS 38863-1552 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/10/2023	\$200.00
Aggregate year-to-date		\$600.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton	10/10/2023	\$25.00
Mailing Address 707 Randolph Ave SE		
City, State, Zip Code Huntsville, AL 35801-3606		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jacqueline Amos	10/20/2023	\$10.00
Mailing Address 168 Kilkenny Blvd		
City, State, Zip Code Jackson, MS 39209-3744		
Name of Employer (Required) City of Canton		
Occupation (Required) City Administrator	Aggregate year-to-date	\$410.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Irvin	10/01/2023	\$40.00
Mailing Address 4047 Wyandot St		
City, State, Zip Code Denver, CO 80211-2140		
Name of Employer (Required) Strategic Programs, Inc.		
Occupation (Required) Corporate Secretary	Aggregate year-to-date	\$573.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Finnell	10/12/2023	\$1,000.00
Mailing Address PO Box 63		
City, State, Zip Code Rome, GA 30162-0063		
Name of Employer (Required) The Finnell Firm		
Occupation (Required) attorney	Aggregate year-to-date	\$2,100.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/13/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$530.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Sullivan Mailing Address 16 Notre Dame Ave City, State, Zip Code Cambridge, MA 02140-2506 Name of Employer (Required) Self Employed	10/23/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/24/2023	\$10.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name United Steelworkers District 9 Mailing Address 1413 Thompson Cir City, State, Zip Code Gardendale, AL 35071-2953 Name of Employer (Required)	10/25/2023	\$5,000.00
Occupation (Required)	Aggregate year-to-date	\$5,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Katherine Gross Mailing Address 19 Arlington St City, State, Zip Code Cambridge, MA 02140-2701 Name of Employer (Required) The Charlotte Foundation	10/25/2023	\$1,000.00
Occupation (Required) Director	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Maureen McKerns Mailing Address 813 42nd Ave City, State, Zip Code Gulfport, MS 39501-1451 Name of Employer (Required) Not Employed	10/07/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$475.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	10/07/2023	\$31.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,452.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	10/17/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,080.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronnie Musgrove Mailing Address 135 Mayfield City, State, Zip Code Oxford, MS 38655-1215 Name of Employer (Required) MusgroveSmith Law	10/27/2023	\$2,500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$7,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Gorvine Mailing Address 710 Camp St City, State, Zip Code Hattiesburg, MS 39401-5029 Name of Employer (Required) Not Employed	10/28/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mozella P. Conville Mailing Address 104 Cherokee Ct City, State, Zip Code Hattiesburg, MS 39401-7036 Name of Employer (Required) Not Employed	10/19/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Liz Brister Mailing Address 4380 Brook Dr City, State, Zip Code Jackson, MS 39206-5931 Name of Employer (Required) Design4Good	10/29/2023	\$50.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Peter Smith Mailing Address 403 Whippoorwill Rd City, State, Zip Code Brandon, MS 39047-6434 Name of Employer (Required) Not Employed	10/29/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Brevard Mailing Address 805 Oak Grove Rd City, State, Zip Code Tupelo, MS 38804-2031 Name of Employer (Required) B & B Concrete Co., Inc.	10/29/2023	\$1,000.00
Occupation (Required) Chairman	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/10/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hope Devenney Mailing Address 117 Honeysuckle Ln City, State, Zip Code Columbus, MS 39705-1218 Name of Employer (Required) Not Employed	10/20/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Reginald Rodges Mailing Address 124 North St City, State, Zip Code Cleveland, MS 38732-2744 Name of Employer (Required) Chiro/Elite Med Back Institute	10/20/2023	\$250.00
Occupation (Required) Chiropractor	Aggregate year-to-date	\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nancy Loftus Mailing Address 20329 Longview Rd City, State, Zip Code Long Beach, MS 39560-9026 Name of Employer (Required) Catholic Charities of Southern Mississippi	10/22/2023	\$250.00
Occupation (Required) Social Worker	Aggregate year-to-date	\$1,276.40
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Don A. Zatroch Mailing Address 2366 17th Ave NW City, State, Zip Code Saint Paul, MN 55112-5204 Name of Employer (Required) Not Employed	10/03/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ouida Meruvia Mailing Address 1 Dr Martin Luther King Jr Avenue Apt City, State, Zip Code Memphis, TN 38103 Name of Employer (Required) US Dept of Justice	10/13/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Luther Ragin Jr Mailing Address 160 Cabrini Blvd City, State, Zip Code New York, NY 10033-1143 Name of Employer (Required) Not Employed	10/23/2023	\$150.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name David Rozier Mailing Address 303 Woodland Hills Dr City, State, Zip Code Oxford, MS 38655-8429 Name of Employer (Required) MGC Law	10/24/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jacqueline Shrago Mailing Address 3604 Woodmont Blvd City, State, Zip Code Nashville, TN 37215-1828 Name of Employer (Required) Not Employed	10/05/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Tor Kwembe Mailing Address 4100 Poplar Ave City, State, Zip Code Richton Park, IL 60471-1236 Name of Employer (Required) Jackson State University	10/05/2023	\$5.00
Occupation (Required) Professor	Aggregate year-to-date	\$305.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gratia Karmes Mailing Address 417 Chapin St City, State, Zip Code Starkville, MS 39759-2620 Name of Employer (Required) Not Employed	10/15/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$520.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Russell Smith Mailing Address 158 Arlington Rd City, State, Zip Code Beaumont, MS 39423-2617 Name of Employer (Required) Bentley Systems, Inc.	10/15/2023	\$250.00
Occupation (Required) Software Development Manager	Aggregate year-to-date	\$1,091.40
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Peterman Mailing Address 1224 Ridge Rd City, State, Zip Code Perkinston, MS 39573-5925 Name of Employer (Required) Not Employed	10/16/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jacob Knight Mailing Address 6873 Sweetclover Dr City, State, Zip Code Ocean Springs, MS 39564-5079 Name of Employer (Required) JSR Micro	10/26/2023	\$25.00
Occupation (Required) Software Engineer	Aggregate year-to-date	\$375.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cari White Mailing Address 92 -1553 Aliinui Dr City, State, Zip Code Kapolei, HI 96707-2228 Name of Employer (Required) Not Employed	10/17/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Michelle Harvey Mailing Address 903 Maplewood Cv City, State, Zip Code Oxford, MS 38655-5457 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Hugh Parker Mailing Address 113 Royal Garden Ter City, State, Zip Code Madison, MS 39110-7635 Name of Employer (Required) Not Employed	10/08/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,628.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/18/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carl Thul Mailing Address 195 Spring Beauty Drr City, State, Zip Code Lawrenceville, NJ 08648 Name of Employer (Required) Not Employed	10/19/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$265.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name David Boonin Mailing Address 203 Riverview Rd City, State, Zip Code Swarthmore, PA 19081-1217 Name of Employer (Required) Self Employed	10/29/2023	\$50.00
Occupation (Required) Economist	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Betty D. Williams Mailing Address 254 Harding Pl City, State, Zip Code Nashville, TN 37205-3727 Name of Employer (Required) Not Employed	10/29/2023	\$2,500.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ann Fisher-Wirth Mailing Address 610 N 14th St City, State, Zip Code Oxford, MS 38655-3220 Name of Employer (Required) Not Employed	10/10/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Francis Turner Mailing Address 166 Steep Holw City, State, Zip Code Hattiesburg, MS 39402-7004 Name of Employer (Required) Self Employed	10/10/2023	\$375.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lindsey White Harris Mailing Address 2224 Sheffield Dr City, State, Zip Code Jackson, MS 39211-5852 Name of Employer (Required) MS Main Street Association	10/20/2023	\$50.00
Occupation (Required) Director of Grants and Special Projects	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William T. Buchanan Mailing Address 119 Belle Pointe City, State, Zip Code Madison, MS 39110-8287 Name of Employer (Required) Not Employed	10/11/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$290.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Francis Turner Mailing Address 166 Steep Holw City, State, Zip Code Hattiesburg, MS 39402-7004 Name of Employer (Required) Self Employed	10/21/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Byron R. Trauger Mailing Address 511 Union St City, State, Zip Code Nashville, TN 37219-1743 Name of Employer (Required) Trauger and Tuke Occupation (Required) Attorney	10/12/2023	\$500.00
Aggregate year-to-date		\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gary Bailey Mailing Address 23441 Arcadia Farm Rd City, State, Zip Code Pass Christian, MS 39571-6003 Name of Employer (Required) Bailey Architecture Occupation (Required) Architect	10/23/2023	\$1,500.00
Aggregate year-to-date		\$6,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco Occupation (Required) Laborer	10/14/2023	\$10.00
Aggregate year-to-date		\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edward Bogen Mailing Address 200 Washington Ave City, State, Zip Code Oxford, MS 38655-2113 Name of Employer (Required) Tannehill & Carmean PLLC Occupation (Required) Attorney	10/05/2023	\$2,500.00
Aggregate year-to-date		\$2,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edward McDonnell Mailing Address 518 Huntington Dr City, State, Zip Code Madison, MS 39110-9578 Name of Employer (Required) Not Employed	10/07/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathi Tomsky Mailing Address 1018 Morton Rounds City, State, Zip Code New Albany, MS 38652-6035 Name of Employer (Required) Not Employed	10/07/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Aris Economides Mailing Address 574 Bedford Rd City, State, Zip Code Sleepy Hollow, NY 10591-1214 Name of Employer (Required) Regeneron Pharmaceuticals	10/17/2023	\$250.00
Occupation (Required) Vice President	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leesa Golden Mailing Address 435 Humphries Cove Rd City, State, Zip Code West Point, MS 39773-8212 Name of Employer (Required) Not Employed	10/17/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed	10/27/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,254.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Linda McLendon Mailing Address 4283 Highway 18 E City, State, Zip Code Quitman, MS 39355-8728 Name of Employer (Required) Ochsner Rush Health	10/08/2023	\$10.00
Occupation (Required) Midwife	Aggregate year-to-date	\$204.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name David R. Mann Mailing Address 316 Sonoma Cv City, State, Zip Code Madison, MS 39110-9549 Name of Employer (Required) Not Employed	10/28/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Angela Thomas Mailing Address 1060 E County Line Rd City, State, Zip Code Ridgeland, MS 39157-1937 Name of Employer (Required) Self Employed	10/09/2023	\$1,000.00
Occupation (Required) Author	Aggregate year-to-date	\$4,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Deirdre Phillips Mailing Address 200 Jefferson Rdg City, State, Zip Code Ridgeland, MS 39157-9101 Name of Employer (Required) Delta Health System	10/09/2023	\$50.00
Occupation (Required) Physician	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Larry Hoellwarth Mailing Address 5510 N Magnolia Ave City, State, Zip Code Chicago, IL 60640-1307 Name of Employer (Required) Not Employed	10/19/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Desiree Hensley Mailing Address 210 Longest Rd City, State, Zip Code Oxford, MS 38655-2216 Name of Employer (Required) University of Mississippi School of Law	10/20/2023	\$100.00
Occupation (Required) Professor	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	10/20/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$490.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/11/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Sandlin Mailing Address 303 Robbers Trce City, State, Zip Code Ridgeland, MS 39157-8773 Name of Employer (Required) Not Employed	10/02/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$305.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marilyn Vandemark Mailing Address 412 Highpoint Dr City, State, Zip Code Diamondhead, MS 39525-3719 Name of Employer (Required) Not Employed	10/12/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Carroll Mailing Address 675 Beulah Grove Rd City, State, Zip Code Pontotoc, MS 38863-7704 Name of Employer (Required) Ashley Distribution Services	10/22/2023	\$50.00
Occupation (Required) Truck Driver	Aggregate year-to-date	\$1,195.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/03/2023	\$50.00
Aggregate year-to-date		\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathy Howard Mailing Address 1213 Huntcliff Way City, State, Zip Code Clinton, MS 39056-3425 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/23/2023	\$25.00
Aggregate year-to-date		\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Keith Johnson Mailing Address PO Box 421 City, State, Zip Code Nesbit, MS 38651-0421 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/14/2023	\$50.00
Aggregate year-to-date		\$1,400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nicole Burnett Mailing Address 736 Central Ave City, State, Zip Code Sykesville, MD 21784-7509 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/25/2023	\$5.00
Aggregate year-to-date		\$235.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Hendrick Mailing Address 968 Bellevue Pl City, State, Zip Code Jackson, MS 39202-2786 Name of Employer (Required) Not Employed	10/16/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard B. Schwartz Mailing Address PO Box 3949 City, State, Zip Code Jackson, MS 39207-3949 Name of Employer (Required) Schwartz & Associates	10/16/2023	\$5,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$30,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Austin Mailing Address 1435 Saint Ann St City, State, Zip Code Jackson, MS 39202-1847 Name of Employer (Required) Not Employed	10/27/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gail Linson Mailing Address 133 Northshore Pt City, State, Zip Code Madison, MS 39110-7272 Name of Employer (Required) Not Employed	10/18/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$410.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anthony Collins Mailing Address 2310 Mariposa Dr City, State, Zip Code O Fallon, MO 63368-3571 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$344.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gail Tapscott Mailing Address 1711 Anderson Rd City, State, Zip Code Oxford, MS 38655-2535 Name of Employer (Required) Not Employed	10/28/2023	\$150.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed	10/19/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,072.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Jenkins Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Tech. Services	10/19/2023	\$100.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$6,475.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joey D. Dumas Mailing Address 14239 Perdido Key Dr City, State, Zip Code Pensacola, FL 32507-5236 Name of Employer (Required) Dumas Law Firm, LLC	10/10/2023	\$5,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$27,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Claude J. Gunter Mailing Address 1315 Pierce Ave City, State, Zip Code Oxford, MS 38655-4433 Name of Employer (Required) Not Employed	10/23/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sheila Newtown Mailing Address 3893 County Route 10 City, State, Zip Code De Peyster, NY 13633-3405 Name of Employer (Required) Not Employed	10/14/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$355.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Page Mailing Address 855 El Camino Real City, State, Zip Code Palo Alto, CA 94301-2326 Name of Employer (Required) Anthropocene Institute	10/24/2023	\$2,500.00
Occupation (Required) Vice President Operations	Aggregate year-to-date	\$2,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cooper Morrison Mailing Address 2335 Eastover Dr City, State, Zip Code Jackson, MS 39211-6724 Name of Employer (Required) Self Employed	10/25/2023	\$500.00
Occupation (Required) Real Estate	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carter Dobbs Mailing Address PO Box 517 City, State, Zip Code Amory, MS 38821-0517 Name of Employer (Required) Carter Dobbs	10/25/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Davis Mailing Address 900 Olde Creek Ln City, State, Zip Code Oxford, MS 38655-4422 Name of Employer (Required) Not Employed	10/16/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Beth Stoor Mailing Address 9314 SW 97th Ln City, State, Zip Code Ocala, FL 34481-7573 Name of Employer (Required) Not Employed	10/16/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$305.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathleen Holmes Mailing Address 330 Crestmont Cv City, State, Zip Code Cordova, TN 38018-6904 Name of Employer (Required) Not Employed	10/26/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$305.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ronald Unz Mailing Address 2535 Wright Rd City, State, Zip Code Steens, MS 39766-9129 Name of Employer (Required) Mississippi State University	10/07/2023	\$5.00
Occupation (Required) Scientist	Aggregate year-to-date	\$340.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Charles Benvenuto Mailing Address PO Box 2639 City, State, Zip Code Bay Saint Louis, MS 39521-2639 Name of Employer (Required) Not Employed	10/27/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$6,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Randy Patterson Mailing Address 1603 Sycamore St City, State, Zip Code Murray, KY 42071-2223 Name of Employer (Required) Not Employed	10/28/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Virден Jones Mailing Address 686 Hazelton Dr City, State, Zip Code Madison, MS 39110-7332 Name of Employer (Required) Not Employed	10/28/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,698.90
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name David Z. Scruggs Mailing Address 508 Fazio Drive Extended City, State, Zip Code Oxford, MS 38655-2771 Name of Employer (Required) 2nd Chance MS, Inc.	10/28/2023	\$2,500.00
Occupation (Required) Executive Director	Aggregate year-to-date	\$8,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Michael McConnell Mailing Address 20310 Paseo Del Campo City, State, Zip Code Porter Ranch, CA 91326-4325 Name of Employer (Required) Not Employed	10/19/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/29/2023	\$35.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$530.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carol Hartman Mailing Address 254 Forest Lake Dr City, State, Zip Code Madison, MS 39110-9421 Name of Employer (Required) Self Employed	10/10/2023	\$100.00
Occupation (Required) Accountant	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine	10/11/2023	\$10.00
Occupation (Required) Caretaker	Aggregate year-to-date	\$245.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/22/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Allan Benglen Mailing Address 1725 Forrest Hill Dr City, State, Zip Code Columbus, MS 39701-3530 Name of Employer (Required) Not Employed	10/13/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,050.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Moira Crone Mailing Address 2822 Burgundy St City, State, Zip Code New Orleans, LA 70117-7308 Name of Employer (Required) Not Employed	10/23/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Q. Evans Mailing Address 321 Water Garden Ter City, State, Zip Code Madison, MS 39110-6954 Name of Employer (Required) Not Employed	10/23/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$515.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	10/14/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,080.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugene Perrier Mailing Address 5540 Gibson Rd City, State, Zip Code Vicksburg, MS 39180-6318 Name of Employer (Required) Self Employed	10/24/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$400.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rod Luther Mailing Address 13963 Highway 5 City, State, Zip Code Mountain View, AR 72560-8044 Name of Employer (Required) Not Employed	10/05/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$207.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Smith Mailing Address PO Box 1865 City, State, Zip Code Gulfport, MS 39502-1865 Name of Employer (Required) Not Employed	10/25/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gloria Dilworth Mailing Address 16209 Cervantes Ct City, State, Zip Code Biloxi, MS 39532-3895 Name of Employer (Required) Not Employed	10/06/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barry Boothe Mailing Address 2435 Divisadero St City, State, Zip Code San Francisco, CA 94115-1117 Name of Employer (Required) Not Employed	10/26/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	10/17/2023	\$3.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$490.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Hamilton Mailing Address 3701 58th Ave City, State, Zip Code Meridian, MS 39307-2905 Name of Employer (Required) Self Employed	10/28/2023	\$10.00
Occupation (Required) Restauranteur	Aggregate year-to-date	\$305.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Benjamin Bailey Mailing Address 1300 E Lafayette St City, State, Zip Code Detroit, MI 48207-2921 Name of Employer (Required) Doner	10/28/2023	\$25.00
Occupation (Required) Advertising	Aggregate year-to-date	\$425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anthony Collins Mailing Address 2310 Mariposa Dr City, State, Zip Code O Fallon, MO 63368-3571 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$344.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Troy Hill Mailing Address 511 Fox Bay Rdg City, State, Zip Code Brandon, MS 39047-8963 Name of Employer (Required) Self Employed Occupation (Required) Accountant	10/19/2023	\$59.75
Aggregate year-to-date		\$653.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/29/2023	\$10.00
Aggregate year-to-date		\$1,080.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leann Hines Mailing Address 719 Sumner Ave City, State, Zip Code Greenwood, MS 38930-2507 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/10/2023	\$100.00
Aggregate year-to-date		\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert M. Pugh Mailing Address 5924 Whitestone Rd City, State, Zip Code Jackson, MS 39206-2515 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/12/2023	\$100.00
Aggregate year-to-date		\$600.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	10/03/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$490.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Janis Shibata Mailing Address 10433 Larwin Ave City, State, Zip Code Chatsworth, CA 91311-2059 Name of Employer (Required) Self Employed	10/13/2023	\$50.00
Occupation (Required) Insurance Broker	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lucile M. Cliff Ochs Mailing Address 142 County Road 271 City, State, Zip Code Oxford, MS 38655-9207 Name of Employer (Required) Not Employed	10/23/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Donald Sittman Mailing Address 1822 Devine St City, State, Zip Code Jackson, MS 39202-1317 Name of Employer (Required) Not Employed	10/23/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,700.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alysson Mills Mailing Address 1441 Felicity St City, State, Zip Code New Orleans, LA 70130-5201 Name of Employer (Required) Self Employed	10/24/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anne Buffington Mailing Address 249 Lincoln Dr City, State, Zip Code Starkville, MS 39759-3690 Name of Employer (Required) Self Employed	10/05/2023	\$25.00
Occupation (Required) Writer	Aggregate year-to-date	\$212.30
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janet Scott Mailing Address 603 Troon Rd City, State, Zip Code Oxford, MS 38655-3596 Name of Employer (Required) Not Employed	10/25/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$11,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Locke Barkley Mailing Address 3821 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3410 Name of Employer (Required) Self Employed	10/25/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$350.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Fluker Mailing Address 404 Huntington Dr City, State, Zip Code Jackson, MS 39272-4486 Name of Employer (Required) Not Employed	10/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Karen Kirkman Mailing Address 10231 County Road 200 City, State, Zip Code Falkner, MS 38629-9700 Name of Employer (Required) Not Employed	10/25/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$207.05
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Hope Devenney Mailing Address 117 Honeysuckle Ln City, State, Zip Code Columbus, MS 39705-1218 Name of Employer (Required) Not Employed	10/06/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lacey Sullivan Mailing Address 3505 Sandpiper Ct City, State, Zip Code Ocean Springs, MS 39564-1206 Name of Employer (Required) Singing River pathology	10/26/2023	\$100.00
Occupation (Required) Physician	Aggregate year-to-date	\$300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Mendelson Mailing Address 627 N Cherokee Ave City, State, Zip Code Los Angeles, CA 90004-1008 Name of Employer (Required) Seyfarth Shaw LLP	10/29/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hugh Parker Mailing Address 113 Royal Garden Ter City, State, Zip Code Madison, MS 39110-7635 Name of Employer (Required) Not Employed	10/20/2023	\$3.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,628.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rogers Mandy Mailing Address 130 Dove Cv City, State, Zip Code Canton, MS 39046-9446 Name of Employer (Required) None	10/11/2023	\$300.00
Occupation (Required) Homemaker	Aggregate year-to-date	\$300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Casey Langston Lott Mailing Address PO Box 382 City, State, Zip Code Booneville, MS 38829-0382 Name of Employer (Required) Self Employed	10/11/2023	\$5,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$20,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melanie Wagner Mailing Address PO Box 1074 City, State, Zip Code Florence, MS 39073-1074 Name of Employer (Required) WORR	10/21/2023	\$10.00
Occupation (Required) President	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/03/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cherri Lightsey Mailing Address 3701 Crawford Rd City, State, Zip Code Crawford, MS 39743-9629 Name of Employer (Required) Not Employed	10/13/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$595.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patrick Phillips Mailing Address 653 Ferncliff Dr City, State, Zip Code Jackson, MS 39211-2606 Name of Employer (Required) Not Employed	10/23/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Glen Davidson Jr Mailing Address 1123 Quail Creek Cv City, State, Zip Code Tupelo, MS 38801-7257 Name of Employer (Required) Not Employed	10/25/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$273.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Clyde Gunn III Mailing Address PO Box 1916 City, State, Zip Code Biloxi, MS 39533-1916 Name of Employer (Required) Self Employed	10/06/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Tietjens Mailing Address 209 Lake Cir City, State, Zip Code Madison, MS 39110-7992 Name of Employer (Required) Not Employed	10/16/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,100.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Lynch Mailing Address 617 Camelia Trl City, State, Zip Code Brandon, MS 39047-6316 Name of Employer (Required) Not Employed	10/26/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,675.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gerald H. Blessey Mailing Address 2577 Chatham Ct City, State, Zip Code Biloxi, MS 39531-2758 Name of Employer (Required) Self Employed	10/26/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,733.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Stallings Mailing Address PO Box 1141 City, State, Zip Code Oxford, MS 38655-1141 Name of Employer (Required) State of Mississippi	10/07/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Miriam Harrington Mailing Address 3800 Fairfax Dr City, State, Zip Code Arlington, VA 22203-1720 Name of Employer (Required) Not Employed	10/17/2023	\$16.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$463.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Hamilton Mailing Address 3701 58th Ave City, State, Zip Code Meridian, MS 39307-2905 Name of Employer (Required) Self Employed	10/27/2023	\$25.00
Occupation (Required) Restauranteur	Aggregate year-to-date	\$305.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alison Anderson Mailing Address 7017 E Bella Vista Dr City, State, Zip Code Cave Creek, AZ 85331-8607 Name of Employer (Required) Impak	10/28/2023	\$100.00
Occupation (Required) Sales	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/19/2023	\$30.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name E. K. Pruitt Mailing Address 4217 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3420 Name of Employer (Required) Not Employed	10/10/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,080.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Daniel S. Butterfield Mailing Address 864 Moore Dr City, State, Zip Code Aspen, CO 81611-3411 Name of Employer (Required) Not Employed	10/11/2023	\$5,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alton Ashy Mailing Address 7387 Lasalle Ave City, State, Zip Code Baton Rouge, LA 70806-8265 Name of Employer (Required) Mobile DMV	10/21/2023	\$5,000.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anne Bailey Mailing Address 705 N Overlook Dr City, State, Zip Code Alexandria, VA 22305-1223 Name of Employer (Required) Not Employed	10/12/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$725.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/22/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Fike Mailing Address 1845 Piedmont St City, State, Zip Code Jackson, MS 39202-1346 Name of Employer (Required) Self Employed	10/24/2023	\$10.00
Occupation (Required) Attorney	Aggregate year-to-date	\$410.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Minter Mailing Address 1246 Ostrander Rd City, State, Zip Code Kelso, WA 98626-9395 Name of Employer (Required) University of New Mexico	10/16/2023	\$10.00
Occupation (Required) Business Analyst	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Lawhead Mailing Address 718 S 8th St City, State, Zip Code Oxford, MS 38655-4306 Name of Employer (Required) Not Employed	10/16/2023	\$22.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$357.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Davis Davis Mailing Address 179 Little Sawmill Rd City, State, Zip Code Laurel, MS 39443-9157 Name of Employer (Required) Not Employed	10/26/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Lalli Mailing Address 140 State St City, State, Zip Code Brooklyn, NY 11201-6039 Name of Employer (Required) Not Employed	10/26/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Blake Corley Mailing Address 900 Fern St City, State, Zip Code New Orleans, LA 70118-3953 Name of Employer (Required) Self Employed	10/26/2023	\$2,500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Irvin Mailing Address 4047 Wyandot St City, State, Zip Code Denver, CO 80211-2140 Name of Employer (Required) Strategic Programs, Inc.	10/17/2023	\$25.00
Occupation (Required) Corporate Secretary	Aggregate year-to-date	\$573.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ellen Lake Mailing Address 4230 Lakeshore Ave City, State, Zip Code Oakland, CA 94610-1136 Name of Employer (Required) Not Employed	10/17/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gerald H. Blessey Mailing Address 2577 Chatham Ct City, State, Zip Code Biloxi, MS 39531-2758 Name of Employer (Required) Self Employed	10/08/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,733.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Garner Mailing Address 302 Francis St City, State, Zip Code Jackson, MS 39206-4128 Name of Employer (Required) Not Employed	10/10/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Theresa Steinberger Mailing Address 909 Eastwood St City, State, Zip Code Pascagoula, MS 39567-7549 Name of Employer (Required) Not Employed	10/01/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bryan Patton Mailing Address 741 N Madison St City, State, Zip Code Tupelo, MS 38804-2017 Name of Employer (Required) Hyperion Technology Group, Inc.	10/11/2023	\$50.00
Occupation (Required) Engineer	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edward McDonnell Mailing Address 518 Huntington Dr City, State, Zip Code Madison, MS 39110-9578 Name of Employer (Required) Not Employed	10/11/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Emad Al-Turk Mailing Address 110 Carlton Blvd City, State, Zip Code Ridgeland, MS 39157-9444 Name of Employer (Required) Waggoner Engineering	10/21/2023	\$2,500.00
Occupation (Required) CEO	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Louis Kyriakoudes Mailing Address 3035 Hartford Dr City, State, Zip Code Murfreesboro, TN 37129-5212 Name of Employer (Required) Middle Tennessee State Univeristy	10/12/2023	\$250.00
Occupation (Required) College Professor	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ford Sutherlin Mailing Address 2211 Odonnell Blvd City, State, Zip Code Gulfport, MS 39507-2147 Name of Employer (Required) Not Employed	10/12/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/12/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lynn Haspel Mailing Address 256 Eastbrooke St City, State, Zip Code Jackson, MS 39216-4716 Name of Employer (Required) Not Employed	10/22/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$269.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Paul Carter Mailing Address 2615 Blackfoot Rd City, State, Zip Code Vancleave, MS 39565-8447 Name of Employer (Required) Not Employed	10/22/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Andrew Jenkins Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Tech. Services	10/23/2023	\$50.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$6,475.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ted B. Atkinson Mailing Address 1000 E Broad St City, State, Zip Code West Point, MS 39773-3236 Name of Employer (Required) Mississippi State University	10/14/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$455.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sharon E. Mimms Mailing Address 3507 Campbell St City, State, Zip Code Moss Point, MS 39563-2653 Name of Employer (Required) Not Employed	10/14/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary-Martha Wilson Mailing Address 106 Saint Charles Ave City, State, Zip Code Starkville, MS 39759-2649 Name of Employer (Required) Not Employed	10/16/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alison O. Kelly Mailing Address 188 Reunion Blvd City, State, Zip Code Madison, MS 39110-8096 Name of Employer (Required) Self Employed	10/16/2023	\$500.00
Occupation (Required) Artist	Aggregate year-to-date	\$2,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Milton O. Sundbeck Mailing Address 37 Town Creek Rd City, State, Zip Code West Point, MS 39773-5705 Name of Employer (Required) Southern Ionics, Inc.	10/26/2023	\$5,000.00
Occupation (Required) President	Aggregate year-to-date	\$30,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Sens Mailing Address 580 Middle Rte City, State, Zip Code Gilmanton, NH 03237-4215 Name of Employer (Required) Not Employed	10/07/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$343.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Raspet Mailing Address PO Box 2595 City, State, Zip Code Oxford, MS 38655-4900 Name of Employer (Required) Not Employed	10/17/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Reita E. Schmidtling Mailing Address 102 Driftwood Dr City, State, Zip Code Long Beach, MS 39560-5811 Name of Employer (Required) Not Employed	10/27/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$375.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cindy Akins Mailing Address 86449 Meadowwood Dr City, State, Zip Code Yulee, FL 32097-6427 Name of Employer (Required) Not Employed	10/28/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$896.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Martin Daniel Crump Mailing Address 7020 ROLLINGGREEN Dr City, State, Zip Code PASS CHRISTIAN, MS 39571 Name of Employer (Required) Davis & Crump, PC	10/19/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$8,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Danny Raspberry Mailing Address 754 N 8th Ave City, State, Zip Code Laurel, MS 39440-3451 Name of Employer (Required) Raspberry Producer Group	10/29/2023	\$1,000.00
Occupation (Required) Sales	Aggregate year-to-date	\$4,250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/10/2023	\$10.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Daniel Pair Mailing Address 968 Road 261 City, State, Zip Code Tupelo, MS 38801-7600 Name of Employer (Required) Social Security Administration	10/20/2023	\$50.00
Occupation (Required) Claims Specialist	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Wilder Mailing Address 156 Markham Dr City, State, Zip Code Long Beach, MS 39560-5604 Name of Employer (Required) Not Employed	10/20/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Parrott Mailing Address 9 Abbey Nord Pl City, State, Zip Code Jackson, MS 39216-3743 Name of Employer (Required) Adams and Reese LLP	10/11/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,350.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required) Not Employed	10/21/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$642.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name T. Mark Sledge Mailing Address 587 Highland Colony Pkwy City, State, Zip Code Ridgeland, MS 39157-8784 Name of Employer (Required) Self Employed	10/12/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alfred Martin Mailing Address 130 Lake Holleman Pl City, State, Zip Code Ridgeland, MS 39157-5089 Name of Employer (Required) Environmental Management Plus	10/12/2023	\$25.00
Occupation (Required) Manager	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Smith Mailing Address PO Box 1865 City, State, Zip Code Gulfport, MS 39502-1865 Name of Employer (Required) Not Employed	10/13/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John James Mailing Address 215 Court St City, State, Zip Code Clarksdale, MS 38614-2711 Name of Employer (Required) Not Employed	10/13/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,100.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Budd Mailing Address 114 Mansfield Dr City, State, Zip Code Natchez, MS 39120-4931 Name of Employer (Required) Not Employed	10/05/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert M. Pugh Mailing Address 5924 Whitestone Rd City, State, Zip Code Jackson, MS 39206-2515 Name of Employer (Required) Not Employed	10/05/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roger Klingler Mailing Address 7844 E Sandalwood Dr City, State, Zip Code Scottsdale, AZ 85250-7269 Name of Employer (Required) Not Employed	10/15/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$950.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Fred Hutchison Mailing Address 137 Front St City, State, Zip Code Schenectady, NY 12305-1339 Name of Employer (Required) Donohue Sabo Occupation (Required) Attorney	10/25/2023	\$63.00
Aggregate year-to-date		\$250.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Mills Mailing Address 1103 Fleetwood Dr City, State, Zip Code Lookout Mountai, GA 30750-2807 Name of Employer (Required) Pantheon Capital Occupation (Required) Investment Management	10/16/2023	\$2,000.00
Aggregate year-to-date		\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa Reed Mailing Address 2059 Parc Monceau Dr W City, State, Zip Code Tupelo, MS 38804-1068 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/26/2023	\$25.00
Aggregate year-to-date		\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sally Gray Mailing Address 4931 4th Ave City, State, Zip Code Meridian, MS 39305-2026 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/17/2023	\$300.00
Aggregate year-to-date		\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ray Johansmeier Mailing Address 753 E Second St City, State, Zip Code Pass Christian, MS 39571-4613 Name of Employer (Required) Not Employed	10/27/2023	\$200.00
Occupation (Required) Retired	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathaleen Miller Mailing Address 13509 Circle G Ranch Rd City, State, Zip Code Picayune, MS 39466-9586 Name of Employer (Required) Not Employed	10/29/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wayne Minyard Mailing Address 324 Longmeadow Ct S City, State, Zip Code Ridgeland, MS 39157-3541 Name of Employer (Required) Sanderson Farms	10/29/2023	\$25.00
Occupation (Required) Accountant	Aggregate year-to-date	\$240.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wayne Drinkwater Mailing Address 106 Waterstone Dr City, State, Zip Code Oxford, MS 38655-0009 Name of Employer (Required) Bradley Arant Boulton Cummings LLP	10/29/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ralph Weimer Mailing Address 5601 N Lake Dr City, State, Zip Code Meridian, MS 39307-4140 Name of Employer (Required) Not Employed	10/10/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Forrest Morris Mailing Address 600 N Beach Blvd City, State, Zip Code Bay Saint Louis, MS 39520-4604 Name of Employer (Required) Not Employed	10/02/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jonathan Harris Mailing Address 9 Marie Ave City, State, Zip Code Cambridge, MA 02139-1002 Name of Employer (Required) Tufts University	10/22/2023	\$25.00
Occupation (Required) Researcher	Aggregate year-to-date	\$272.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed	10/03/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,254.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roger Mcdowell Mailing Address 1904 Fuller St City, State, Zip Code Hattiesburg, MS 39401-7544 Name of Employer (Required) Not Employed	10/13/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,289.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roger Byrd Mailing Address 701 N Fulton St City, State, Zip Code Iuka, MS 38852-2411 Name of Employer (Required) Not Employed	10/23/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed	10/23/2023	\$25.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$801.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/24/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathy Mosley Mailing Address 6916 18th Ave City, State, Zip Code Hyattsville, MD 20783-2956 Name of Employer (Required) University of DC Occupation (Required) Counselor	10/05/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeffrey Cantin Mailing Address 5860 Citrus Blvd City, State, Zip Code Harahan, LA 70123-8520 Name of Employer (Required) Self Employed Occupation (Required) Manager	10/15/2023	\$1,000.00
Aggregate year-to-date		\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Witherspoon Mailing Address 910 Lincoln Ave City, State, Zip Code Oxford, MS 38655-4328 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/06/2023	\$100.00
Aggregate year-to-date		\$3,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark C. Wallfisch Mailing Address 128 Central Park Pl City, State, Zip Code New Orleans, LA 70124-3708 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/17/2023	\$100.00
Aggregate year-to-date		\$725.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen K. Sawyer Mailing Address 150 Spence Dr City, State, Zip Code Pass Christian, MS 39571-4839 Name of Employer (Required) Not Employed	10/27/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elise Gillespie Mailing Address 1013 S Lamar Blvd City, State, Zip Code Oxford, MS 38655-4739 Name of Employer (Required) University of Mississippi	10/18/2023	\$25.00
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$1,325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eric Bragg Mailing Address 213 Fredricksburg Pl City, State, Zip Code Madison, MS 39110-6803 Name of Employer (Required) Bragg Specialty Contractors	10/09/2023	\$500.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lauren Livingston Mailing Address 1 Diggess Rd City, State, Zip Code Asheville, NC 28805-1722 Name of Employer (Required) Community Family Practice	10/29/2023	\$1,000.00
Occupation (Required) Physician	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John C. Patterson Mailing Address 231 N Main St City, State, Zip Code Como, MS 38619-7305 Name of Employer (Required) Self Employed	10/29/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Roberts Mailing Address 709 Northdale Pl City, State, Zip Code Brandon, MS 39047-5110 Name of Employer (Required) Not Employed	10/10/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$875.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael McConnell Mailing Address 20310 Paseo Del Campo City, State, Zip Code Porter Ranch, CA 91326-4325 Name of Employer (Required) Not Employed	10/10/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Baler Mailing Address 3000 Pineland Dr City, State, Zip Code Gulfport, MS 39501-6239 Name of Employer (Required) Not Employed	10/01/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$290.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Teasley Mailing Address 100 Aspen Dr City, State, Zip Code Madison, MS 39110-9712 Name of Employer (Required) Not Employed	10/02/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$675.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed	10/12/2023	\$20.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$801.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert L. Lyle Mailing Address PO Box 560 City, State, Zip Code Morton, MS 39117-0560 Name of Employer (Required) Self Employed	10/22/2023	\$1,000.00
Occupation (Required) Real Estate Broker	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William Hasty Mailing Address 133 Beach View Dr City, State, Zip Code Pass Christian, MS 39571-3503 Name of Employer (Required) FEB Distributing	10/23/2023	\$500.00
Occupation (Required) Merchandiser	Aggregate year-to-date	\$1,100.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathaleen Miller	10/15/2023	\$25.00
Mailing Address 13509 Circle G Ranch Rd		
City, State, Zip Code Picayune, MS 39466-9586		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark A. Worthey	10/16/2023	\$5,000.00
Mailing Address 1110 Lake Point Cir		
City, State, Zip Code Mckinney, TX 75072-5165		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Fisher-Wirth	10/26/2023	\$25.00
Mailing Address 610 N 14th St		
City, State, Zip Code Oxford, MS 38655-3220		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gregory Schussele	10/17/2023	\$50.00
Mailing Address 29 Illmo Dr		
City, State, Zip Code Springfield, IL 62711-7908		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$216.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Deborah Hurt Mailing Address 450 Valley Vista Dr City, State, Zip Code Tupelo, MS 38801-1500 Name of Employer (Required) Not Employed	10/27/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lena Grillo Mailing Address 5711 Clubview Dr City, State, Zip Code Jackson, MS 39211-4202 Name of Employer (Required) Not Employed	10/18/2023	\$60.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$290.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Michael Collins Mailing Address 1826 Ray St City, State, Zip Code Ocean Springs, MS 39564-2930 Name of Employer (Required) Not Employed	10/28/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Alison Silverstein Mailing Address 2515 Mc Bee St City, State, Zip Code Austin, TX 78723-4905 Name of Employer (Required) Self Employed	10/09/2023	\$500.00
Occupation (Required) Electric Systems Consultant	Aggregate year-to-date	\$803.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Castellaw Mailing Address 1721 Manley Rd City, State, Zip Code Alamo, TN 38001-5944 Name of Employer (Required) Self Employed	10/09/2023	\$100.00
Occupation (Required) Independent Executive	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tabitha Dismuke Mailing Address 815 Reunion Place Cir City, State, Zip Code Biloxi, MS 39532-4683 Name of Employer (Required) Government Publishing Office	10/29/2023	\$25.00
Occupation (Required) Machinist	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Heaton Mailing Address PO Box 158 City, State, Zip Code Lyon, MS 38645-0158 Name of Employer (Required) Bobo Mosely Gin Co.	10/29/2023	\$2,500.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Haskell Mailing Address 6 Trotting Horse Dr City, State, Zip Code Lexington, MA 02421-6339 Name of Employer (Required) Not Employed	10/10/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elwin Hall Mailing Address 2204 Popp's Ferry Rd City, State, Zip Code Biloxi, MS 39532-4104 Name of Employer (Required) Not Employed	10/02/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed	10/22/2023	\$20.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$801.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dannie Ball Mailing Address 104 Bay View Ct City, State, Zip Code Bay Saint Louis, MS 39520-4602 Name of Employer (Required) Not Employed	10/03/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Kaufman Mailing Address 156 County Road 303 City, State, Zip Code Iuka, MS 38852-7516 Name of Employer (Required) Not Employed	10/03/2023	\$20.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$332.92

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Judi Leake Mailing Address 5645 Traceside Dr City, State, Zip Code Nashville, TN 37221-4093 Name of Employer (Required) Not Employed	10/13/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$335.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeanne Garforth Mailing Address 141 Viewpointe Dr City, State, Zip Code Clinton, MS 39056-6085 Name of Employer (Required) Not Employed	10/23/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$420.85
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/23/2023	\$5.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raymond Godshall Mailing Address 310 Riverside Dr City, State, Zip Code New York, NY 10025-4123 Name of Employer (Required) Not Employed	10/04/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John N. Palmer Mailing Address PO Box 3747 City, State, Zip Code Jackson, MS 39207-3747 Name of Employer (Required) Gulf South Capital	10/16/2023	\$2,500.00
Occupation (Required) Chairman	Aggregate year-to-date	\$28,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert O'Brien Mailing Address 6007 SW 240th St City, State, Zip Code Vashon, WA 98070-7247 Name of Employer (Required) Health Net	10/17/2023	\$100.00
Occupation (Required) COO	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melanie Wagner Mailing Address PO Box 1074 City, State, Zip Code Florence, MS 39073-1074 Name of Employer (Required) WORR	10/27/2023	\$10.00
Occupation (Required) President	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kerry Hamilton Mailing Address 43 County Road 332 City, State, Zip Code Taylor, MS 38673-4552 Name of Employer (Required) Kerry W Hamilton, Inc	10/08/2023	\$250.00
Occupation (Required) Consultant	Aggregate year-to-date	\$2,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Fraser Hunter Mailing Address 645 W End Ave City, State, Zip Code New York, NY 10025-7352 Name of Employer (Required) WilmerHale LLP	10/28/2023	\$1,500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$4,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gloria Williamson Mailing Address 521 Holland Ave City, State, Zip Code Philadelphia, MS 39350-2437 Name of Employer (Required) Not Employed	10/09/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$8,010.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nan Shiverdecker Mailing Address 306 Alabama St City, State, Zip Code New Albany, MS 38652-4137 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joe Powell Mailing Address 417 Glenway Dr City, State, Zip Code Jackson, MS 39216-4108 Name of Employer (Required) Equipment Finance	10/10/2023	\$2,500.00
Occupation (Required) President	Aggregate year-to-date	\$4,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Adams Mailing Address 3203 Melinda Ln City, State, Zip Code Corinth, MS 38834-2219 Name of Employer (Required) Not Employed	10/11/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/21/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Rod Luther Mailing Address 13963 Highway 5 City, State, Zip Code Mountain View, AR 72560-8044 Name of Employer (Required) Not Employed	10/12/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$207.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Andrew Jenkins Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Tech. Services	10/22/2023	\$100.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$6,475.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Harrison Mailing Address 1121 Turner Dr NE City, State, Zip Code Albuquerque, NM 87123-1917 Name of Employer (Required) Not Employed	10/23/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Clark Mailing Address 110 Olympia Flds City, State, Zip Code Jackson, MS 39211-2509 Name of Employer (Required) Not Employed	10/04/2023	\$2,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$26,003.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Curtis Gray Mailing Address 37 County Road 317 City, State, Zip Code Heidelberg, MS 39439-3679 Name of Employer (Required) Jasper	10/04/2023	\$50.00
Occupation (Required) County Supervisor	Aggregate year-to-date	\$310.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marley Lott Mailing Address 1928 South Blvd City, State, Zip Code Houston, TX 77098-5424 Name of Employer (Required) Not Employed	10/24/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$600.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton	10/24/2023	\$25.00
Mailing Address 707 Randolph Ave SE		
City, State, Zip Code Huntsville, AL 35801-3606		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Buchanan	10/25/2023	\$30.00
Mailing Address 155 Bryant St		
City, State, Zip Code Palo Alto, CA 94301-1104		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,194.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steve Tadlock	10/25/2023	\$25.00
Mailing Address 2985 Beaumont Cv		
City, State, Zip Code Pearl, MS 39208-5324		
Name of Employer (Required) Broderick Advertising		
Occupation (Required) Creative Director	Aggregate year-to-date	\$345.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Scott	10/25/2023	\$100.00
Mailing Address 1801 Beechtree Rd		
City, State, Zip Code Greensboro, NC 27408-3730		
Name of Employer (Required) Self Employed		
Occupation (Required) Real Estate	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tor Kwembe Mailing Address 4100 Poplar Ave City, State, Zip Code Richton Park, IL 60471-1236 Name of Employer (Required) Jackson State University	10/16/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$305.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sharon Burke Mailing Address 84 Mesa Mount Olive Rd City, State, Zip Code Tylertown, MS 39667-5851 Name of Employer (Required) Not Employed	10/27/2023	\$45.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$206.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bud Coley Mailing Address 104 A CR 1310 City, State, Zip Code Tupelo, MS 38804 Name of Employer (Required) Bud Coley Trucking	10/18/2023	\$1,000.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$6,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Austin Mailing Address 1435 Saint Ann St City, State, Zip Code Jackson, MS 39202-1847 Name of Employer (Required) Not Employed	10/09/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$700.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Walter Taylor Mailing Address 1054 County Road 36 City, State, Zip Code Thaxton, MS 38871-9507 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Barbara Gray Mailing Address 3514 35th Ave City, State, Zip Code Meridian, MS 39307-3612 Name of Employer (Required) Not Employed	10/21/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Theresa Steinberger Mailing Address 909 Eastwood St City, State, Zip Code Pascagoula, MS 39567-7549 Name of Employer (Required) Not Employed	10/12/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Peter Smith Mailing Address 403 Whippoorwill Rd City, State, Zip Code Brandon, MS 39047-6434 Name of Employer (Required) Not Employed	10/03/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Brombacher Mailing Address 108 Coachmans Rd City, State, Zip Code Madison, MS 39110-9227 Name of Employer (Required) Not Employed	10/23/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$875.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	10/04/2023	\$25.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,452.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/04/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anthony Baggett Mailing Address 104 N Broadway St City, State, Zip Code Tupelo, MS 38804-3967 Name of Employer (Required) Busted Spring, LLC	10/14/2023	\$100.00
Occupation (Required) Web Developer	Aggregate year-to-date	\$605.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/05/2023	\$5.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas Faulkner Mailing Address 108 Sumach St City, State, Zip Code Lookout Mountai, TN 37350-1132 Name of Employer (Required) Not Employed	10/25/2023	\$2,500.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carl Page Mailing Address 5214 DIAMOND City, State, Zip Code San Francisco, CA 94131 Name of Employer (Required) Not Employed	10/25/2023	\$3,300.00
Occupation (Required) Retired	Aggregate year-to-date	\$5,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Myron Labat Sr Mailing Address 217 Third St City, State, Zip Code Bay St Louis, MS 39520-4228 Name of Employer (Required) Not Employed	10/06/2023	\$5.00
Occupation (Required) Retired	Aggregate year-to-date	\$270.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dennis Truax Mailing Address 913 Southgate Dr City, State, Zip Code Starkville, MS 39759-9434 Name of Employer (Required) Self Employed	10/16/2023	\$50.00
Occupation (Required) Engineer	Aggregate year-to-date	\$1,821.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William Waller Mailing Address 404 6th Ave City, State, Zip Code Hattiesburg, MS 39401-4241 Name of Employer (Required) Hattiesburg Clinic	10/17/2023	\$250.00
Occupation (Required) Physician	Aggregate year-to-date	\$1,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Bob Nevels Mailing Address 614 Wendover Dr City, State, Zip Code Ridgeland, MS 39157-2849 Name of Employer (Required) Self Employed	10/17/2023	\$50.00
Occupation (Required) Physician	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Daniel Pair Mailing Address 968 Road 261 City, State, Zip Code Tupelo, MS 38801-7600 Name of Employer (Required) Social Security Administration	10/28/2023	\$50.00
Occupation (Required) Claims Specialist	Aggregate year-to-date	\$550.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Fisher-Wirth Mailing Address 610 N 14th St City, State, Zip Code Oxford, MS 38655-3220 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John Rollins Mailing Address 28 Homochitto St City, State, Zip Code Natchez, MS 39120-3996 Name of Employer (Required) Rollins Resources	10/19/2023	\$100.00
Occupation (Required) Consultant	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mark Goldberg Mailing Address 321 Cornerstone Dr City, State, Zip Code Brandon, MS 39042-2712 Name of Employer (Required) Cosmich Simmons & Brown PLLC	10/10/2023	\$75.00
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church	10/20/2023	\$25.00
Occupation (Required) Clergy	Aggregate year-to-date	\$965.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed Occupation (Required) Accountant	10/21/2023	\$5.00
Aggregate year-to-date		\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frankie Blount Mailing Address 4876 Brookwood Pl City, State, Zip Code Jackson, MS 39272-5706 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/02/2023	\$30.00
Aggregate year-to-date		\$308.55
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name R. H. Cooper Mailing Address 12 County Road 3070 City, State, Zip Code Oxford, MS 38655-8277 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/12/2023	\$100.00
Aggregate year-to-date		\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kenneth Johnson Mailing Address 301 Cox Xing City, State, Zip Code Madison, MS 39110-9035 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/12/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roy Decker Mailing Address 4044 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3413 Name of Employer (Required) Duvall Decker	10/22/2023	\$100.00
Occupation (Required) Architects	Aggregate year-to-date	\$1,800.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>		
Full Name Ready Law Firm Mailing Address 2103 5th St City, State, Zip Code Meridian, MS 39301-5131 Name of Employer (Required)	10/22/2023	\$500.00
Occupation (Required)	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Cari White Mailing Address 92 -1553 Aliinui Dr City, State, Zip Code Kapolei, HI 96707-2228 Name of Employer (Required) Not Employed	10/03/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joan Santa Cruz Mailing Address 5825 Cedar Rd City, State, Zip Code Ocean Springs, MS 39564-2250 Name of Employer (Required) Not Employed	10/23/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$470.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carla Bing Mailing Address 8124 Maywood Dr City, State, Zip Code Olive Branch, MS 38654-9474 Name of Employer (Required) Not Employed	10/04/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Goldin Mailing Address 12207 Preservation Dr City, State, Zip Code Gulfport, MS 39503-7070 Name of Employer (Required) Not Employed	10/24/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patrick Evans Mailing Address 2576 Audubon Pl City, State, Zip Code Biloxi, MS 39531-3707 Name of Employer (Required) Self Employed	10/24/2023	\$25.00
Occupation (Required) Psychologist	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required) Not Employed	10/05/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,700.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stephen B. Richer Mailing Address 62 53rd Cir City, State, Zip Code Gulfport, MS 39507-4541 Name of Employer (Required) Richer Advisors	10/25/2023	\$100.00
Occupation (Required) Consultant	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Helen Boone Mailing Address 3726 Crane Blvd City, State, Zip Code Jackson, MS 39216-3605 Name of Employer (Required) Not Employed	10/25/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,147.45
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John K. Walkup Mailing Address 3710 Richland Ave City, State, Zip Code Nashville, TN 37205-2438 Name of Employer (Required) Wyatt Tarrant & Combs	10/25/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Wiygul Mailing Address 334 Lovers Ln City, State, Zip Code Ocean Springs, MS 39564-2826 Name of Employer (Required) Waltzer Wiygul & Garside	10/06/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$5,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jack Lawton Mailing Address 319 Lakes Dr N City, State, Zip Code Oxford, MS 38655-9219 Name of Employer (Required) University of Mississippi	10/26/2023	\$25.00
Occupation (Required) IT Manager	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Andrew Mallinson Mailing Address 5 E Hill Dr City, State, Zip Code Jackson, MS 39216-3622 Name of Employer (Required) Multicraft International	10/27/2023	\$500.00
Occupation (Required) CEO	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/27/2023	\$25.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Glenn Oliver Mailing Address 5642 Gibson Rd City, State, Zip Code Vicksburg, MS 39180-6320 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$315.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Sullivan Mailing Address 253 County Road 325 City, State, Zip Code Oxford, MS 38655-9566 Name of Employer (Required) Not Employed	10/28/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Linda Waltman Mailing Address 119 Saint Andrews City, State, Zip Code Hattiesburg, MS 39401-8215 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$207.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name James Sullivan Mailing Address 253 County Road 325 City, State, Zip Code Oxford, MS 38655-9566 Name of Employer (Required) Not Employed	10/10/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Cynthia Parker Mailing Address 113 Royal Garden Ter City, State, Zip Code Madison, MS 39110-7635 Name of Employer (Required) Not Employed	10/20/2023	\$3.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,503.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carr McClain Mailing Address 1011 S 34th Ave City, State, Zip Code Hattiesburg, MS 39402-3002 Name of Employer (Required) Forrest General Hospital Occupation (Required) Surgeon	10/11/2023	\$1,000.00
Aggregate year-to-date		\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wes Ehrhardt Mailing Address 204 Sycamore St City, State, Zip Code Como, MS 38619-7330 Name of Employer (Required) Patterson & Ehrhardt PLLC Occupation (Required) Attorney	10/12/2023	\$100.00
Aggregate year-to-date		\$319.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margo Salone Mailing Address 71 Matherville Frost Bridge Rd City, State, Zip Code Shubuta, MS 39360-9201 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/22/2023	\$10.00
Aggregate year-to-date		\$272.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret A. Niven Mailing Address 124 Highland Cir City, State, Zip Code Jackson, MS 39211-6413 Name of Employer (Required) Nejam Properties Occupation (Required) Administrative Assisstant	10/14/2023	\$25.00
Aggregate year-to-date		\$245.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Judy Woods Mailing Address 119 King Richard Rd City, State, Zip Code Starkville, MS 39759-3848 Name of Employer (Required) Not Employed	10/24/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Peter Smith Mailing Address 403 Whippoorwill Rd City, State, Zip Code Brandon, MS 39047-6434 Name of Employer (Required) Not Employed	10/25/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Arnel D. Bolden Mailing Address 927 E Peace St City, State, Zip Code Canton, MS 39046-4023 Name of Employer (Required) State Farm Insurance	10/07/2023	\$300.00
Occupation (Required) Insurance Agent	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mary Miller Mailing Address 510 E 86th St City, State, Zip Code New York, NY 10028-7507 Name of Employer (Required) Not Employed	10/27/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Denis Wiesenburg Mailing Address 2500 Sierra Cir City, State, Zip Code Hattiesburg, MS 39402-2540 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/18/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Keith Johnson Mailing Address PO Box 421 City, State, Zip Code Nesbit, MS 38651-0421 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/28/2023	\$50.00
Aggregate year-to-date		\$1,400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cherri Musser Mailing Address 105 Piute Cir City, State, Zip Code Loudon, TN 37774-2138 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/09/2023	\$50.00
Aggregate year-to-date		\$800.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Benvenuto Mailing Address PO Box 2639 City, State, Zip Code Bay Saint Louis, MS 39521-2639 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/19/2023	\$1,000.00
Aggregate year-to-date		\$6,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Baler Mailing Address 3000 Pineland Dr City, State, Zip Code Gulfport, MS 39501-6239 Name of Employer (Required) Not Employed	10/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$290.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mittie R. Field Mailing Address PO Box 1926 City, State, Zip Code Madison, MS 39130-1926 Name of Employer (Required) Porter & Malouf	10/11/2023	\$150.00
Occupation (Required) Attorney	Aggregate year-to-date	\$405.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sam Pace Mailing Address 2013 N Parc Cir City, State, Zip Code Tupelo, MS 38804-9723 Name of Employer (Required) Not Employed	10/21/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church	10/13/2023	\$25.00
Occupation (Required) Clergy	Aggregate year-to-date	\$965.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/23/2023	\$15.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name R. H. Cooper Mailing Address 12 County Road 3070 City, State, Zip Code Oxford, MS 38655-8277 Name of Employer (Required) Not Employed	10/04/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2029 Name of Employer (Required) Not Employed	10/14/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$861.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Francis Gresock Mailing Address 609 Washington St City, State, Zip Code Natchez, MS 39120-3526 Name of Employer (Required) Not Employed	10/24/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$625.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name H. Scott Ross Mailing Address PO Box 332 City, State, Zip Code West Point, MS 39773-0332 Name of Employer (Required) Self Employed	10/25/2023	\$5,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$13,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Corliss Mailing Address 2379 Wendover Dr City, State, Zip Code Belden, MS 38826-8644 Name of Employer (Required) Not Employed	10/25/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Greta Presley Mailing Address 182 Verona Ave City, State, Zip Code Nettleton, MS 38858-6004 Name of Employer (Required) Brandon Presley Campaign	10/25/2023	\$14.60
Occupation (Required) Campaign Staff	Aggregate year-to-date	\$367.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Byron Ford Mailing Address PO Box 116 City, State, Zip Code Benton, MS 39039-0116 Name of Employer (Required) Not Employed	10/06/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Potter Mailing Address 1011 SE 102nd Ave City, State, Zip Code Vancouver, WA 98664-4145 Name of Employer (Required) IPonePartnerships Occupation (Required) Caregiver	10/16/2023	\$25.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Kavanagh Mailing Address 134 Saint Jude St City, State, Zip Code Biloxi, MS 39530-3603 Name of Employer (Required) Tellabs Occupation (Required) Vice President Sales	10/26/2023	\$100.00
Aggregate year-to-date		\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2029 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/07/2023	\$10.00
Aggregate year-to-date		\$861.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lee Dastur Mailing Address 1432 Quaker Rdg City, State, Zip Code West Chester, PA 19380-6943 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/17/2023	\$25.00
Aggregate year-to-date		\$225.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Duncan M. Gray III Mailing Address 110 Philip Rd City, State, Zip Code Oxford, MS 38655-2014 Name of Employer (Required) Nativity Episcopal Church	10/17/2023	\$50.00
Occupation (Required) Clergy	Aggregate year-to-date	\$725.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rose M. Juzang Mailing Address 601 N Forest Dr City, State, Zip Code Gulfport, MS 39507-2031 Name of Employer (Required) Not Employed	10/27/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Burton Spencer Mailing Address PO Box 26 City, State, Zip Code Charleston, MS 38921-0026 Name of Employer (Required) Not Employed	10/18/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Miotke Mailing Address 1626 Francisco St City, State, Zip Code Berkeley, CA 94703-1255 Name of Employer (Required) Self Employed	10/18/2023	\$3.00
Occupation (Required) Musician	Aggregate year-to-date	\$526.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold D. Copeland Mailing Address PO Box 631145 City, State, Zip Code Houston, TX 77263-1145 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$562.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Stanley Ketchum Mailing Address 162 Tomlinson Dr City, State, Zip Code Folsom, CA 95630-7403 Name of Employer (Required) JK Corporate Services	10/29/2023	\$25.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Fred Hutchison Mailing Address 137 Front St City, State, Zip Code Schenectady, NY 12305-1339 Name of Employer (Required) Donohue Sabo	10/20/2023	\$187.50
Occupation (Required) Attorney	Aggregate year-to-date	\$250.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/20/2023	\$10.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Raymond Mailing Address 733 Huckleberry Rd City, State, Zip Code Bay Saint Louis, MS 39520-1621 Name of Employer (Required) Self Employed	10/01/2023	\$1,000.00
Occupation (Required) Financial Consultant		
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James H. Mason Mailing Address 163 Lake Trail Dr City, State, Zip Code Flora, MS 39071-9500 Name of Employer (Required) Not Employed	10/11/2023	\$25.00
Occupation (Required) Retired		
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Fred Kency Jr Mailing Address 503 Pinebrook Cv City, State, Zip Code Brandon, MS 39047-7827 Name of Employer (Required) Baptist Medical	10/11/2023	\$50.00
Occupation (Required) Physician		
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gail Linson Mailing Address 133 Northshore Pt City, State, Zip Code Madison, MS 39110-7272 Name of Employer (Required) Not Employed	10/02/2023	\$35.00
Occupation (Required) Not Employed		

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/22/2023	\$20.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$530.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Charles Benvenuti Mailing Address PO Box 2639 City, State, Zip Code Bay Saint Louis, MS 39521-2639 Name of Employer (Required) Not Employed	10/03/2023	\$1,500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$6,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Charles Lacavera Mailing Address 1459 Forbes Dr City, State, Zip Code Byram, MS 39272-9459 Name of Employer (Required) Eastpointe	10/13/2023	\$50.00
Occupation (Required) Utilization Mngmnt	Aggregate year-to-date	\$475.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/04/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Kelly Mailing Address PO Box 101687 City, State, Zip Code Birmingham, AL 35210-6687 Name of Employer (Required) Kelly	10/14/2023	\$1,000.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$5,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald R. Cotten Mailing Address 24 Grand Bayou Cir City, State, Zip Code Hattiesburg, MS 39402-7931 Name of Employer (Required) Self Employed	10/14/2023	\$1,000.00
Occupation (Required) Business Development Consultant	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Kirkman Mailing Address 10231 County Road 200 City, State, Zip Code Falkner, MS 38629-9700 Name of Employer (Required) Not Employed	10/05/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$207.05
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Haskell Mailing Address 6 Trotting Horse Dr City, State, Zip Code Lexington, MA 02421-6339 Name of Employer (Required) Not Employed	10/06/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Byron R. Trauger Mailing Address 511 Union St City, State, Zip Code Nashville, TN 37219-1743 Name of Employer (Required) Trauger and Tuke Occupation (Required) Attorney	10/26/2023	\$500.00
Aggregate year-to-date		\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Butts Mailing Address 1914 Patton Ln City, State, Zip Code Austin, TX 78723-1236 Name of Employer (Required) Self Employed Occupation (Required) Political Consultant	10/07/2023	\$250.00
Aggregate year-to-date		\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dannie Ball Mailing Address 104 Bay View Ct City, State, Zip Code Bay Saint Louis, MS 39520-4602 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/17/2023	\$25.00
Aggregate year-to-date		\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sherry W. Mcwhorter Mailing Address 781 Versailles Dr City, State, Zip Code Ridgeland, MS 39157-5148 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/27/2023	\$100.00
Aggregate year-to-date		\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/18/2023	\$22.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie Fye Mailing Address 5439 Ennis Rd City, State, Zip Code Starkville, MS 39759-4861 Name of Employer (Required) Self Employed	10/28/2023	\$10.00
Occupation (Required) Counselor	Aggregate year-to-date	\$980.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paula Temperilli Mailing Address 15231 Rainhollow Dr City, State, Zip Code Houston, TX 77070-1328 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$860.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Randy Patterson Mailing Address 1603 Sycamore St City, State, Zip Code Murray, KY 42071-2223 Name of Employer (Required) Not Employed	10/20/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Latham Mailing Address 2090 Jefferson Pkwy City, State, Zip Code Hernando, MS 38632-5905 Name of Employer (Required) Not Employed	10/20/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,150.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Angelos Vamvakas Mailing Address 3161 Wayne Dr City, State, Zip Code Diberville, MS 39540-8554 Name of Employer (Required) Self Employed	10/01/2023	\$25.00
Occupation (Required) Psychiatrist	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sam Hirsch Mailing Address 5006 Cloister Dr City, State, Zip Code Rockville, MD 20852-3365 Name of Employer (Required) Jenner & Block LLP	10/01/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stacy Callender Mailing Address 4047 Pine Hill Dr City, State, Zip Code Jackson, MS 39206-5739 Name of Employer (Required) MS Dept of Health	10/11/2023	\$500.00
Occupation (Required) Director	Aggregate year-to-date	\$1,100.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/11/2023	\$20.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Somers Mailing Address 2008 Kostka Ln City, State, Zip Code Germantown, TN 38139-3448 Name of Employer (Required) FedEx	10/21/2023	\$100.00
Occupation (Required) Pilot	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elise Gillespie Mailing Address 1013 S Lamar Blvd City, State, Zip Code Oxford, MS 38655-4739 Name of Employer (Required) University of Mississippi	10/12/2023	\$650.00
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$1,325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Glenda Glover Mailing Address 3500 John A Merritt Blvd City, State, Zip Code Nashville, TN 37209-1500 Name of Employer (Required) Tennessee State University	10/22/2023	\$1,000.00
Occupation (Required) President	Aggregate year-to-date	\$3,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Chuck McRae Mailing Address 416 E Amite St City, State, Zip Code Jackson, MS 39201-2601 Name of Employer (Required) Not Employed	10/23/2023	\$400.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Heather Hendrix Starnes Mailing Address 12 Perdido Cir City, State, Zip Code Little Rock, AR 72211-2142 Name of Employer (Required) Healy Law Offices, LLC	10/04/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Leak Mailing Address 1864 Highway 24 E City, State, Zip Code Woodville, MS 39669-4219 Name of Employer (Required) Not Employed	10/14/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James K. Gentry Mailing Address 4817 W 121st St City, State, Zip Code Overland Park, KS 66209-1586 Name of Employer (Required) Not Employed	10/24/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hannah Banks Mailing Address 107 Garland Rd City, State, Zip Code Newton, MA 02459-1741 Name of Employer (Required) Not Employed	10/05/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$280.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lola W. Heyer Mailing Address 75 Horse Creek Rd City, State, Zip Code Mc Henry, MS 39561-6050 Name of Employer (Required) Not Employed	10/16/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa Reed Mailing Address 2059 Parc Monceau Dr W City, State, Zip Code Tupelo, MS 38804-1068 Name of Employer (Required) Not Employed	10/26/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robbie D. Fisher Mailing Address 723 W Lee St City, State, Zip Code Water Valley, MS 38965-1413 Name of Employer (Required) Self Employed	10/17/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$850.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patsy H. Johnson Mailing Address 59 County Road 7061 City, State, Zip Code Booneville, MS 38829-9591 Name of Employer (Required) PACTconsulting, LLC	10/27/2023	\$50.00
Occupation (Required) Business Consultant	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Kirkman Mailing Address 10231 County Road 200 City, State, Zip Code Falkner, MS 38629-9700 Name of Employer (Required) Not Employed	10/18/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$207.05
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Arthur Nicholson Mailing Address 230 Dwyer Ave City, State, Zip Code San Antonio, TX 78204-1025 Name of Employer (Required) Not Employed	10/19/2023	\$325.00
Occupation (Required) Retired	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Craig Mailing Address 434 S Pierce St City, State, Zip Code New Orleans, LA 70119-6802 Name of Employer (Required) Roderick & Solange MacArthur Justice Center	10/29/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$275.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Neblett Mailing Address PO Box 63 City, State, Zip Code Shelby, MS 38774-0063 Name of Employer (Required) Self Employed Occupation (Required) Farmer	10/29/2023	\$5,000.00
Aggregate year-to-date		\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Darlys J. Alford Mailing Address 135 Seaside Dr City, State, Zip Code Ocean Springs, MS 39564-5148 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/10/2023	\$100.00
Aggregate year-to-date		\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karla Loeb Mailing Address 648 Orleans Pl NE City, State, Zip Code Washington, DC 20002-3402 Name of Employer (Required) Arcadia Occupation (Required) Clean Energy	10/10/2023	\$250.00
Aggregate year-to-date		\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/10/2023	\$5.00
Aggregate year-to-date		\$360.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Smith Mailing Address PO Box 1865 City, State, Zip Code Gulfport, MS 39502-1865 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/20/2023	\$10.00
Aggregate year-to-date		\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marc Lerner Mailing Address 1415 Jefferson Ave City, State, Zip Code Oxford, MS 38655-3715 Name of Employer (Required) University of Mississippi Occupation (Required) Historian	10/20/2023	\$250.00
Aggregate year-to-date		\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dorothy Bedford Mailing Address PO Box 512 City, State, Zip Code Valley Forge, PA 19481-0512 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/20/2023	\$100.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed Occupation (Required) Attorney	10/21/2023	\$1,000.00
Aggregate year-to-date		\$4,625.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Emerson Robinson Jr Mailing Address 49 Eastbrooke St City, State, Zip Code Jackson, MS 39216-4714 Name of Employer (Required) Not Employed	10/12/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Shirlethia Franklin Mailing Address 1327 Childress St NE City, State, Zip Code Washington, DC 20002-2515 Name of Employer (Required) Jones Day	10/22/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gerald Harville Mailing Address 312 E Bankhead St City, State, Zip Code Fulton, MS 38843-1222 Name of Employer (Required) Not Employed	10/13/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carl Cottingham Mailing Address 140 Lela Ln City, State, Zip Code Greenville, MS 38701-7760 Name of Employer (Required) Not Employed	10/24/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$850.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mike Ballard Mailing Address 178 Northfield Dr City, State, Zip Code Saltillo, MS 38866-6892 Name of Employer (Required) Not Employed	10/05/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Rozier Mailing Address 303 Woodland Hills Dr City, State, Zip Code Oxford, MS 38655-8429 Name of Employer (Required) MGC Law	10/15/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rosa L. Harden Mailing Address 15 Riparian Way City, State, Zip Code Swannanoa, NC 28778-8224 Name of Employer (Required) Self Employed	10/07/2023	\$500.00
Occupation (Required) Event Producer	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed	10/17/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Williams Mailing Address 122 Madison Pl City, State, Zip Code Hattiesburg, MS 39402-8339 Name of Employer (Required) Bristow Helicopters	10/27/2023	\$25.00
Occupation (Required) Pilot	Aggregate year-to-date	\$725.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lana Richardson Mailing Address 10611 County Road 500 City, State, Zip Code Ripley, MS 38663-9199 Name of Employer (Required) Not Employed	10/27/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$905.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Minter Mailing Address 1246 Ostrander Rd City, State, Zip Code Kelso, WA 98626-9395 Name of Employer (Required) University of New Mexico	10/27/2023	\$5.00
Occupation (Required) Business Analyst	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gary L. Smith Mailing Address 965 E Scenic Dr City, State, Zip Code Pass Christian, MS 39571-4701 Name of Employer (Required) Not Employed	10/27/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ken Hipple Mailing Address 311 Summer Oak Trl City, State, Zip Code Madison, MS 39110-9147 Name of Employer (Required) Not Employed	10/08/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,150.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed	10/18/2023	\$25.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$520.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/28/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Travis Childers Mailing Address 304 W Church St City, State, Zip Code Booneville, MS 38829-3313 Name of Employer (Required) Childers Realty & Associates	10/09/2023	\$1,000.00
Occupation (Required) Real Estate Broker	Aggregate year-to-date	\$2,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cari White Mailing Address 92 -1553 Aliinui Dr City, State, Zip Code Kapolei, HI 96707-2228 Name of Employer (Required) Not Employed	10/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeffrey Hunt Mailing Address 299 W Main St City, State, Zip Code Westminster, MD 21158-4329 Name of Employer (Required) Not Employed	10/29/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Witherspoon Mailing Address 910 Lincoln Ave City, State, Zip Code Oxford, MS 38655-4328 Name of Employer (Required) Not Employed	10/10/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed	10/02/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rubye Del Harden Mailing Address 114 N Spring St City, State, Zip Code Tupelo, MS 38804-3922 Name of Employer (Required) SprintPrint Occupation (Required) Business Owner	10/03/2023	\$100.00
Aggregate year-to-date		\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Vicki Slater Mailing Address 115 Leppingwell Dr City, State, Zip Code Madison, MS 39110-6526 Name of Employer (Required) Self Employed Occupation (Required) Attorney	10/23/2023	\$1,000.00
Aggregate year-to-date		\$6,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Randall Kempner Mailing Address 3903 Idlewild Rd City, State, Zip Code Austin, TX 78731-6144 Name of Employer (Required) Cynthia and George Mitchell Foundation Occupation (Required) Philanthropic Management	10/23/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Antonow Mailing Address 3336 Whippoorwill Ln City, State, Zip Code Oxford, MS 38655-5311 Name of Employer (Required) City of Oxford Occupation (Required) Alderman	10/04/2023	\$25.00
Aggregate year-to-date		\$825.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marian Kurz Mailing Address 1300 Central St City, State, Zip Code Evanston, IL 60201-1676 Name of Employer (Required) Self Employed	10/05/2023	\$10.00
Occupation (Required) Public Relations	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilbur T. Peer Mailing Address 13215 Ridgheaven Rd City, State, Zip Code Little Rock, AR 72211-2215 Name of Employer (Required) Self Employed	10/05/2023	\$250.00
Occupation (Required) Physician	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Vi Risser Mailing Address 377 County Road 653B City, State, Zip Code Saltillo, MS 38866-5716 Name of Employer (Required) Not Employed	10/15/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,414.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie M. Westbrook Mailing Address 800 College Hill Rd City, State, Zip Code Oxford, MS 38655-2767 Name of Employer (Required) Self Employed	10/16/2023	\$500.00
Occupation (Required) Marketing Strategist	Aggregate year-to-date	\$69,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Keith Johnson Mailing Address PO Box 421 City, State, Zip Code Nesbit, MS 38651-0421 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/27/2023	\$50.00
Aggregate year-to-date		\$1,400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brad Riley Mailing Address 1643 Northlake Dr City, State, Zip Code Tupelo, MS 38804-1333 Name of Employer (Required) Cook & Riley Occupation (Required) President	10/27/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Wasson Mailing Address 9611 Attala Road 2101 City, State, Zip Code Ethel, MS 39067-6320 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/08/2023	\$25.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bill Bauder Mailing Address 2718 University Club Dr City, State, Zip Code Baton Rouge, LA 70810-0431 Name of Employer (Required) Priority Managment Group Occupation (Required) Business Owner	10/28/2023	\$500.00
Aggregate year-to-date		\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Kidd Mailing Address 1898 Wycliff Rd NW City, State, Zip Code Atlanta, GA 30309-1885 Name of Employer (Required) Not Employed	10/09/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dianne McGehee Mailing Address 241 E 16th Ave City, State, Zip Code Gulf Shores, AL 36542-3519 Name of Employer (Required) The Home Depot	10/09/2023	\$25.00
Occupation (Required) Cashier	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Audrey Mcbride Mailing Address 503 Academy Rd City, State, Zip Code Starkville, MS 39759-4047 Name of Employer (Required) McBride & Co. Real Estate, Broker/Owner	10/19/2023	\$25.00
Occupation (Required) Realtor	Aggregate year-to-date	\$615.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Budd Mailing Address 114 Mansfield Dr City, State, Zip Code Natchez, MS 39120-4931 Name of Employer (Required) Not Employed	10/29/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Peyton D. Prospere Mailing Address 1336 Saint Mary St City, State, Zip Code Jackson, MS 39202-1848 Name of Employer (Required) Watkins & Eager PLLC	10/29/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Minter Mailing Address 1246 Ostrander Rd City, State, Zip Code Kelso, WA 98626-9395 Name of Employer (Required) University of New Mexico	10/10/2023	\$15.00
Occupation (Required) Business Analyst	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lora Travnicek Mailing Address 2668 Beach Blvd City, State, Zip Code Biloxi, MS 39531-4521 Name of Employer (Required) Not Employed	10/20/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Moore Mailing Address 7113 Flagstaff Ranch St City, State, Zip Code Las Vegas, NV 89166-7144 Name of Employer (Required) University of Mississippi	10/11/2023	\$10.00
Occupation (Required) Professor	Aggregate year-to-date	\$340.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Douglas McKenzie Mailing Address 18160 Cottonwood Rd City, State, Zip Code Sunriver, OR 97707-9317 Name of Employer (Required) Not Employed	10/12/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Philip Kuhn Mailing Address PO Box 82 City, State, Zip Code Raymond, MS 39154-0082 Name of Employer (Required) Not Employed	10/03/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$365.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Daniel Pair Mailing Address 968 Road 261 City, State, Zip Code Tupelo, MS 38801-7600 Name of Employer (Required) Social Security Administration	10/03/2023	\$50.00
Occupation (Required) Claims Specialist	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Glenn Taylor Mailing Address 3644 Old Canton Rd City, State, Zip Code Jackson, MS 39216-3313 Name of Employer (Required) Copeland Cook Taylor & Bush	10/13/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$625.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/23/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,008.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ramona Bernard Mailing Address 301 Panola St City, State, Zip Code Water Valley, MS 38965-2424 Name of Employer (Required) Not Employed	10/04/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$380.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brian Fisher Mailing Address 1311 Webster St City, State, Zip Code Alameda, CA 94501-3804 Name of Employer (Required) Not Employed	10/24/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	10/15/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,080.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Calvin Fitzhugh Mailing Address 135 S Alpine St City, State, Zip Code Ripley, TN 38063-1623 Name of Employer (Required) Bank Of Ripley	10/25/2023	\$100.00
Occupation (Required) Banker	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathy Olsen Mailing Address 4416 Sunnybrook Dr City, State, Zip Code Nashville, TN 37205-3860 Name of Employer (Required) Not Employed	10/16/2023	\$10,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$115,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ygondine W. Sturdivant Mailing Address PO Box 230 City, State, Zip Code Glendora, MS 38928-0230 Name of Employer (Required) Not Employed	10/16/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$6,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Q. Evans Mailing Address 321 Water Garden Ter City, State, Zip Code Madison, MS 39110-6954 Name of Employer (Required) Not Employed	10/16/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$515.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/07/2023	\$10.00
Aggregate year-to-date		\$490.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeff Seabold Mailing Address 3640 Crane Blvd City, State, Zip Code Jackson, MS 39216-3603 Name of Employer (Required) Seabold Architectural Studio Occupation (Required) Architect	10/28/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Guelma Hopkins Mailing Address 3624 Wedghill Way City, State, Zip Code Fort Worth, TX 76133-2156 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/09/2023	\$5.00
Aggregate year-to-date		\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda McLendon Mailing Address 4283 Highway 18 E City, State, Zip Code Quitman, MS 39355-8728 Name of Employer (Required) Ochsner Rush Health Occupation (Required) Midwife	10/29/2023	\$25.00
Aggregate year-to-date		\$204.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	10/10/2023	\$6.00
Aggregate year-to-date		\$1,452.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paula Temperilli Mailing Address 15231 Rainhollow Dr City, State, Zip Code Houston, TX 77070-1328 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/20/2023	\$50.00
Aggregate year-to-date		\$860.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jim Spearman Mailing Address 2600 Arlington Ave S City, State, Zip Code Birmingham, AL 35205-4161 Name of Employer (Required) Self Employed Occupation (Required) Real Estate Development	10/20/2023	\$250.00
Aggregate year-to-date		\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/12/2023	\$5.00
Aggregate year-to-date		\$1,008.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alan Saleski Mailing Address 2116 Harrison St City, State, Zip Code Evanston, IL 60201-2223 Name of Employer (Required) Loyola University Chicago	10/12/2023	\$50.00
Occupation (Required) Professor	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Casey Mailing Address 229 Peachtree Hills Ave NE City, State, Zip Code Atlanta, GA 30305-4413 Name of Employer (Required) Not Employed	10/13/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,075.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Refund of Field Consulting</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Chrome Strategic Partners LLC Mailing Address 745 Gardner St City, State, Zip Code Jackson, MS 39206-5937 Name of Employer (Required)	10/23/2023	\$34,000.00
Occupation (Required)	Aggregate year-to-date	\$34,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tim W. Porter Mailing Address 825 Ridgewood Rd City, State, Zip Code Ridgeland, MS 39157-4419 Name of Employer (Required) Porter & Malouf	10/23/2023	\$2,500.00
Occupation (Required) Legal	Aggregate year-to-date	\$7,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth A. Thomas Mailing Address 3510 Multiview Dr City, State, Zip Code Los Angeles, CA 90068-1222 Name of Employer (Required) Self Employed	10/04/2023	\$2,500.00
Occupation (Required) Producer	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sarah O'Neill Mailing Address 79 Washington Pl City, State, Zip Code New York, NY 10011-9137 Name of Employer (Required) Not Employed	10/24/2023	\$2,500.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Lynch Mailing Address 617 Camelia Trl City, State, Zip Code Brandon, MS 39047-6316 Name of Employer (Required) Not Employed	10/24/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,675.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa McCollom Mailing Address 201 Hoffman Ln City, State, Zip Code Waveland, MS 39576-4312 Name of Employer (Required) American Airlines	10/25/2023	\$25.00
Occupation (Required) Flight Attendant	Aggregate year-to-date	\$1,111.75

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anthony Baggett Mailing Address 104 N Broadway St City, State, Zip Code Tupelo, MS 38804-3967 Name of Employer (Required) Busted Spring, LLC	10/25/2023	\$50.00
Occupation (Required) Web Developer	Aggregate year-to-date	\$605.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed	10/16/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$575.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Hamilton Mailing Address 3701 58th Ave City, State, Zip Code Meridian, MS 39307-2905 Name of Employer (Required) Self Employed	10/07/2023	\$10.00
Occupation (Required) Restauranteur	Aggregate year-to-date	\$305.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margo Salone Mailing Address 71 Matherville Frost Bridge Rd City, State, Zip Code Shubuta, MS 39360-9201 Name of Employer (Required) Not Employed	10/17/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$272.60

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/27/2023	\$11.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Angelos Vamvakas Mailing Address 3161 Wayne Dr City, State, Zip Code Diberville, MS 39540-8554 Name of Employer (Required) Self Employed	10/08/2023	\$25.00
Occupation (Required) Psychiatrist	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Clarence E. Smith Mailing Address 423 W Franklin St City, State, Zip Code Tupelo, MS 38804-3821 Name of Employer (Required) Not Employed	10/18/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$586.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed	10/28/2023	\$25.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$520.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Medford Memory Leake Jr Mailing Address 400 Warioto Way City, State, Zip Code Ashland City, TN 37015-1391 Name of Employer (Required) Not Employed	10/09/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mike Upton Mailing Address 212 Belle Pointe City, State, Zip Code Madison, MS 39110-8286 Name of Employer (Required) Not Employed	10/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/29/2023	\$130.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Santa Cruz Mailing Address 5825 Cedar Rd City, State, Zip Code Ocean Springs, MS 39564-2250 Name of Employer (Required) Not Employed	10/10/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$470.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tiffany Bensen Mailing Address 237 Timber Ln City, State, Zip Code Oxford, MS 38655-5851 Name of Employer (Required) University of Mississippi	10/20/2023	\$25.00
Occupation (Required) Educator	Aggregate year-to-date	\$310.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John B. Clark Mailing Address 167 Rolling Meadows Rd City, State, Zip Code Ridgeland, MS 39157-9488 Name of Employer (Required) Not Employed	10/21/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$4,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	10/02/2023	\$30.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,452.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Bill Rusk Mailing Address 704 Windward Rd City, State, Zip Code Jackson, MS 39206-2316 Name of Employer (Required) Not Employed	10/12/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Virден Jones Mailing Address 686 Hazelton Dr City, State, Zip Code Madison, MS 39110-7332 Name of Employer (Required) Not Employed	10/22/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,698.90
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Hinton Mailing Address 1515 Pauger St City, State, Zip Code New Orleans, LA 70116-1623 Name of Employer (Required) Not Employed	10/23/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Smith Mailing Address 136 St Regis Dr City, State, Zip Code Madison, MS 39110-7798 Name of Employer (Required) Mississippi Baptist Medical Center	10/04/2023	\$50.00
Occupation (Required) Pharmacist	Aggregate year-to-date	\$846.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeffrey Blum Mailing Address 425 Riverside Dr City, State, Zip Code New York, NY 10025-7737 Name of Employer (Required) Not Employed	10/24/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ford Sutherlin Mailing Address 2211 Odonnell Blvd City, State, Zip Code Gulfport, MS 39507-2147 Name of Employer (Required) Not Employed	10/24/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elise Gillespie Mailing Address 1013 S Lamar Blvd City, State, Zip Code Oxford, MS 38655-4739 Name of Employer (Required) University of Mississippi	10/25/2023	\$25.00
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$1,325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name James C. Johnson Mailing Address 13050 PO City, State, Zip Code Sacramento, CA 95813 Name of Employer (Required) Not Employed	10/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William A. Cox Mailing Address 1739 Swann St NW City, State, Zip Code Washington, DC 20009-5536 Name of Employer (Required) Not Employed	10/25/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,915.00

Reporting Period 10/1/2023 through 10/29/2023**ITEMIZED RECEIPTS**

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ken Hipple Mailing Address 311 Summer Oak Trl City, State, Zip Code Madison, MS 39110-9147 Name of Employer (Required) Not Employed	10/06/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,150.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rose Harmon Mailing Address 4011 Breezy Hill Ln City, State, Zip Code Ocean Springs, MS 39564-8511 Name of Employer (Required) Not Employed	10/06/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Henry L. Coaxum Jr Mailing Address 231 Harbor Cir City, State, Zip Code New Orleans, LA 70126-1103 Name of Employer (Required) Coaxum Enterprises, Inc.	10/26/2023	\$1,400.00
Occupation (Required) Restauranteur	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code Oxford, MS 38655-0400 Name of Employer (Required) Not Employed	10/07/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$925.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marian Barksdale Mailing Address 917 Old Taylor Rd City, State, Zip Code Oxford, MS 38655-4637 Name of Employer (Required) Not Employed	10/17/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Alec Bash Mailing Address 155 Jackson St City, State, Zip Code San Francisco, CA 94111-1943 Name of Employer (Required) Not Employed	10/28/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jana Napoli Mailing Address 3637 Canal St City, State, Zip Code New Orleans, LA 70119-6110 Name of Employer (Required) Not Employed	10/19/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name David Clark Mailing Address 110 Olympia Flds City, State, Zip Code Jackson, MS 39211-2509 Name of Employer (Required) Not Employed	10/10/2023	\$2,500.00
Occupation (Required) Retired	Aggregate year-to-date	\$26,003.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sharon Burke	10/20/2023	\$20.00
Mailing Address 84 Mesa Mount Olive Rd		
City, State, Zip Code Tylertown, MS 39667-5851		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$206.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart	10/21/2023	\$50.00
Mailing Address 190 Lenny Rd		
City, State, Zip Code Potsdam, NY 13676-4429		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ed Penny	10/12/2023	\$100.00
Mailing Address 4366 N Honeysuckle Ln		
City, State, Zip Code Jackson, MS 39211-6131		
Name of Employer (Required) Self Employed		
Occupation (Required) Farmer	Aggregate year-to-date	\$367.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gratia Karmes	10/22/2023	\$5.00
Mailing Address 417 Chapin St		
City, State, Zip Code Starkville, MS 39759-2620		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$520.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bob Freeman Mailing Address 1109 B Lipscomb Dr City, State, Zip Code Nashville, TN 37204-4121 Name of Employer (Required) Freeman Webb, Incorporated	10/03/2023	\$1,000.00
Occupation (Required) Real Estate	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/13/2023	\$20.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine	10/04/2023	\$10.00
Occupation (Required) Caretaker	Aggregate year-to-date	\$245.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	10/24/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,080.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dustin Markle Mailing Address 624 N Madison St City, State, Zip Code Tupelo, MS 38804-2016 Name of Employer (Required) North Mississippi Medical Center	10/05/2023	\$500.00
Occupation (Required) Family Physician	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny Sneed Mailing Address 9300 Wilshire Blvd City, State, Zip Code Beverly Hills, CA 90212-3209 Name of Employer (Required) Self Employed	10/25/2023	\$2,500.00
Occupation (Required) Actor	Aggregate year-to-date	\$4,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kenneth McGraw Mailing Address 1406 Johnson Ave City, State, Zip Code Oxford, MS 38655-4720 Name of Employer (Required) Not Employed	10/25/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/25/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Daniel Ellis Mailing Address 1800 Beach Dr City, State, Zip Code Gulfport, MS 39507-1556 Name of Employer (Required) Self Employed	10/06/2023	\$100.00
Occupation (Required) Author	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Billy Wilemon Mailing Address 103 Davis Dr City, State, Zip Code Aberdeen, MS 39730-2909 Name of Employer (Required) Euphrates Consulting Group, LLC	10/16/2023	\$25.00
Occupation (Required) Chemical Engineer	Aggregate year-to-date	\$345.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeffrey Watt Mailing Address 915 Old Taylor Rd City, State, Zip Code Oxford, MS 38655-4637 Name of Employer (Required) University of Mississippi	10/16/2023	\$100.00
Occupation (Required) Professor	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name C. Jackson Williams Mailing Address PO Box 69 City, State, Zip Code Taylor, MS 38673-0069 Name of Employer (Required) University of Mississippi	10/26/2023	\$25.00
Occupation (Required) Teacher	Aggregate year-to-date	\$350.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine Occupation (Required) Caretaker	10/26/2023	\$10.00
Aggregate year-to-date		\$245.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Daniels Mailing Address 120 Cascade Ave City, State, Zip Code Winston Salem, NC 27127-2027 Name of Employer (Required) University of North Carolina School of the Arts Occupation (Required) Associate Dean	10/17/2023	\$100.00
Aggregate year-to-date		\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Alexander Mailing Address 46 Sagewood Dr City, State, Zip Code Brandon, MS 39042-2526 Name of Employer (Required) Fidelity Occupation (Required) Representative	10/17/2023	\$25.00
Aggregate year-to-date		\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/27/2023	\$50.00
Aggregate year-to-date		\$2,700.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/27/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Nancy Groninger Mailing Address 5361 Saratoga St City, State, Zip Code Yorba Linda, CA 92886-4825 Name of Employer (Required) Not Employed	10/09/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$283.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Betty Sparkman Mailing Address 145 Least Tern Dr City, State, Zip Code Pass Christian, MS 39571-4844 Name of Employer (Required) Not Employed	10/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Sammy Fowler Mailing Address 282 Main St City, State, Zip Code Nettleton, MS 38858-6012 Name of Employer (Required) US Steel	10/29/2023	\$250.00
Occupation (Required) Construction	Aggregate year-to-date	\$1,750.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bertis Downs Mailing Address PO Box 1864 City, State, Zip Code Athens, GA 30603-1864 Name of Employer (Required) Self Employed	10/20/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leann Hines Mailing Address 719 Sumner Ave City, State, Zip Code Greenwood, MS 38930-2507 Name of Employer (Required) Not Employed	10/20/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cristina Pickering Mailing Address 232 Calumet Dr City, State, Zip Code Madison, MS 39110-8685 Name of Employer (Required) Not Employed	10/11/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$675.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Don A. Zatroch Mailing Address 2366 17th Ave NW City, State, Zip Code Saint Paul, MN 55112-5204 Name of Employer (Required) Not Employed	10/11/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathleen Obeirne Mailing Address 237 Sawbridge Dr City, State, Zip Code Ridgeland, MS 39157-8756 Name of Employer (Required) Not Employed	10/12/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$211.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Claire Levine Mailing Address 6400 N Montana Ave City, State, Zip Code Portland, OR 97217-4879 Name of Employer (Required) Not Employed	10/12/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$530.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dorothy Bedford Mailing Address PO Box 512 City, State, Zip Code Valley Forge, PA 19481-0512 Name of Employer (Required) Not Employed	10/22/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Democratic Governors Association Mailing Address 1225 Eye St NW City, State, Zip Code Washington, DC 20005-3914 Name of Employer (Required)	10/13/2023	\$350,000.00
Occupation (Required)	Aggregate year-to-date	\$5,850,171.72

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nancy Damico Mailing Address 500 Pontchartrain Dr City, State, Zip Code Slidell, LA 70458-4332 Name of Employer (Required) Law Offices of Frank D'Amico, Sr.	10/24/2023	\$1,000.00
Occupation (Required) Business Manager	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed	10/24/2023	\$25.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$520.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Doug Edwards Mailing Address 907 Manor Way City, State, Zip Code Los Altos, CA 94024-5622 Name of Employer (Required) Not Employed	10/26/2023	\$2,900.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Shawn S. Brevard Mailing Address 805 Oak Grove Rd City, State, Zip Code Tupelo, MS 38804-2031 Name of Employer (Required) Mississippi Arts Commission	10/26/2023	\$1,000.00
Occupation (Required) Commissioner	Aggregate year-to-date	\$2,700.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tim Adams Mailing Address 1904 Gilless Pt S City, State, Zip Code Southaven, MS 38671-6995 Name of Employer (Required) Heritage Church	10/17/2023	\$1,000.00
Occupation (Required) Pastor	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sidney Whitehurst Mailing Address PO Box 966 City, State, Zip Code Iuka, MS 38852-0966 Name of Employer (Required) Not Employed	10/27/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nancy Groninger Mailing Address 5361 Saratoga St City, State, Zip Code Yorba Linda, CA 92886-4825 Name of Employer (Required) Not Employed	10/09/2023	\$3.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$283.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathleen Obeirne Mailing Address 237 Sawbridge Dr City, State, Zip Code Ridgeland, MS 39157-8756 Name of Employer (Required) Not Employed	10/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$211.60

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jacqueline Amos Mailing Address 168 Kilkenny Blvd City, State, Zip Code Jackson, MS 39209-3744 Name of Employer (Required) City of Canton Occupation (Required) City Administrator	10/29/2023	\$25.00
Aggregate year-to-date		\$410.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Janis Mailing Address 225 W 83rd St City, State, Zip Code New York, NY 10024-4952 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/20/2023	\$750.00
Aggregate year-to-date		\$4,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Vannewkirk Mailing Address 245 Seven Farms Dr City, State, Zip Code Daniel Island, SC 29492-8500 Name of Employer (Required) Cross Occupation (Required) Business Owner	10/02/2023	\$50.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alan Arendale Mailing Address 345 Woodstone Rd City, State, Zip Code Clinton, MS 39056-4945 Name of Employer (Required) Cannon Toyota Vicksburg Occupation (Required) Sales Consultant	10/23/2023	\$25.00
Aggregate year-to-date		\$285.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Seth Taylor Mailing Address 5501 Glenridge Dr City, State, Zip Code Atlanta, GA 30342-4907 Name of Employer (Required) Ascensus	10/23/2023	\$25.00
Occupation (Required) Senior Actuarial Analyst	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rick Cleveland Mailing Address 3965 Council Cir City, State, Zip Code Jackson, MS 39206-5812 Name of Employer (Required) Self Employed	10/14/2023	\$100.00
Occupation (Required) Journalist	Aggregate year-to-date	\$341.75
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nell Johnson Mailing Address 24341 Saint John Rd City, State, Zip Code Gulfport, MS 39503-8803 Name of Employer (Required) Not Employed	10/14/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Denise Pilgrim Mailing Address 108 Bellingham Dr City, State, Zip Code Madison, MS 39110-8524 Name of Employer (Required) Not Employed	10/24/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$722.90

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Walker Mailing Address 1302 E Second St City, State, Zip Code Pass Christian, MS 39571-3110 Name of Employer (Required) Cardinal Financial	10/25/2023	\$100.00
Occupation (Required) Branch Manager	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Vi Risser Mailing Address 377 County Road 653B City, State, Zip Code Saltillo, MS 38866-5716 Name of Employer (Required) Not Employed	10/25/2023	\$14.60
Occupation (Required) Retired	Aggregate year-to-date	\$3,414.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Mullins Mailing Address 1521 Wisteria Dr City, State, Zip Code Clarksdale, MS 38614-2930 Name of Employer (Required) Not Employed	10/06/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debbie Hall Mailing Address 127 Sesame Rd City, State, Zip Code Tupelo, MS 38801-8615 Name of Employer (Required) University of Mississippi	10/16/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$562.40

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Molpus Mailing Address 3512 Center Crossing Rd City, State, Zip Code Kosciusko, MS 39090-8823 Name of Employer (Required) Not Employed	10/26/2023	\$5,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sandra Bender Mailing Address 209 Southampton Rd City, State, Zip Code Hattiesburg, MS 39401-7070 Name of Employer (Required) Not Employed	10/17/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nathan Prescott Mailing Address 309 Live Oak Ave City, State, Zip Code Ocean Springs, MS 39564-3909 Name of Employer (Required) Self Employed	10/27/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Mcallister Cox Mailing Address 3614 N Fremont St City, State, Zip Code Chicago, IL 60613-4372 Name of Employer (Required) Rush Street Interactive, LP	10/27/2023	\$500.00
Occupation (Required) CCO	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name The NEA Fund for Children & Public Educa Mailing Address 1201 16th St NW City, State, Zip Code Washington, DC 20036-3201 Name of Employer (Required) _____	10/18/2023	\$50,000.00
Occupation (Required)	Aggregate year-to-date	\$75,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sheila Newtown Mailing Address 3893 County Route 10 City, State, Zip Code De Peyster, NY 13633-3405 Name of Employer (Required) Not Employed	10/19/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$355.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	10/19/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$490.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas D. Bourdeaux Mailing Address 17 Lydon Ln City, State, Zip Code Cape Elizabeth, ME 04107-1209 Name of Employer (Required) Diamond Lake Management	10/10/2023	\$1,500.00
Occupation (Required) President	Aggregate year-to-date	\$1,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Moore Mailing Address 7113 Flagstaff Ranch St City, State, Zip Code Las Vegas, NV 89166-7144 Name of Employer (Required) University of Mississippi	10/10/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$340.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name W. R. Pinkston Mailing Address 1132 Windsor Rd City, State, Zip Code Teaneck, NJ 07666-2724 Name of Employer (Required) Morgan State University	10/11/2023	\$100.00
Occupation (Required) Educator	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jan F. Gadow Mailing Address 144 Brae Burn Dr City, State, Zip Code Jackson, MS 39211-2501 Name of Employer (Required) Not Employed	10/02/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Virginia Wilson Mailing Address 3696 High Point Dr City, State, Zip Code Memphis, TN 38122-3752 Name of Employer (Required) Epstein Becker Green	10/12/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$255.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Taylor Mailing Address 437 New York Ave NW City, State, Zip Code Washington, DC 20001-4761 Name of Employer (Required) White Oak Road, LLC	10/03/2023	\$1,000.00
Occupation (Required) Principal	Aggregate year-to-date	\$1,350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Beverly Rodriguez Mailing Address 10640 Lebanon Pinegrove Rd City, State, Zip Code Terry, MS 39170-9269 Name of Employer (Required) Not Employed	10/14/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/05/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,008.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carol Halliburton Mailing Address 5032 Sunnyvale Dr City, State, Zip Code Jackson, MS 39211-4843 Name of Employer (Required) Not Employed	10/06/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$491.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gary Anderson Mailing Address 828 Battle Rd City, State, Zip Code Byhalia, MS 38611-8999 Name of Employer (Required) Asics America	10/16/2023	\$1,000.00
Occupation (Required) Shipping	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Vivian Lamb Mailing Address 122 Appaloosa Trl City, State, Zip Code Apex, NC 27523-6094 Name of Employer (Required) Not Employed	10/07/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Q. Evans Mailing Address 321 Water Garden Ter City, State, Zip Code Madison, MS 39110-6954 Name of Employer (Required) Not Employed	10/17/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$515.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rickey T. Moore Mailing Address PO Box 145 City, State, Zip Code Wheeler, MS 38880-0145 Name of Employer (Required) Not Employed	10/27/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$600.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jack Betkoski Mailing Address 118 Munson Rd City, State, Zip Code Beacon Falls, CT 06403-1244 Name of Employer (Required) State of Connecticut	10/28/2023	\$50.00
Occupation (Required) Commissioner	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa Stevens Mailing Address 101 Boone Dr City, State, Zip Code Booneville, MS 38829-2609 Name of Employer (Required) NE MS Community College	10/19/2023	\$25.00
Occupation (Required) College Instructor	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hackett Cummins Mailing Address 9 Nelson Ln City, State, Zip Code Pass Christian, MS 39571-4716 Name of Employer (Required) Not Employed	10/19/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles S. Norris Jr Mailing Address 9 Club Dr City, State, Zip Code Natchez, MS 39120-9587 Name of Employer (Required) Not Employed	10/19/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Terry Dwyer Mailing Address 950 Fairfax Cir City, State, Zip Code Jackson, MS 39211-4250 Name of Employer (Required) Not Employed	10/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/29/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$530.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Working for Working Americans PAC Mailing Address 101 Constitution Ave NW City, State, Zip Code Washington, DC 20001-2153 Name of Employer (Required)	10/10/2023	\$100,000.00
Occupation (Required)	Aggregate year-to-date	\$100,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mark McClinton Mailing Address 100 E Main St City, State, Zip Code New Albany, MS 38652-3921 Name of Employer (Required) Self Employed	10/10/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joyce Johnson Mailing Address 178 Victoria Pl City, State, Zip Code Madison, MS 39110-5502 Name of Employer (Required) Veterans Health Administration	10/20/2023	\$100.00
Occupation (Required) Physician	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jim Harden Mailing Address 103 Tuxford Rd City, State, Zip Code Starkville, MS 39759-4062 Name of Employer (Required) Not Employed	10/11/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Reed Hillen Mailing Address 2595 Mount Vernon Rd City, State, Zip Code Tupelo, MS 38804-7102 Name of Employer (Required) Hillen, Wicker & Tapscott, P.A.	10/21/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,200.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cindy Akins Mailing Address 86449 Meadowwood Dr City, State, Zip Code Yulee, FL 32097-6427 Name of Employer (Required) Not Employed	10/02/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$896.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dan Weebb Mailing Address 423 CR-885 City, State, Zip Code Saltillo, MS 38866 Name of Employer (Required) Webb Sanders & Williams Occupation (Required) Attorney	10/12/2023	\$2,500.00
Aggregate year-to-date		\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann White Mailing Address 3434 Mossey Cup Dr City, State, Zip Code Saltillo, MS 38866-5803 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/12/2023	\$5.00
Aggregate year-to-date		\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed Occupation (Required) Accountant	10/22/2023	\$5.00
Aggregate year-to-date		\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie M. Westbrook Mailing Address 800 College Hill Rd City, State, Zip Code Oxford, MS 38655-2767 Name of Employer (Required) Self Employed Occupation (Required) Marketing Strategist	10/22/2023	\$10,000.00
Aggregate year-to-date		\$69,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jonathan Adrabi Mailing Address 57 NE 93rd St City, State, Zip Code Miami Shores, FL 33138-2815 Name of Employer (Required) LSN Partners	10/13/2023	\$500.00
Occupation (Required) Partner	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed	10/04/2023	\$50.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$520.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nathan Prescott Mailing Address 309 Live Oak Ave City, State, Zip Code Ocean Springs, MS 39564-3909 Name of Employer (Required) Self Employed	10/14/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jean E. Ausborn Mailing Address 1928 Bakersfield Dr N City, State, Zip Code Nesbit, MS 38651-6006 Name of Employer (Required) Not Employed	10/24/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marcus Mason Mailing Address 13301 Moran Dr City, State, Zip Code North Potomac, MD 20878-3926 Name of Employer (Required) The Madison Group, LLC	10/05/2023	\$1,000.00
Occupation (Required) Senior Partner	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frances L. Meyer Mailing Address 9750 Troon Ct City, State, Zip Code Blue Ash, OH 45241-3349 Name of Employer (Required) Not Employed	10/15/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/06/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael K. Gemmell Mailing Address 500 Orleans St City, State, Zip Code Natchez, MS 39120-3510 Name of Employer (Required) Retired	10/16/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Butts Mailing Address 4514 Franklin Blvd City, State, Zip Code Cleveland, OH 44102-3433 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/17/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hannah Banks Mailing Address 107 Garland Rd City, State, Zip Code Newton, MA 02459-1741 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/17/2023	\$25.00
Aggregate year-to-date		\$280.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melissa M Walker Mailing Address 102 Palm Ave City, State, Zip Code Pass Christian, MS 39571-4807 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/27/2023	\$100.00
Aggregate year-to-date		\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Camp Mailing Address 104 1/2 Maxwell St City, State, Zip Code Starkville, MS 39759-3422 Name of Employer (Required) Starkville Real Estate Occupation (Required) Realtor	10/27/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name AK McCarthy Mailing Address 22332 Freddie Frank Rd City, State, Zip Code Long Beach, MS 39560-9728 Name of Employer (Required) Information Requested	10/27/2023	\$300.00
Occupation (Required) Information Requested	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required) Not Employed	10/08/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$642.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Reilly Morse Mailing Address 929 Bridge St City, State, Zip Code Gulfport, MS 39507-3432 Name of Employer (Required) Not Employed	10/18/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,975.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sheet Metal Air Rail Transportation Poli Mailing Address 1750 New York Ave NW City, State, Zip Code Washington, DC 20006-5301 Name of Employer (Required)	10/28/2023	\$25,000.00
Occupation (Required)	Aggregate year-to-date	\$75,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hugh Kuykendall Mailing Address 176 Duncan Rd City, State, Zip Code Belmont, MS 38827-8726 Name of Employer (Required) Not Employed	10/29/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sally Faulkner Mailing Address 108 Sumach St City, State, Zip Code Lookout Mountai, TN 37350-1132 Name of Employer (Required) Not Employed	10/10/2023	\$2,500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$5,525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ingrid D. Williams Mailing Address 310 Concord Dr City, State, Zip Code Clinton, MS 39056-5721 Name of Employer (Required) Mississippi Public Health Institute	10/20/2023	\$25.00
Occupation (Required) Policy Analyst	Aggregate year-to-date	\$235.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John H. Cocke Mailing Address 2 Oak Knoll Dr City, State, Zip Code Clarksdale, MS 38614-1951 Name of Employer (Required) Not Employed	10/21/2023	\$2,500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$5,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Lewis Mailing Address 404 Galleria Dr City, State, Zip Code Oxford, MS 38655-4383 Name of Employer (Required) Self Employed	10/02/2023	\$10.00
Occupation (Required) Attorney	Aggregate year-to-date	\$335.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Leslie Steverson Mailing Address 2313 Farrell Cir City, State, Zip Code Gulfport, MS 39507-2222 Name of Employer (Required) Not Employed	10/22/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mary Geoghegan Mailing Address 227 Greenfield Pl City, State, Zip Code Brandon, MS 39047-9007 Name of Employer (Required) Not Employed	10/22/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Eugene Perrier Mailing Address 5540 Gibson Rd City, State, Zip Code Vicksburg, MS 39180-6318 Name of Employer (Required) Self Employed	10/03/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$400.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cedric Burnett Mailing Address PO Box 961 City, State, Zip Code Tunica, MS 38676-0961 Name of Employer (Required) State of Mississippi	10/13/2023	\$500.00
Occupation (Required) Representative	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Janis Bryant Mailing Address 265 Lake Valley Dr City, State, Zip Code Starkville, MS 39759-7480 Name of Employer (Required) Not Employed	10/24/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Abby Hopper Mailing Address 2906 Stanton Ave City, State, Zip Code Silver Spring, MD 20910-1217 Name of Employer (Required) Solar Energy Industries Association	10/05/2023	\$500.00
Occupation (Required) CEO	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John Wages Mailing Address 138 Road 199 City, State, Zip Code Tupelo, MS 38801-7809 Name of Employer (Required) Panorama Research, Inc.	10/05/2023	\$100.00
Occupation (Required) Research Scientist	Aggregate year-to-date	\$375.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Casey Mailing Address 229 Peachtree Hills Ave NE City, State, Zip Code Atlanta, GA 30305-4413 Name of Employer (Required) Not Employed	10/15/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,075.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alfreda Spell Mailing Address 5176 Reddoch Dr City, State, Zip Code Jackson, MS 39211-4540 Name of Employer (Required) Not Employed	10/26/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$235.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Meredith Gowan Le Goff Mailing Address 1629 Acadia Ct City, State, Zip Code Jackson, MS 39211-5644 Name of Employer (Required) Self Employed	10/17/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$771.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ed Clynch Mailing Address 401 Colonial Cir City, State, Zip Code Starkville, MS 39759-4213 Name of Employer (Required) Not Employed	10/27/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$950.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elaine K. Stevens Mailing Address 9229 Cartwright Ln City, State, Zip Code Biloxi, MS 39532-9796 Name of Employer (Required) Stevens Media Productions	10/27/2023	\$50.00
Occupation (Required) Writer	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine	10/18/2023	\$20.00
Occupation (Required) Caretaker	Aggregate year-to-date	\$245.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kari Conrad Mailing Address 8 Shiner St City, State, Zip Code Glen Ullin, ND 58631-1200 Name of Employer (Required) Not Employed	10/18/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hannah Banks Mailing Address 107 Garland Rd City, State, Zip Code Newton, MA 02459-1741 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$280.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Rabalais Mailing Address 132 Sara Fox Dr City, State, Zip Code Brandon, MS 39047-5526 Name of Employer (Required) Not Employed	10/29/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$377.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Len Pinkley Mailing Address 60010 Indian Cv City, State, Zip Code Amory, MS 38821-6007 Name of Employer (Required) Not Employed	10/10/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rod Luther Mailing Address 13963 Highway 5 City, State, Zip Code Mountain View, AR 72560-8044 Name of Employer (Required) Not Employed	10/11/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$207.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frances M. Coleman Mailing Address 108 Royal Garden Ter City, State, Zip Code Madison, MS 39110-7637 Name of Employer (Required) Not Employed	10/21/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$465.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name David Gambetta Mailing Address 130 Harvesters Sq City, State, Zip Code Tupelo, MS 38801-9510 Name of Employer (Required) Mueller Co.	10/22/2023	\$50.00
Occupation (Required) Engineer	Aggregate year-to-date	\$517.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Vicki Slater Mailing Address 115 Leppingwell Dr City, State, Zip Code Madison, MS 39110-6526 Name of Employer (Required) Self Employed	10/23/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$6,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name George B. Schimmel Mailing Address 3630 Kings Hwy City, State, Zip Code Jackson, MS 39216-3321 Name of Employer (Required) Not Employed	10/23/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$19,100.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Moore Mailing Address 7113 Flagstaff Ranch St City, State, Zip Code Las Vegas, NV 89166-7144 Name of Employer (Required) University of Mississippi	10/24/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$340.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronnie Shows Mailing Address 20 Golf Club Rd City, State, Zip Code Hattiesburg, MS 39402-7953 Name of Employer (Required) Aux Initiatives, LLC	10/05/2023	\$1,000.00
Occupation (Required) Government Relations Consultant	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anthony Collins Mailing Address 2310 Mariposa Dr City, State, Zip Code O Fallon, MO 63368-3571 Name of Employer (Required) Not Employed	10/15/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$344.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dale Riser Mailing Address 605 Tuscan Valley Dr City, State, Zip Code Oxford, MS 38655-9324 Name of Employer (Required) Beard + Riser Architects	10/16/2023	\$25.00
Occupation (Required) Architect	Aggregate year-to-date	\$305.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Anderson Mailing Address 2106 Harris Dr City, State, Zip Code Oxford, MS 38655-4223 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$233.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Chris Riley Mailing Address PO Box 2484 City, State, Zip Code Oxford, MS 38655-5700 Name of Employer (Required) Docutech	10/27/2023	\$1,000.00
Occupation (Required) Manager	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	10/28/2023	\$15.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,452.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John F. Lucas III Mailing Address 5 Mize Pl City, State, Zip Code Greenwood, MS 38930-2369 Name of Employer (Required) Greenwood Leflore Hospital	10/09/2023	\$250.00
Occupation (Required) Surgeon	Aggregate year-to-date	\$350.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carol Callaghan Mailing Address 4775 Village Dr City, State, Zip Code Grand Ledge, MI 48837-8112 Name of Employer (Required) Not Employed	10/19/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John Brombacher Mailing Address 108 Coachmans Rd City, State, Zip Code Madison, MS 39110-9227 Name of Employer (Required) Not Employed	10/20/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$875.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Gratia Karmes Mailing Address 417 Chapin St City, State, Zip Code Starkville, MS 39759-2620 Name of Employer (Required) Not Employed	10/01/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$520.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Frank Witherspoon Mailing Address 910 Lincoln Ave City, State, Zip Code Oxford, MS 38655-4328 Name of Employer (Required) Not Employed	10/22/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,050.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bonnie Sides Mailing Address 1510 Pinehurst Pl City, State, Zip Code Jackson, MS 39202-1819 Name of Employer (Required) Not Employed	10/13/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Caleb Bearman Mailing Address 415 Woodland Hills Ct City, State, Zip Code Madison, MS 39110-7818 Name of Employer (Required) Not Employed	10/23/2023	\$200.00
Occupation (Required) University Student	Aggregate year-to-date	\$291.40
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Gerald H. Blessey Mailing Address 2577 Chatham Ct City, State, Zip Code Biloxi, MS 39531-2758 Name of Employer (Required) Self Employed	10/23/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,733.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Bennie Hairston Mailing Address 115 Yazoo St City, State, Zip Code Lexington, MS 39095-3618 Name of Employer (Required) Self Employed	10/14/2023	\$100.00
Occupation (Required) Funeral Home Owner	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	10/24/2023	\$10.00
Aggregate year-to-date		\$801.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco Occupation (Required) Laborer	10/05/2023	\$10.00
Aggregate year-to-date		\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeffrey Blum Mailing Address 425 Riverside Dr City, State, Zip Code New York, NY 10025-7737 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/15/2023	\$100.00
Aggregate year-to-date		\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William McHenry Mailing Address 402 Greensview Cv City, State, Zip Code Madison, MS 39110-7844 Name of Employer (Required) JSU Foundation Occupation (Required) Administration	10/26/2023	\$100.00
Aggregate year-to-date		\$400.00

ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kimes & Stone Construction, LLC Mailing Address PO Box 550 City, State, Zip Code Booneville, MS 38829-0550 Name of Employer (Required)	10/26/2023	\$1,000.00
Occupation (Required)	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Douglas A. Horne Mailing Address 412 N Cedar Bluff Rd City, State, Zip Code Knoxville, TN 37923-3609 Name of Employer (Required) Horne Properties, Inc.	10/17/2023	\$4,600.00
Occupation (Required) President	Aggregate year-to-date	\$77,900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Anderson Mailing Address 828 Battle Rd City, State, Zip Code Byhalia, MS 38611-8999 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/28/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Goodman Mailing Address 42 Rolling Ridge Rd City, State, Zip Code Upper Saddle Ri, NJ 07458-1705 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/28/2023	\$2,500.00
Aggregate year-to-date		\$3,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Katz Mailing Address PO Box 410A City, State, Zip Code Saint Helena, CA 94574-0430 Name of Employer (Required) Self Employed Occupation (Required) Real Estate Investor	10/19/2023	\$8.50
Aggregate year-to-date		\$244.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cari White Mailing Address 92 -1553 Aliinui Dr City, State, Zip Code Kapolei, HI 96707-2228 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/20/2023	\$10.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bonnie Allen Mailing Address 7688 Highway 19 N City, State, Zip Code Collinsville, MS 39325-9390 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/12/2023	\$25.00
Aggregate year-to-date		\$335.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Troy Hill Mailing Address 511 Fox Bay Rdg City, State, Zip Code Brandon, MS 39047-8963 Name of Employer (Required) Self Employed Occupation (Required) Accountant	10/23/2023	\$100.00
Aggregate year-to-date		\$653.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hudson Hickman Mailing Address 412 S Central Ave City, State, Zip Code New Albany, MS 38652-3701 Name of Employer (Required) Self Employed Occupation (Required) Film Producer	10/04/2023	\$250.00
Aggregate year-to-date		\$1,200.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Catherine Sullivan Mailing Address 725 Seneca Ave City, State, Zip Code Jackson, MS 39216-3225 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/24/2023	\$500.00
Aggregate year-to-date		\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Kaye Mailing Address 123 Nottingham Ter City, State, Zip Code Buffalo, NY 14216-3504 Name of Employer (Required) University at Buffalo Occupation (Required) Faculty	10/24/2023	\$50.00
Aggregate year-to-date		\$575.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melody Umstead Mailing Address 38 El Camino Tesoros City, State, Zip Code Sedona, AZ 86336-5057 Name of Employer (Required) Not Employed	10/24/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ricky Johnston Mailing Address 419 3rd St S City, State, Zip Code Columbus, MS 39701-5632 Name of Employer (Required) Gastroenterology Associates of Columbus	10/05/2023	\$100.00
Occupation (Required) Gastroenterologist	Aggregate year-to-date	\$1,925.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Maxie Gordon Mailing Address 5 Charleston Ave City, State, Zip Code Clinton, MS 39056-9776 Name of Employer (Required) Self Employed	10/25/2023	\$250.00
Occupation (Required) Physician	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Connie M. Moran Mailing Address 206 Washington Ave City, State, Zip Code Ocean Springs, MS 39564-4626 Name of Employer (Required) Not Employed	10/06/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,225.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jack Reed Jr Mailing Address 2059 Parc Monceau Dr W City, State, Zip Code Tupelo, MS 38804-1068 Name of Employer (Required) R W Reed Co	10/16/2023	\$1,000.00
Occupation (Required) Merchant	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code Oxford, MS 38655-0400 Name of Employer (Required) Not Employed	10/07/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$925.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/17/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,008.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/27/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gratia Karmes Mailing Address 417 Chapin St City, State, Zip Code Starkville, MS 39759-2620 Name of Employer (Required) Not Employed	10/08/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$520.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert E. McDade Jr Mailing Address 4418 Woodview Dr City, State, Zip Code Belden, MS 38826-8731 Name of Employer (Required) Self Employed	10/18/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$490.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/29/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Omeria M. Scott Mailing Address 615 E 19th St City, State, Zip Code Laurel, MS 39440-2470 Name of Employer (Required) State of Mississippi	10/01/2023	\$1,000.00
Occupation (Required) State Representative	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Sens Mailing Address 580 Middle Rte City, State, Zip Code Gilmanton, NH 03237-4215 Name of Employer (Required) Not Employed	10/21/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$343.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/22/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Gray Mailing Address 3514 35th Ave City, State, Zip Code Meridian, MS 39307-3612 Name of Employer (Required) Not Employed	10/03/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name L. T. Ezell Mailing Address 110 Mattie Florence Dr City, State, Zip Code Belden, MS 38826-7025 Name of Employer (Required) Not Employed	10/23/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Billie S. Herbert Mailing Address 4624 Casablanca Dr City, State, Zip Code Jackson, MS 39206-5406 Name of Employer (Required) Not Employed	10/04/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Randall B. Wall Mailing Address 2206 Culleywood Rd City, State, Zip Code Jackson, MS 39211-5815 Name of Employer (Required) Not Employed	10/24/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Carl Page Mailing Address 5214 DIAMOND City, State, Zip Code San Francisco, CA 94131 Name of Employer (Required) Not Employed	10/25/2023	\$2,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$5,300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Randy Patterson Mailing Address 1603 Sycamore St City, State, Zip Code Murray, KY 42071-2223 Name of Employer (Required) Not Employed	10/25/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Gayle T. Roberts Mailing Address 527 Front Beach Dr City, State, Zip Code Ocean Springs, MS 39564-4941 Name of Employer (Required) Not Employed	10/06/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Sheila Newtown Mailing Address 3893 County Route 10 City, State, Zip Code De Peyster, NY 13633-3405 Name of Employer (Required) Not Employed	10/26/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$355.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brent Barriere Mailing Address 201 Saint Charles Ave City, State, Zip Code New Orleans, LA 70170-4701 Name of Employer (Required) Fishman Haygood	10/17/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carolyn S. Rogers Mailing Address 607 1/2 Cedar Dr City, State, Zip Code New Albany, MS 38652-4702 Name of Employer (Required) MegMed Health	10/28/2023	\$1,000.00
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Rankin Mailing Address PO Box 219 City, State, Zip Code Braxton, MS 39044-0219 Name of Employer (Required) Not Employed	10/10/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed	10/20/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Randy Patterson Mailing Address 1603 Sycamore St City, State, Zip Code Murray, KY 42071-2223 Name of Employer (Required) Not Employed	10/20/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anthony Collins Mailing Address 2310 Mariposa Dr City, State, Zip Code O Fallon, MO 63368-3571 Name of Employer (Required) Not Employed	10/11/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$344.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia H. Bivins Mailing Address 612 Woodland Hills Dr City, State, Zip Code Hattiesburg, MS 39402-2051 Name of Employer (Required) Not Employed	10/01/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$306.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Perry Hood Mailing Address 402 Lake Hazle Dr City, State, Zip Code Hazlehurst, MS 39083-2210 Name of Employer (Required) J & K Interest Inc	10/12/2023	\$2,500.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$10,960.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anita Yarbrough Mailing Address 202 Lakeside Dr City, State, Zip Code Houston, MS 38851-7432 Name of Employer (Required) Not Employed	10/22/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$442.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Moore Mailing Address 7113 Flagstaff Ranch St City, State, Zip Code Las Vegas, NV 89166-7144 Name of Employer (Required) University of Mississippi	10/03/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$340.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/23/2023	\$5.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Stallings Mailing Address PO Box 1141 City, State, Zip Code Oxford, MS 38655-1141 Name of Employer (Required) State of Mississippi	10/23/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	10/14/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$951.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugene Bramlett Jr Mailing Address 3535 Military Rd City, State, Zip Code Columbus, MS 39705-9179 Name of Employer (Required) Grace United Methodist Church	10/24/2023	\$500.00
Occupation (Required) Minister	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Irvin Mailing Address 4047 Wyandot St City, State, Zip Code Denver, CO 80211-2140 Name of Employer (Required) Strategic Programs, Inc.	10/05/2023	\$10.00
Occupation (Required) Corporate Secretary	Aggregate year-to-date	\$573.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Virginia Wilson Mailing Address 3696 High Point Dr City, State, Zip Code Memphis, TN 38122-3752 Name of Employer (Required) Epstein Becker Green	10/25/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Misty Shaw-Feder Mailing Address 1201 Hillcrest Dr City, State, Zip Code Ocean Springs, MS 39564-2814 Name of Employer (Required) Not Employed	10/06/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Weatherholt Mailing Address 207 Greenfield Pl City, State, Zip Code Brandon, MS 39047-9007 Name of Employer (Required) Not Employed	10/16/2023	\$22.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$287.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/17/2023	\$5.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patrina R. Dace Mailing Address 105 Sutter Dr City, State, Zip Code Terry, MS 39170-5032 Name of Employer (Required) Kaleidoscope of Learning	10/27/2023	\$50.00
Occupation (Required) Director	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/27/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carla Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Mississippi Humanities Council Occupation (Required) Prison Education Coordinator	10/08/2023	\$50.00
Aggregate year-to-date		\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/28/2023	\$31.79
Aggregate year-to-date		\$1,194.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Albert Pettigrew Mailing Address 401 Inverness Ct City, State, Zip Code Ocean Springs, MS 39564-8409 Name of Employer (Required) Pettigrew law firm Occupation (Required) Attorney	10/29/2023	\$100.00
Aggregate year-to-date		\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco Occupation (Required) Laborer	10/20/2023	\$10.00
Aggregate year-to-date		\$255.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tyler Brasher Mailing Address 2534 Stinson Rd City, State, Zip Code Nashville, TN 37214-2129 Name of Employer (Required) Gibbins Advisors	10/11/2023	\$250.00
Occupation (Required) Consultant	Aggregate year-to-date	\$289.85
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tiffany Bensen Mailing Address 237 Timber Ln City, State, Zip Code Oxford, MS 38655-5851 Name of Employer (Required) University of Mississippi	10/11/2023	\$10.00
Occupation (Required) Educator	Aggregate year-to-date	\$310.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas Adams Mailing Address 4527 Union Ave City, State, Zip Code Nettleton, MS 38858-6037 Name of Employer (Required) Mississippi Public Service Commission	10/12/2023	\$25.00
Occupation (Required) Chief Investigator	Aggregate year-to-date	\$278.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Maja Head Mailing Address 608 Fairway Trl City, State, Zip Code Springfield, TN 37172-4703 Name of Employer (Required) Nordstrom	10/12/2023	\$300.00
Occupation (Required) Sales Associate	Aggregate year-to-date	\$800.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rod Luther Mailing Address 13963 Highway 5 City, State, Zip Code Mountain View, AR 72560-8044 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/14/2023	\$25.00
Aggregate year-to-date		\$207.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William L. Latham Mailing Address 513 Roses Bluff Dr City, State, Zip Code Madison, MS 39110-7545 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/14/2023	\$43.53
Aggregate year-to-date		\$378.53
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edward Strongin Mailing Address 2772 NW 84th Ter City, State, Zip Code Pembroke Pines, FL 33024-5293 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/25/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wanda J. Lee Mailing Address 1045 Alana Dr City, State, Zip Code Clarksdale, MS 38614-7101 Name of Employer (Required) Coahoma Community College Occupation (Required) Educator	10/25/2023	\$250.00
Aggregate year-to-date		\$280.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ted B. Atkinson Mailing Address 1000 E Broad St City, State, Zip Code West Point, MS 39773-3236 Name of Employer (Required) Mississippi State University	10/25/2023	\$20.00
Occupation (Required) Professor	Aggregate year-to-date	\$455.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Louis Lacour Mailing Address 206 Keller St City, State, Zip Code Bay Saint Louis, MS 39520-4318 Name of Employer (Required) Not Employed	10/25/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gregory Schussele Mailing Address 29 Illmo Dr City, State, Zip Code Springfield, IL 62711-7908 Name of Employer (Required) Not Employed	10/06/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$216.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed	10/26/2023	\$45.71
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,194.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sumati Thomas Mailing Address 4146 Crestview Pl City, State, Zip Code Jackson, MS 39211-6404 Name of Employer (Required) Change Research	10/26/2023	\$100.00
Occupation (Required) Analyst	Aggregate year-to-date	\$723.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Debra K. Ford Mailing Address 5458 Arrow Lake Dr City, State, Zip Code Meridian, MS 39301-9730 Name of Employer (Required) University of Southern Mississippi	10/26/2023	\$1,000.00
Occupation (Required) Coordinator	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Dennis J. Erby Mailing Address PO Box 2811 City, State, Zip Code Columbus, MS 39704-2811 Name of Employer (Required) Not Employed	10/17/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Curt Stamp Mailing Address 1679 E Amber Dr City, State, Zip Code Fayetteville, AR 72703-3083 Name of Employer (Required) Cox Communications	10/17/2023	\$100.00
Occupation (Required) Vice President	Aggregate year-to-date	\$600.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/18/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/18/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Clarence E. Smith Mailing Address 423 W Franklin St City, State, Zip Code Tupelo, MS 38804-3821 Name of Employer (Required) Not Employed	10/28/2023	\$11.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$586.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brenda Roberts Mailing Address 709 Northdale Pl City, State, Zip Code Brandon, MS 39047-5110 Name of Employer (Required) Not Employed	10/19/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$875.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bonnie Allen Mailing Address 7688 Highway 19 N City, State, Zip Code Collinsville, MS 39325-9390 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/10/2023	\$25.00
Aggregate year-to-date		\$335.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Drake Mailing Address 12018 Oak Hollow Dr City, State, Zip Code Vanceleave, MS 39565-3706 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/10/2023	\$112.00
Aggregate year-to-date		\$2,162.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed Occupation (Required) Accountant	10/20/2023	\$5.00
Aggregate year-to-date		\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Bowden Mailing Address 18 Cedarwood Ln City, State, Zip Code Gulfport, MS 39503-6222 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/21/2023	\$500.00
Aggregate year-to-date		\$1,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janet Scott Mailing Address 603 Troon Rd City, State, Zip Code Oxford, MS 38655-3596 Name of Employer (Required) Not Employed	10/12/2023	\$2,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$11,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine	10/12/2023	\$30.00
Occupation (Required) Caretaker	Aggregate year-to-date	\$245.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed	10/22/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$4,625.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nancy Groninger Mailing Address 5361 Saratoga St City, State, Zip Code Yorba Linda, CA 92886-4825 Name of Employer (Required) Not Employed	10/22/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$283.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joyce Tubb Mailing Address 520 Lake Park Dr City, State, Zip Code Tupelo, MS 38801-8423 Name of Employer (Required) Not Employed	10/23/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lana Richardson Mailing Address 10611 County Road 500 City, State, Zip Code Ripley, MS 38663-9199 Name of Employer (Required) Not Employed	10/04/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$905.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael T. Kayes Mailing Address 510 Evergreen Dr City, State, Zip Code Long Beach, MS 39560-3228 Name of Employer (Required) Not Employed	10/14/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ford Sutherlin Mailing Address 2211 Odonnell Blvd City, State, Zip Code Gulfport, MS 39507-2147 Name of Employer (Required) Not Employed	10/05/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alan Arendale Mailing Address 345 Woodstone Rd City, State, Zip Code Clinton, MS 39056-4945 Name of Employer (Required) Cannon Toyota Vicksburg	10/25/2023	\$5.00
Occupation (Required) Sales Consultant	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathleen Holmes Mailing Address 330 Crestmont Cv City, State, Zip Code Cordova, TN 38018-6904 Name of Employer (Required) Not Employed	10/16/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$305.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Victoria Short Mailing Address 825 8th St City, State, Zip Code Gretna, LA 70053-6109 Name of Employer (Required) Self Employed	10/26/2023	\$250.00
Occupation (Required) Media Consultant	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/07/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,008.50

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nan Shiverdecker Mailing Address 306 Alabama St City, State, Zip Code New Albany, MS 38652-4137 Name of Employer (Required) Not Employed	10/17/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Davis Davis Mailing Address 179 Little Sawmill Rd City, State, Zip Code Laurel, MS 39443-9157 Name of Employer (Required) Not Employed	10/18/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Carol Halliburton Mailing Address 5032 Sunnyvale Dr City, State, Zip Code Jackson, MS 39211-4843 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$491.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Debra Moore Mailing Address 7113 Flagstaff Ranch St City, State, Zip Code Las Vegas, NV 89166-7144 Name of Employer (Required) University of Mississippi	10/28/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$340.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Betty Sparkman Mailing Address 145 Least Tern Dr City, State, Zip Code Pass Christian, MS 39571-4844 Name of Employer (Required) Not Employed	10/19/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Hill Mailing Address 320 Belle Meade Pointe Suite A City, State, Zip Code Flowood, MS 39232 Name of Employer (Required) Self Employed	10/29/2023	\$25.00
Occupation (Required) Accountant	Aggregate year-to-date	\$662.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sandy Jones Mailing Address 34 Yippie Calle Rd City, State, Zip Code Williamsburg, NM 87942-9032 Name of Employer (Required) Self Employed	10/29/2023	\$1,000.00
Occupation (Required) Contractor	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny Newson Mailing Address 433 Andrews Ave City, State, Zip Code Clarksdale, MS 38614-6109 Name of Employer (Required) Newson & Newson	10/10/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dorothy Bedford Mailing Address PO Box 512 City, State, Zip Code Valley Forge, PA 19481-0512 Name of Employer (Required) Not Employed	10/01/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brad Mittendorf Mailing Address 8002 Lanes End City, State, Zip Code Baton Rouge, LA 70810-2255 Name of Employer (Required) Southern Strategy Group of LA	10/12/2023	\$1,250.00
Occupation (Required) Partner	Aggregate year-to-date	\$5,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jamie Harris Mailing Address 2943 Tishomingo Ln City, State, Zip Code Memphis, TN 38111-2631 Name of Employer (Required) GNH Designs	10/22/2023	\$25.00
Occupation (Required) Interior Design Vice President	Aggregate year-to-date	\$378.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Alison Townsend Mailing Address 63 Alfred Drown Rd City, State, Zip Code Barrington, RI 02806-1854 Name of Employer (Required) Not Employed	10/22/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/22/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ricky Johnston Mailing Address 419 3rd St S City, State, Zip Code Columbus, MS 39701-5632 Name of Employer (Required) Gastroenterology Associates of Columbus	10/23/2023	\$25.00
Occupation (Required) Gastroenterologist	Aggregate year-to-date	\$1,925.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Patricia Berk Mailing Address 1692 Oktoc Rd City, State, Zip Code Starkville, MS 39759-6200 Name of Employer (Required) Not Employed	10/06/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jadonna Whitson Mailing Address 5405 Martin Cv City, State, Zip Code Olive Branch, MS 38654-5953 Name of Employer (Required) Not Employed	10/16/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bob Malone Mailing Address PO Box 979 City, State, Zip Code Gulf Shores, AL 36547-0979 Name of Employer (Required) Coastal Real Estate and Development	10/16/2023	\$25.00
Occupation (Required) Realtor	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William A. Cox Mailing Address 1739 Swann St NW City, State, Zip Code Washington, DC 20009-5536 Name of Employer (Required) Not Employed	10/27/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,915.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jean E. Ausborn Mailing Address 1928 Bakersfield Dr N City, State, Zip Code Nesbit, MS 38651-6006 Name of Employer (Required) Not Employed	10/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Kirk Mailing Address 6342 Mercedes Ave City, State, Zip Code Dallas, TX 75214-3006 Name of Employer (Required) Gibson Dunn & Crutcher	10/27/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas L. Rosenblatt Mailing Address 19109 Highway 24 W City, State, Zip Code Woodville, MS 39669-4136 Name of Employer (Required) Self Employed	10/19/2023	\$500.00
Occupation (Required) Farmer	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Lewis Mailing Address 404 Galleria Dr City, State, Zip Code Oxford, MS 38655-4383 Name of Employer (Required) Self Employed	10/29/2023	\$5.00
Occupation (Required) Attorney	Aggregate year-to-date	\$335.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jonathan Hamilton Mailing Address 4100 Warren St NW City, State, Zip Code Washington, DC 20016-2136 Name of Employer (Required) White & Case LLP	10/29/2023	\$10,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$22,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Shirley K. Martin Mailing Address 113 Estelle Dr City, State, Zip Code Vicksburg, MS 39180-9799 Name of Employer (Required) Not Employed	10/10/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed	10/10/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$360.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Anthony Collins Mailing Address 2310 Mariposa Dr City, State, Zip Code O Fallon, MO 63368-3571 Name of Employer (Required) Not Employed	10/20/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$344.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Stephen B. Richer Mailing Address 62 53rd Cir City, State, Zip Code Gulfport, MS 39507-4541 Name of Employer (Required) Richer Advisors	10/21/2023	\$25.00
Occupation (Required) Consultant	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Richard Dunnam Mailing Address 298 Marigold City, State, Zip Code Oxford, MS 38655-1067 Name of Employer (Required) Not Employed	10/02/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Christopher Murdock Mailing Address 901 B Coral Rd City, State, Zip Code Nashville, TN 37204-4211 Name of Employer (Required) IQTalent Partners Occupation (Required) Recruiter	10/12/2023	\$250.00
Aggregate year-to-date		\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco Occupation (Required) Laborer	10/22/2023	\$10.00
Aggregate year-to-date		\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	10/22/2023	\$10.00
Aggregate year-to-date		\$1,452.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John D. Barksdale Mailing Address 1331 3rd St City, State, Zip Code New Orleans, LA 70130-5743 Name of Employer (Required) Alluvian Capital Occupation (Required) Investor	10/13/2023	\$2,500.00
Aggregate year-to-date		\$5,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia Morse Mailing Address 8601 Zimpel St City, State, Zip Code New Orleans, LA 70118-1139 Name of Employer (Required) Not Employed	10/23/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Donald Sittman Mailing Address 1822 Devine St City, State, Zip Code Jackson, MS 39202-1317 Name of Employer (Required) Not Employed	10/05/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Frank Lalli Mailing Address 140 State St City, State, Zip Code Brooklyn, NY 11201-6039 Name of Employer (Required) Not Employed	10/25/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert Munford Mailing Address 5510 Wisconsin Ave City, State, Zip Code Chevy Chase, MD 20815-4403 Name of Employer (Required) Not Employed	10/06/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,275.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ruth S. Lockhart Mailing Address 1804 Spruce St City, State, Zip Code Greenville, MS 38703-4438 Name of Employer (Required) Not Employed	10/16/2023	\$35.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$261.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janet Bland Mailing Address 810 Sample Rd City, State, Zip Code Belden, MS 38826-9650 Name of Employer (Required) Not Employed	10/16/2023	\$22.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$306.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Cockrum Mailing Address 600 County Road 515 City, State, Zip Code Ripley, MS 38663-8347 Name of Employer (Required) Not Employed	10/07/2023	\$31.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$316.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margo Salone Mailing Address 71 Matherville Frost Bridge Rd City, State, Zip Code Shubuta, MS 39360-9201 Name of Employer (Required) Not Employed	10/27/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$272.60

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie-Burl McLemore Mailing Address 7900 Michael Dr City, State, Zip Code Lake Cormorant, MS 38641-8211 Name of Employer (Required) Not Employed	10/27/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Willie Heidelberg Mailing Address PO Box 3391 City, State, Zip Code Meridian, MS 39303-3391 Name of Employer (Required) Metro Tax & Administrative Services, LLC	10/08/2023	\$500.00
Occupation (Required) Accountant & Tax Consultant	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kenneth Groue Mailing Address 128 Seaside Dr City, State, Zip Code Ocean Springs, MS 39564-5145 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Stevens Mailing Address 3050 Avon Ln NW City, State, Zip Code Washington, DC 20007-2908 Name of Employer (Required) Not Employed	10/19/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Talisca Tobias Mailing Address 16224 Lily Orchard Rd City, State, Zip Code Moss Point, MS 39562-9002 Name of Employer (Required) US Dept of Veterans Affairs Occupation (Required) Registered Nurse	10/29/2023	\$25.00
Aggregate year-to-date		\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Doyce Deas Mailing Address 645 Highland Cir City, State, Zip Code Tupelo, MS 38804-2003 Name of Employer (Required) Self Employed Occupation (Required) Education	10/29/2023	\$500.00
Aggregate year-to-date		\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	10/29/2023	\$10.00
Aggregate year-to-date		\$1,452.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Louis Lacour Mailing Address 206 Keller St City, State, Zip Code Bay Saint Louis, MS 39520-4318 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/10/2023	\$250.00
Aggregate year-to-date		\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed	10/10/2023	\$10.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$801.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dana Gonzalez Mailing Address 3663 James Monroe Dr City, State, Zip Code Jackson, MS 39213-3020 Name of Employer (Required) Not Employed	10/20/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$330.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cherie Kusman Mailing Address 11 Teddy Bear Trl City, State, Zip Code Santa Fe, NM 87505-8118 Name of Employer (Required) Not Employed	10/20/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Philip Kuhn Mailing Address PO Box 82 City, State, Zip Code Raymond, MS 39154-0082 Name of Employer (Required) Not Employed	10/21/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$365.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name B. Sykes Sturdivant Mailing Address PO Box 209 City, State, Zip Code Glendora, MS 38928-0209 Name of Employer (Required) Sturdivant Bros Flying Service Occupation (Required) Owner	10/21/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ian Gustafson Mailing Address 7520 Ruby Ct City, State, Zip Code Ocean Springs, MS 39564-1801 Name of Employer (Required) MS Center for Justice Occupation (Required) Attorney	10/02/2023	\$100.00
Aggregate year-to-date		\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anita Yarbrough Mailing Address 202 Lakeside Dr City, State, Zip Code Houston, MS 38851-7432 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/12/2023	\$25.00
Aggregate year-to-date		\$442.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Shirley Donelson Mailing Address 315 Long Cove Dr City, State, Zip Code Madison, MS 39110-9113 Name of Employer (Required) GI Associates Occupation (Required) Physician	10/22/2023	\$500.00
Aggregate year-to-date		\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Timon Malloy Mailing Address 270 W End Ave City, State, Zip Code New York, NY 10023-2624 Name of Employer (Required) Fred F French Investing LLC	10/22/2023	\$2,000.00
Occupation (Required) Real Estate	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Potter Mailing Address 1011 SE 102nd Ave City, State, Zip Code Vancouver, WA 98664-4145 Name of Employer (Required) IPonePartnerships	10/23/2023	\$25.00
Occupation (Required) Caregiver	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alfreda Spell Mailing Address 5176 Reddoch Dr City, State, Zip Code Jackson, MS 39211-4540 Name of Employer (Required) Not Employed	10/23/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$235.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steve Renfro Mailing Address 5113 Arthur St City, State, Zip Code Moss Point, MS 39563-2705 Name of Employer (Required) Not Employed	10/24/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,450.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Doris Browne Mailing Address 6900 33rd St NW City, State, Zip Code Washington, DC 20015-1406 Name of Employer (Required) Browne and Associates LLC	10/05/2023	\$250.00
Occupation (Required) Physician	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed	10/15/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$360.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Coleman Mailing Address 4013 Pinehaven Dr City, State, Zip Code Jackson, MS 39209-9736 Name of Employer (Required) Hinds County Board of Supervisors	10/25/2023	\$50.00
Occupation (Required) Fiscal Officer	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wiley F. Jones Mailing Address 1046 Briarwood Dr City, State, Zip Code Lorman, MS 39096-9786 Name of Employer (Required) Not Employed	10/16/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$245.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Vernon Mailing Address 1721 Rainbow Dr City, State, Zip Code Clearwater, FL 33755-6534 Name of Employer (Required) Self Employed	10/17/2023	\$250.00
Occupation (Required) Artist	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Hendrick Mailing Address 968 Bellevue Pl City, State, Zip Code Jackson, MS 39202-2786 Name of Employer (Required) Not Employed	10/27/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rubye D. Harden Mailing Address 114 N Spring St City, State, Zip Code Tupelo, MS 38804-3922 Name of Employer (Required) Harden Enterprises	10/18/2023	\$250.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$950.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sally Wood Mailing Address 107 Grey Brant Ct City, State, Zip Code Madison, MS 39110-9281 Name of Employer (Required) T2 Financial	10/28/2023	\$50.00
Occupation (Required) Mortgage Executive	Aggregate year-to-date	\$275.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Blair Macinnes Mailing Address 24 Raven Dr City, State, Zip Code Morristown, NJ 07960-6412 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/09/2023	\$250.00
Aggregate year-to-date		\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Eaves Jr Mailing Address 123 Cedar Woods Cv City, State, Zip Code Madison, MS 39110-6505 Name of Employer (Required) Eaves Law Firm Occupation (Required) Attorney	10/29/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrea Walker Mailing Address 1041 County Road 202 City, State, Zip Code Abbeville, MS 38601-9700 Name of Employer (Required) American Addiction Center Occupation (Required) Registered Nurse	10/20/2023	\$10.00
Aggregate year-to-date		\$235.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Ellis Mailing Address 700 Long Meadow Dr City, State, Zip Code Oxford, MS 38655-9792 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/11/2023	\$250.00
Aggregate year-to-date		\$275.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia Yap Mailing Address 1955 Poppes Ferry Rd City, State, Zip Code Biloxi, MS 39532-2029 Name of Employer (Required) Not Employed	10/21/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$861.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mark Elder Mailing Address 904 E Saddlehorn Rd City, State, Zip Code Sedona, AZ 86351-7421 Name of Employer (Required) Not Employed	10/12/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name J. David Orlansky Mailing Address 1013 Laramie Ct City, State, Zip Code Madison, MS 39110-7746 Name of Employer (Required) Self Employed	10/22/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Catherine Sullivan Mailing Address 725 Seneca Ave City, State, Zip Code Jackson, MS 39216-3225 Name of Employer (Required) Not Employed	10/23/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tatia C. Kiser Mailing Address 35 Greystone Dr City, State, Zip Code Madison, MS 39110-9033 Name of Employer (Required) Dickerson Companies	10/23/2023	\$20.00
Occupation (Required) Accountant	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edgar N. James Mailing Address 2726 Quebec St NW City, State, Zip Code Washington, DC 20008-1223 Name of Employer (Required) Not Employed	10/05/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carol P. Palmer Mailing Address 3 Cypress Ln City, State, Zip Code Jackson, MS 39211-5935 Name of Employer (Required) Not Employed	10/16/2023	\$2,500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$4,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Randy Langlely Mailing Address 408 Stoneybrook Dr City, State, Zip Code Brandon, MS 39042-3501 Name of Employer (Required) Not Employed	10/16/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	10/07/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$530.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Darryl Bishop Mailing Address 17 Drake Ldg City, State, Zip Code Raymond, MS 39154-7659 Name of Employer (Required) Not Employed	10/07/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Karen Kirkman Mailing Address 10231 County Road 200 City, State, Zip Code Falkner, MS 38629-9700 Name of Employer (Required) Not Employed	10/17/2023	\$3.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$207.05
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ellen Lake Mailing Address 4230 Lakeshore Ave City, State, Zip Code Oakland, CA 94610-1136 Name of Employer (Required) Not Employed	10/08/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Rabalais Mailing Address 132 Sara Fox Dr City, State, Zip Code Brandon, MS 39047-5526 Name of Employer (Required) Not Employed	10/18/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$377.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Herbert Ehrhardt Mailing Address 200 Windsor Rdg City, State, Zip Code Oxford, MS 38655-6265 Name of Employer (Required) Self Employed	10/09/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary-Martha Wilson Mailing Address 106 Saint Charles Ave City, State, Zip Code Starkville, MS 39759-2649 Name of Employer (Required) Not Employed	10/09/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Haresh Chatlani Mailing Address 2596 Robinson St City, State, Zip Code Jackson, MS 39209-7029 Name of Employer (Required) In Style	10/19/2023	\$50.00
Occupation (Required) Retail	Aggregate year-to-date	\$263.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Douglas A. Horne Mailing Address 412 N Cedar Bluff Rd City, State, Zip Code Knoxville, TN 37923-3609 Name of Employer (Required) Horne Properties, Inc.	10/23/2023	\$16,050.00
Occupation (Required) President	Aggregate year-to-date	\$77,900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilton Sanders Mailing Address 2433 Fox Ave City, State, Zip Code Madison, WI 53711-1924 Name of Employer (Required) Not Employed	10/23/2023	\$90.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$235.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark Ford Mailing Address 501 Jefferson St City, State, Zip Code Clinton, MS 39056-4243 Name of Employer (Required) Entergy	10/04/2023	\$30.00
Occupation (Required) Technician	Aggregate year-to-date	\$249.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Janeway Mailing Address 8 E 80th St City, State, Zip Code New York, NY 10075-0110 Name of Employer (Required) Not Employed	10/24/2023	\$5,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$15,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Randy Patterson Mailing Address 1603 Sycamore St City, State, Zip Code Murray, KY 42071-2223 Name of Employer (Required) Not Employed	10/24/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sheila W. Varnado Mailing Address PO Box 16958 City, State, Zip Code Hattiesburg, MS 39404-6958 Name of Employer (Required) Not Employed	10/06/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Catherine Sullivan Mailing Address 725 Seneca Ave City, State, Zip Code Jackson, MS 39216-3225 Name of Employer (Required) Not Employed	10/16/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,500.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Law Office of Dan A Robin Jr LLC Mailing Address 9117 W Saint Bernard Hwy City, State, Zip Code Chalmette, LA 70043-4450 Name of Employer (Required)	10/26/2023	\$5,000.00
Occupation (Required)	Aggregate year-to-date	\$5,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rebecca Declement Mailing Address 1351 Cochran Rd City, State, Zip Code Belden, MS 38826-9603 Name of Employer (Required) Not Employed	10/07/2023	\$31.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$216.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed	10/17/2023	\$25.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$520.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Freeman Mailing Address 1631 Arabella St City, State, Zip Code New Orleans, LA 70115-5025 Name of Employer (Required) Barrasso Usdin	10/27/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jesse Buie Mailing Address 6120 Hanging Moss Rd City, State, Zip Code Jackson, MS 39206-2123 Name of Employer (Required) Self Employed	10/27/2023	\$250.00
Occupation (Required) Health Care Administrator	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marsha L. Tapscott Mailing Address 1014 Belledeer Dr City, State, Zip Code Tupelo, MS 38804-1912 Name of Employer (Required) Not Employed	10/18/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/09/2023	\$5.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/19/2023	\$10.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joseph Sheppard Mailing Address PO Box 327 City, State, Zip Code Cuero, TX 77954-0327 Name of Employer (Required) Self Employed	10/29/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,950.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Conlon Mailing Address 306 Dogwood Dr City, State, Zip Code Oxford, MS 38655-9670 Name of Employer (Required) University of Mississippi	10/29/2023	\$400.00
Occupation (Required) Professor	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Carey Varnado Mailing Address 525 N Main St City, State, Zip Code Hattiesburg, MS 39401-3582 Name of Employer (Required) Self Employed	10/10/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,043.30
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mack Lowery Mailing Address 5055 Myers Rd City, State, Zip Code Terry, MS 39170-9429 Name of Employer (Required) Aamco Transmission	10/11/2023	\$25.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$665.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elizabeth West Mailing Address PO Box 40 City, State, Zip Code Pickwick Dam, TN 38365-0040 Name of Employer (Required) Not Employed	10/12/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark Goldberg Mailing Address 321 Cornerstone Dr City, State, Zip Code Brandon, MS 39042-2712 Name of Employer (Required) Cosmich Simmons & Brown PLLC	10/12/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hudson Hickman Mailing Address 412 S Central Ave City, State, Zip Code New Albany, MS 38652-3701 Name of Employer (Required) Self Employed	10/23/2023	\$250.00
Occupation (Required) Film Producer	Aggregate year-to-date	\$1,200.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Jameson Mailing Address 317 Pennsylvania Ave SE City, State, Zip Code Washington, DC 20003-1148 Name of Employer (Required) Winning Connections	10/04/2023	\$1,000.00
Occupation (Required) Consultant	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dustin Falgout Mailing Address 835 Eagle Eyrie Dr City, State, Zip Code Biloxi, MS 39532-4650 Name of Employer (Required) Elegant Themes, Inc.	10/14/2023	\$25.00
Occupation (Required) Software Developer	Aggregate year-to-date	\$224.35

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tom Womble Mailing Address PO Box 1615 City, State, Zip Code Batesville, MS 38606-4115 Name of Employer (Required) Bailey, Womble & Yelton Occupation (Required) Attorney	10/24/2023	\$250.00
Aggregate year-to-date		\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margo Salone Mailing Address 71 Matherville Frost Bridge Rd City, State, Zip Code Shubuta, MS 39360-9201 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/15/2023	\$25.00
Aggregate year-to-date		\$272.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William A. Cox Mailing Address 1739 Swann St NW City, State, Zip Code Washington, DC 20009-5536 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/25/2023	\$5.00
Aggregate year-to-date		\$1,915.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Julia A. O'neal Mailing Address PO Box 165 City, State, Zip Code Ocean Springs, MS 39566-0165 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/06/2023	\$1,000.00
Aggregate year-to-date		\$3,250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Smith Mailing Address PO Box 1865 City, State, Zip Code Gulfport, MS 39502-1865 Name of Employer (Required) Not Employed	10/27/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brenda Plunkett Mailing Address 138 N Ridge Dr City, State, Zip Code Saltillo, MS 38866-5763 Name of Employer (Required) Not Employed	10/18/2023	\$150.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,228.45
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elizabeth Stauter Mailing Address 148 Seaside Dr City, State, Zip Code Ocean Springs, MS 39564-5145 Name of Employer (Required) Not Employed	10/28/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Blaine B. Eaton Mailing Address 503 Gambrell St City, State, Zip Code Tylorsville, MS 39168-4284 Name of Employer (Required) Southern Pine Electric Cooperative	10/01/2023	\$500.00
Occupation (Required) Director	Aggregate year-to-date	\$2,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Hamilton Mailing Address 3701 58th Ave City, State, Zip Code Meridian, MS 39307-2905 Name of Employer (Required) Self Employed	10/21/2023	\$10.00
Occupation (Required) Restauranteur	Aggregate year-to-date	\$305.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mary Miller Mailing Address 510 E 86th St City, State, Zip Code New York, NY 10028-7507 Name of Employer (Required) Not Employed	10/12/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William R. Wilson Mailing Address 230 Olde Castle Loop City, State, Zip Code Oxford, MS 38655-6012 Name of Employer (Required) Self Employed	10/23/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,148.80
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Michael McConnell Mailing Address 20310 Paseo Del Campo City, State, Zip Code Porter Ranch, CA 91326-4325 Name of Employer (Required) Not Employed	10/23/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	10/23/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$490.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Jenkins Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Tech. Services	10/24/2023	\$250.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$6,475.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Davis Mccool Mailing Address 1139 Dublin St City, State, Zip Code New Orleans, LA 70118-2031 Name of Employer (Required) Laitram	10/25/2023	\$250.00
Occupation (Required) Business Development Supervisor	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kaye H. Bryant Mailing Address 214 Greenbriar Loop City, State, Zip Code Oxford, MS 38655-2760 Name of Employer (Required) Not Employed	10/25/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jessica Kastler Mailing Address 2488 Davidson Rd City, State, Zip Code Ocean Springs, MS 39564-5255 Name of Employer (Required) USM Marine Education Center	10/25/2023	\$250.00
Occupation (Required) Marine Scientist	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patrick J. O'Connor Mailing Address 541 E Scenic Dr City, State, Zip Code Pass Christian, MS 39571-4510 Name of Employer (Required) Self Employed	10/06/2023	\$5,000.00
Occupation (Required) Director	Aggregate year-to-date	\$12,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Obie M. McNair Jr Mailing Address 102 Cirencester Dr City, State, Zip Code Ridgeland, MS 39157-9788 Name of Employer (Required) Central Mississippi Medical Center	10/26/2023	\$50.00
Occupation (Required) Health Care	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janet Shanks Mailing Address 125 Northpointe Pkwy City, State, Zip Code Jackson, MS 39211-2411 Name of Employer (Required) Not Employed	10/17/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,750.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/17/2023	\$22.50
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/17/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Victor Labat Mailing Address 349 Easterbrook St City, State, Zip Code Bay Saint Louis, MS 39520-4409 Name of Employer (Required) Not Employed	10/28/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lise Pearlman Mailing Address 1147 Clarendon Cres City, State, Zip Code Oakland, CA 94610-1807 Name of Employer (Required) Self Employed	10/28/2023	\$100.00
Occupation (Required) Author	Aggregate year-to-date	\$405.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Cockrum Mailing Address 600 County Road 515 City, State, Zip Code Ripley, MS 38663-8347 Name of Employer (Required) Not Employed	10/19/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$316.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William A. Cox Mailing Address 1739 Swann St NW City, State, Zip Code Washington, DC 20009-5536 Name of Employer (Required) Not Employed	10/29/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,915.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Eric D. Washington Mailing Address 3509 Montgomery Ln City, State, Zip Code Pascagoula, MS 39567-7584 Name of Employer (Required) US Orthopaedic Partners	10/01/2023	\$500.00
Occupation (Required) Physician	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lillian Hagel Mailing Address 3200 N Abingdon St City, State, Zip Code Arlington, VA 22207-4214 Name of Employer (Required) Four Sisters Properties	10/02/2023	\$250.00
Occupation (Required) President	Aggregate year-to-date	\$250.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sheila Newtown Mailing Address 3893 County Route 10 City, State, Zip Code De Peyster, NY 13633-3405 Name of Employer (Required) Not Employed	10/12/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$355.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Susan S McNease Mailing Address 236 Eastbrooke St City, State, Zip Code Jackson, MS 39216-4716 Name of Employer (Required) Not Employed	10/12/2023	\$300.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Patrick Phillips Mailing Address 653 Ferncliff Dr City, State, Zip Code Jackson, MS 39211-2606 Name of Employer (Required) Not Employed	10/23/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elise Gillespie Mailing Address 1013 S Lamar Blvd City, State, Zip Code Oxford, MS 38655-4739 Name of Employer (Required) University of Mississippi	10/04/2023	\$25.00
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$1,325.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carson Harkrader Mailing Address 1310 Hill St City, State, Zip Code Durham, NC 27707-1670 Name of Employer (Required) Carolina Solar Energy III, LLC	10/24/2023	\$500.00
Occupation (Required) Manager	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Taylor Mailing Address 814 N Beach Blvd City, State, Zip Code Bay St Louis, MS 39520-3706 Name of Employer (Required) Self Employed	10/25/2023	\$500.00
Occupation (Required) Advertising Specialty Products	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gloria Dilworth Mailing Address 16209 Cervantes Ct City, State, Zip Code Biloxi, MS 39532-3895 Name of Employer (Required) Not Employed	10/25/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Penson Mailing Address 377 Huntington Pl City, State, Zip Code Tupelo, MS 38801-7965 Name of Employer (Required) CME Church	10/25/2023	\$25.00
Occupation (Required) Pastor	Aggregate year-to-date	\$254.60

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnie Seal Mailing Address 1286 John Amacker Rd City, State, Zip Code Poplarville, MS 39470-6396 Name of Employer (Required) Not Employed	10/06/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Jones Mailing Address 1183 Highway 370 City, State, Zip Code Dumas, MS 38625-9603 Name of Employer (Required) Not Employed	10/06/2023	\$212.00
Occupation (Required) Retired	Aggregate year-to-date	\$212.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Owen Mailing Address 124 5th St N City, State, Zip Code Columbus, MS 39701-4522 Name of Employer (Required) Self Employed	10/16/2023	\$750.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,100.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	10/26/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,188.47

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Irvin Mailing Address 4047 Wyandot St City, State, Zip Code Denver, CO 80211-2140 Name of Employer (Required) Strategic Programs, Inc.	10/17/2023	\$25.00
Occupation (Required) Corporate Secretary	Aggregate year-to-date	\$573.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Matthew Kutcher Mailing Address 3525 Hawthorn Dr City, State, Zip Code Jackson, MS 39216-3308 Name of Employer (Required) University of Mississippi Medical Center	10/29/2023	\$100.00
Occupation (Required) Physician	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sumati Thomas Mailing Address 4146 Crestview Pl City, State, Zip Code Jackson, MS 39211-6404 Name of Employer (Required) Change Research	10/20/2023	\$100.00
Occupation (Required) Analyst	Aggregate year-to-date	\$723.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Minter Mailing Address 1246 Ostrander Rd City, State, Zip Code Kelso, WA 98626-9395 Name of Employer (Required) University of New Mexico	10/21/2023	\$50.00
Occupation (Required) Business Analyst	Aggregate year-to-date	\$205.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Kirkman Mailing Address 10231 County Road 200 City, State, Zip Code Falkner, MS 38629-9700 Name of Employer (Required) Not Employed	10/02/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$207.05
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Carroll Mailing Address 675 Beulah Grove Rd City, State, Zip Code Pontotoc, MS 38863-7704 Name of Employer (Required) Ashley Distribution Services	10/12/2023	\$50.00
Occupation (Required) Truck Driver	Aggregate year-to-date	\$1,195.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Evelyn Baugh Mailing Address 151 Cypress Rd City, State, Zip Code Byram, MS 39272-6051 Name of Employer (Required) UBC Hospital MS Clinic	10/03/2023	\$5.00
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie Fye Mailing Address 5439 Ennis Rd City, State, Zip Code Starkville, MS 39759-4861 Name of Employer (Required) Self Employed	10/13/2023	\$50.00
Occupation (Required) Counselor	Aggregate year-to-date	\$980.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marcia B. King Mailing Address 550 Post Rd City, State, Zip Code Ridgeland, MS 39157-9678 Name of Employer (Required) Not Employed	10/23/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/05/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Gaudet Mailing Address 99 Midtown Sq City, State, Zip Code Hattiesburg, MS 39402-7513 Name of Employer (Required) Wesley Medical Center	10/15/2023	\$250.00
Occupation (Required) Physician	Aggregate year-to-date	\$1,300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cathy C. Grace Mailing Address 1502 Winter Valley Dr City, State, Zip Code Tupelo, MS 38801-8120 Name of Employer (Required) North Mississippi Education Consortium	10/25/2023	\$25.00
Occupation (Required) Educator	Aggregate year-to-date	\$225.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Graham Mailing Address 520 Deer Creek Dr City, State, Zip Code Oxford, MS 38655-8559 Name of Employer (Required) Not Employed	10/25/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	10/16/2023	\$22.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$490.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Benjamin Bailey Mailing Address 1300 E Lafayette St City, State, Zip Code Detroit, MI 48207-2921 Name of Employer (Required) Doner	10/17/2023	\$100.00
Occupation (Required) Advertising	Aggregate year-to-date	\$425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Glenda Burns Mailing Address PO Box 110 City, State, Zip Code Okolona, MS 38860-0110 Name of Employer (Required) Bank of Okolona	10/17/2023	\$50.00
Occupation (Required) Loan Operations Officer	Aggregate year-to-date	\$410.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Galloway Mailing Address 17 Baytowne Row City, State, Zip Code Madison, MS 39110-9179 Name of Employer (Required) Not Employed	10/27/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,408.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Alan Saleski Mailing Address 2116 Harrison St City, State, Zip Code Evanston, IL 60201-2223 Name of Employer (Required) Loyola University Chicago	10/27/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joe Johnsey Mailing Address 688 A Road 2788 City, State, Zip Code Baldwyn, MS 38824-8408 Name of Employer (Required) Self Employed	10/18/2023	\$100.00
Occupation (Required) Physician	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Carl Thul Mailing Address 195 Spring Beauty Drr City, State, Zip Code Lawrenceville, NJ 08648 Name of Employer (Required) Not Employed	10/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$265.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John R. Bradley Mailing Address 107 Philip Rd City, State, Zip Code Oxford, MS 38655-2013 Name of Employer (Required) Not Employed	10/19/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$10,560.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lynn Haspel Mailing Address 256 Eastbrooke St City, State, Zip Code Jackson, MS 39216-4716 Name of Employer (Required) Not Employed	10/19/2023	\$1.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$269.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sumati Thomas Mailing Address 4146 Crestview Pl City, State, Zip Code Jackson, MS 39211-6404 Name of Employer (Required) Change Research	10/29/2023	\$25.00
Occupation (Required) Analyst	Aggregate year-to-date	\$723.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Theresa Guthrie Mailing Address 661 Arm Rd City, State, Zip Code Silver Creek, MS 39663-2423 Name of Employer (Required) Harrell & Nowak, LLC	10/10/2023	\$5.00
Occupation (Required) Office Manager	Aggregate year-to-date	\$241.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William F. Wallace Mailing Address 30 Saint Andrews City, State, Zip Code Hattiesburg, MS 39401-8214 Name of Employer (Required) Not Employed	10/10/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Paul Pearson Mailing Address 325 Pearson Rd City, State, Zip Code Lyon, MS 38645-9548 Name of Employer (Required) Delta Inc.	10/20/2023	\$200.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William Janeway Mailing Address 8 E 80th St City, State, Zip Code New York, NY 10075-0110 Name of Employer (Required) Not Employed	10/11/2023	\$5,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$15,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Bob Malone Mailing Address PO Box 979 City, State, Zip Code Gulf Shores, AL 36547-0979 Name of Employer (Required) Coastal Real Estate and Development	10/21/2023	\$10.00
Occupation (Required) Realtor	Aggregate year-to-date	\$205.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ethel Truly Mailing Address 414 S Rankin St City, State, Zip Code Natchez, MS 39120-3539 Name of Employer (Required) Not Employed	10/02/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dick Ledoux Mailing Address 488 CR 1460 City, State, Zip Code Tupelo, MS 38804 Name of Employer (Required) Insource Solutions	10/12/2023	\$25.00
Occupation (Required) Client Success Advocate	Aggregate year-to-date	\$275.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	10/03/2023	\$5.00
Occupation (Required) Retired	Aggregate year-to-date	\$717.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Zilla Spencer Mailing Address 382 Highway 341 S City, State, Zip Code Vardaman, MS 38878-9581 Name of Employer (Required) Not Employed	10/23/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$515.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles R. Wilson Mailing Address 114 Leighton Rd City, State, Zip Code Oxford, MS 38655-2010 Name of Employer (Required) Not Employed	10/14/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$800.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gordon Russ Mailing Address 351 Elliott St City, State, Zip Code Tupelo, MS 38804-4815 Name of Employer (Required) Self Employed	10/24/2023	\$100.00
Occupation (Required) Stained Glass Artist	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Judy A. Thompson Mailing Address 125 Memory Ln City, State, Zip Code Madison, MS 39110-6866 Name of Employer (Required) Not Employed	10/05/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Guelma Hopkins Mailing Address 3624 Wedghill Way City, State, Zip Code Fort Worth, TX 76133-2156 Name of Employer (Required) Not Employed	10/25/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Glenda Burns Mailing Address PO Box 110 City, State, Zip Code Okolona, MS 38860-0110 Name of Employer (Required) Bank of Okolona	10/25/2023	\$25.00
Occupation (Required) Loan Operations Officer	Aggregate year-to-date	\$410.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brandon Smithwood Mailing Address 11 Mass Ave City, State, Zip Code Harvard, MA 01451-1638 Name of Employer (Required) Dimension Renewable Energy	10/06/2023	\$100.00
Occupation (Required) Policy Director	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Janis Tilton Mailing Address 1525 Rockledge Ln City, State, Zip Code Walnut Creek, CA 94595-4970 Name of Employer (Required) Costco	10/16/2023	\$5.00
Occupation (Required) Laborer	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Hubert W. Nicholson Mailing Address 1481 Miller Ave City, State, Zip Code Louisville, MS 39339-6328 Name of Employer (Required) Not Employed	10/16/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Will Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code Madison, MS 39110-7494 Name of Employer (Required) Bradley Arant Occupation (Required) Attorney	10/26/2023	\$500.00
Aggregate year-to-date		\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Troy Hill Mailing Address 511 Fox Bay Rdg City, State, Zip Code Brandon, MS 39047-8963 Name of Employer (Required) Self Employed Occupation (Required) Accountant	10/26/2023	\$164.55
Aggregate year-to-date		\$653.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/27/2023	\$25.00
Aggregate year-to-date		\$1,080.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janet Bland Mailing Address 810 Sample Rd City, State, Zip Code Belden, MS 38826-9650 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	10/27/2023	\$11.00
Aggregate year-to-date		\$306.60

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William H. Harris Jr Mailing Address 1311 14th Ter City, State, Zip Code Miami Beach, FL 33139-3709 Name of Employer (Required) Evergreen	10/27/2023	\$10,000.00
Occupation (Required) Executive	Aggregate year-to-date	\$35,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael King Mailing Address 125 Pin Oak Dr City, State, Zip Code Oxford, MS 38655-6053 Name of Employer (Required) Self Employed	10/08/2023	\$250.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathleen M. Yadrick Mailing Address 419 S 40th Ave City, State, Zip Code Hattiesburg, MS 39402-1724 Name of Employer (Required) Not Employed	10/18/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Douglas A. Horne Mailing Address 412 N Cedar Bluff Rd City, State, Zip Code Knoxville, TN 37923-3609 Name of Employer (Required) Horne Properties, Inc.	10/09/2023	\$20,000.00
Occupation (Required) President	Aggregate year-to-date	\$77,900.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Derek Rusch Mailing Address 1066th St City, State, Zip Code Oakland, CA 94608 Name of Employer (Required) Self Employed Occupation (Required) Contractor	10/29/2023	\$61.00
Aggregate year-to-date		\$1,061.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martha Garrison Mailing Address 113 East St City, State, Zip Code Como, MS 38619-6329 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/20/2023	\$100.00
Aggregate year-to-date		\$235.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	10/12/2023	\$30.00
Aggregate year-to-date		\$1,452.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Neilson Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed Occupation (Required) Retired	10/22/2023	\$100.00
Aggregate year-to-date		\$525.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Walter Knepper Mailing Address PO Box 1106 City, State, Zip Code Ridgeland, MS 39158-1106 Name of Employer (Required) Not Employed	10/13/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church	10/14/2023	\$50.00
Occupation (Required) Clergy	Aggregate year-to-date	\$965.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Gorvine Mailing Address 710 Camp St City, State, Zip Code Hattiesburg, MS 39401-5029 Name of Employer (Required) Not Employed	10/14/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Watt Bishop Mailing Address 714 N 14th St City, State, Zip Code Oxford, MS 38655-3222 Name of Employer (Required) Not Employed	10/24/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$700.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Witherspoon Mailing Address 910 Lincoln Ave City, State, Zip Code Oxford, MS 38655-4328 Name of Employer (Required) Not Employed	10/15/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steve Golding Mailing Address 703 Ginkgo Dr City, State, Zip Code Vicksburg, MS 39180-5828 Name of Employer (Required) Golding Barge Line	10/25/2023	\$2,500.00
Occupation (Required) Manager	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jane L. Woosley Mailing Address 618 Brampton Pl City, State, Zip Code Ridgeland, MS 39157-4195 Name of Employer (Required) Not Employed	10/16/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Powell Mailing Address 66880 Pierson Blvd City, State, Zip Code Desert Hot Spri, CA 92240-3759 Name of Employer (Required) D Nine	10/26/2023	\$10.00
Occupation (Required) Caretaker	Aggregate year-to-date	\$245.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Wilder Mailing Address 156 Markham Dr City, State, Zip Code Long Beach, MS 39560-5604 Name of Employer (Required) Not Employed	10/07/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Daniel Edwards Mailing Address 103 S 21st Ave City, State, Zip Code Hattiesburg, MS 39401-6002 Name of Employer (Required) Forrest Health	10/17/2023	\$250.00
Occupation (Required) Physician	Aggregate year-to-date	\$1,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stephen Baylot Mailing Address 9269 Highway 18 City, State, Zip Code Raymond, MS 39154-8914 Name of Employer (Required) Mardi Gras Motors	10/27/2023	\$300.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$1,700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nikolaos Kritzilis Mailing Address 514 Fawn Cv City, State, Zip Code Canton, MS 39046-9417 Name of Employer (Required) C Spire	10/27/2023	\$100.00
Occupation (Required) Electrical Engineer	Aggregate year-to-date	\$500.00

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard A. Allard Mailing Address 22433 Glad Acres Rd City, State, Zip Code Pass Christian, MS 39571-5326 Name of Employer (Required) Naval Research Laboratory	10/27/2023	\$100.00
Occupation (Required) Oceanographer	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Lalli Mailing Address 140 State St City, State, Zip Code Brooklyn, NY 11201-6039 Name of Employer (Required) Not Employed	10/19/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed	10/19/2023	\$10.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$520.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alison Silverstein Mailing Address 2515 Mc Bee St City, State, Zip Code Austin, TX 78723-4905 Name of Employer (Required) Self Employed	10/29/2023	\$100.00
Occupation (Required) Electric Systems Consultant	Aggregate year-to-date	\$803.00

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Brandon Robinson		
Mailing Address 1237 County Road 503	10/05/2023	\$2,000.00
City, State, Zip Code Guntown, MS 38849-5124		
Purpose of Disbursement (Optional) Shoot Utilties Rental	Aggregate year-to-date	\$2,000.00
Full Name Enterprise-Tocsin Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 650	10/26/2023	\$1,600.00
City, State, Zip Code Indianola, MS 38751-0650		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$3,696.00
Full Name Love's Travel Stops	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2202 W Hefner Rd	10/17/2023	\$75.16
City, State, Zip Code Oklahoma City, OK 73120-7604		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$401.90
Full Name Bernice Alexander	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 505 Chandler St	10/02/2023	\$1,586.64
City, State, Zip Code Indianola, MS 38751-3212		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,226.92
Full Name Mississippi Association of Educators	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 775 N State St	10/02/2023	\$1,000.00
City, State, Zip Code Jackson, MS 39202-3006		
Purpose of Disbursement (Optional) Event Supplies	Aggregate year-to-date	\$1,000.00

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amalgamated Bank		
Mailing Address		
275 7th Ave	10/27/2023	\$262.00
City, State, Zip Code		
New York, NY 10001-6708		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,348.95
Bank Fee		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jessica Carter		
Mailing Address		
5505 Meadow Oaks Park Dr	10/02/2023	\$917.50
City, State, Zip Code		
Jackson, MS 39211-4348		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,835.00
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	10/02/2023	\$97.90
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,727.87
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Andrew Buehrer		
Mailing Address		
3249 Pepper Ridge Dr	10/13/2023	\$1,812.30
City, State, Zip Code		
Maumee, OH 43537-9697		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$15,479.07
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.		
Mailing Address		
410 Terry Ave N	10/25/2023	\$146.91
City, State, Zip Code		
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,236.62
Office Supplies		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services	10/02/2023	\$1,205.69
Mailing Address PO Box 382110		
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$38,280.76
Full Name Khalilah Karriem	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1326 15th St N	10/02/2023	\$588.87
City, State, Zip Code Columbus, MS 39701-3610		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$2,123.90
Full Name Cleveland Douglas III	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 15710 Ferrell Ave	10/13/2023	\$1,305.33
City, State, Zip Code Baton Rouge, LA 70817-2415		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,305.33
Full Name AT&T	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 208 S Akard St	10/23/2023	\$60.50
City, State, Zip Code Dallas, TX 75202-4206		
Purpose of Disbursement (Optional) Phones	Aggregate year-to-date	\$366.50
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	10/16/2023	\$74.56
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Telzio	10/27/2023	\$103.30
Mailing Address 5900 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90036-5013		
Purpose of Disbursement (Optional) Phones	Aggregate year-to-date	\$321.44
Full Name Julie McDermott	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1119 Bratton Rd City, State, Zip Code New Albany, MS 38652-9328	10/02/2023	\$2,073.82
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$17,725.67
Full Name Jake Laves	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 699 Nation Hills Dr City, State, Zip Code Tupelo, MS 38804-6063	10/13/2023	\$2,974.48
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$44,422.09
Full Name Circle K	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1130 W Warner Rd City, State, Zip Code Tempe, AZ 85284-2816	10/23/2023	\$10.77
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$625.51
Full Name ALG Polling, Inc. DBA Impact Research	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 260 Commerce St City, State, Zip Code Montgomery, AL 36104-2546	10/24/2023	\$25,350.00
Purpose of Disbursement (Optional) Research Consultant	Aggregate year-to-date	\$319,561.94

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	10/18/2023	\$37.07
Mailing Address PO Box 2463 City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Thomas Christian	10/20/2023	\$2,364.31
Mailing Address 584 Wren Rd City, State, Zip Code Nettleton, MS 38858-8125		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$2,364.31
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Strategy Group LLC	10/02/2023	\$4,702.96
Mailing Address 500 W Madison St City, State, Zip Code Chicago, IL 60661-2559		
Purpose of Disbursement (Optional) Printing of Campaign Materials	Aggregate year-to-date	\$30,969.84
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Terry Rogers	10/02/2023	\$690.97
Mailing Address 1832 County Road 110 City, State, Zip Code Quitman, MS 39355-9500		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$690.97
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Pavlise Patterson	10/13/2023	\$1,665.95
Mailing Address 1925 Shady Lane Dr City, State, Zip Code Jackson, MS 39204-4628		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$2,317.02

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023**ITEMIZED DISBURSEMENTS**Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mississippi Democratic Party	10/23/2023	\$214,000.00
Mailing Address 811 E River Pl City, State, Zip Code Jackson, MS 39202-3432		
Purpose of Disbursement (Optional) Political Contribution	Aggregate year-to-date	\$771,950.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Comfort Inn	10/04/2023	\$5.00
Mailing Address 10750 Columbia Pike City, State, Zip Code Silver Spring, MD 20901-4402		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$878.47
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Southern Prohibition Brewing	10/19/2023	\$1,471.08
Mailing Address 301 Mobile St City, State, Zip Code Hattiesburg, MS 39401-3406		
Purpose of Disbursement (Optional) Event Catering	Aggregate year-to-date	\$1,783.58
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Payroll Data Processing	10/02/2023	\$189.98
Mailing Address 3501 E Frontage Rd City, State, Zip Code Tampa, FL 33607-1723		
Purpose of Disbursement (Optional) Payroll Fees	Aggregate year-to-date	\$322,917.78
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Entergy	10/12/2023	\$134.57
Mailing Address PO Box 8105 City, State, Zip Code Baton Rouge, LA 70891-8105		
Purpose of Disbursement (Optional) Utilities	Aggregate year-to-date	\$529.77

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Dollar General		
Mailing Address		
100 Mission Rdg	10/02/2023	\$18.94
City, State, Zip Code		
Goodlettsville, TN 37072-2171		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$232.56
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Rally by Relentless PBC		
Mailing Address		
2093 Philadelphia Pike	10/23/2023	\$100,000.00
City, State, Zip Code		
Claymont, DE 19703-2424		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$400,000.00
Organizing Consulting		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stefon Ward		
Mailing Address		
138 Brookwood Ln	10/13/2023	\$1,623.42
City, State, Zip Code		
Hattiesburg, MS 39401-5763		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,396.11
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Uber		
Mailing Address		
1515 3rd St	10/25/2023	\$19.98
City, State, Zip Code		
San Francisco, CA 94158-2211		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$340.94
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Nicholas Cosmo		
Mailing Address		
202 Milford St	10/16/2023	\$479.28
City, State, Zip Code		
Tupelo, MS 38801-4687		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$16,957.74
Reimbursement - Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address		
1111 Expedia Group Way W	10/16/2023	\$134.03
City, State, Zip Code		
Seattle, WA 98119-1111		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,848.55
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	10/02/2023	\$107.97
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$6,249.68
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Donohoe Partners, Inc.		
Mailing Address		
1250 Connecticut Ave NW	10/24/2023	\$190,000.00
City, State, Zip Code		
Washington, DC 20036-2657		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$400,000.00
Field Consulting		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ExxonMobil		
Mailing Address		
5959 Las Colinas Blvd	10/24/2023	\$59.03
City, State, Zip Code		
Irving, TX 75039-4202		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$684.67
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Brian Johnson		
Mailing Address		
113 Rosedowne Dr	10/05/2023	\$900.00
City, State, Zip Code		
Madison, MS 39110-4757		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$900.00
Contribution Refund		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
NGP VAN		
Mailing Address		
1101 15th St NW	10/06/2023	\$1,953.55
City, State, Zip Code		
Washington, DC 20005-5006		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$18,209.60
Database Services		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chrome Strategic Partners LLC		
Mailing Address		
745 Gardner St	10/16/2023	\$100,000.00
City, State, Zip Code		
Jackson, MS 39206-5937		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$100,000.00
Field Consulting		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mississippi Democratic Party		
Mailing Address		
811 E River Pl	10/10/2023	\$142,100.00
City, State, Zip Code		
Jackson, MS 39202-3432		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$771,950.00
Political Contribution		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hampton Inn		
Mailing Address		
7930 Jones Branch Dr	10/10/2023	\$11.10
City, State, Zip Code		
McLean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,471.50
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Katharine Kurz		
Mailing Address		
634 W Main St	10/11/2023	\$2,028.60
City, State, Zip Code		
Tupelo, MS 38804-3745		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$24,568.79
Reimbursement - Travel (Mileage)		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	10/13/2023	\$5.75
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$6,249.68
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Tom Bigbee Fiber		
Mailing Address		
1346 Auburn Rd	10/24/2023	\$304.90
City, State, Zip Code		
Tupelo, MS 38804-8412		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,712.85
Internet		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero		
Mailing Address		
200 Spectrum Center Dr	10/06/2023	\$1,331.40
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$75,732.64
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.		
Mailing Address		
410 Terry Ave N	10/26/2023	-\$22.52
City, State, Zip Code		
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,236.62
Office Supplies Refund		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Love's Travel Stops		
Mailing Address		
2202 W Hefner Rd	10/24/2023	\$60.10
City, State, Zip Code		
Oklahoma City, OK 73120-7604		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$401.90
Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	10/17/2023	\$269.93
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$75,732.64
Full Name Rhonda Bailey	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1520 24th St N	10/02/2023	\$638.28
City, State, Zip Code Columbus, MS 39701-2564		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$2,151.78
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	10/10/2023	\$4.69
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87
Full Name Samuel Case	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4104 Fieldstone Loop	10/02/2023	\$675.33
City, State, Zip Code Oxford, MS 38655-3463		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,485.92
Full Name Larry Campbell	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Colony Park Dr	10/13/2023	\$730.38
City, State, Zip Code Pearl, MS 39208-6369		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$4,477.32

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.		
Mailing Address		
410 Terry Ave N	10/16/2023	\$180.82
City, State, Zip Code		
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,236.62
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Avis Rent-a-Car		
Mailing Address		
6 Sylvan Way	10/27/2023	\$705.74
City, State, Zip Code		
Parsippany, NJ 07054-3826		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$705.74
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Best Buy		
Mailing Address		
7601 Penn Ave S	10/20/2023	\$108.24
City, State, Zip Code		
Minneapolis, MN 55423-8500		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$479.81
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jordan Kelley		
Mailing Address		
8364 Barton Dr	10/02/2023	\$2,320.98
City, State, Zip Code		
Strongsville, OH 44149-1017		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$26,203.42
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Aaron Facio-Cortes		
Mailing Address		
27006 Fordham Dr	10/13/2023	\$2,086.41
City, State, Zip Code		
Wesley Chapel, FL 33544-8730		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$20,695.27
Salary		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	10/06/2023	\$34.87
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,727.87
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
John J. Miller		
Mailing Address		
30 Rock Hill Rd	10/02/2023	\$1,994.23
City, State, Zip Code		
Sumrall, MS 39482-9537		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,791.44
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Timmanisha Macon		
Mailing Address		
19311 Crestwick St	10/13/2023	\$1,691.56
City, State, Zip Code		
Saucier, MS 39574-8031		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$6,980.57
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Circle K		
Mailing Address		
1130 W Warner Rd	10/23/2023	\$3.73
City, State, Zip Code		
Tempe, AZ 85284-2816		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$625.51
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	10/16/2023	\$48.02
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,727.87
Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Towne Center Properties LLC	10/02/2023	\$1,525.00
Mailing Address PO Box 321149		
City, State, Zip Code Flowood, MS 39232-1149		
Purpose of Disbursement (Optional) Rent and Utilities	Aggregate year-to-date	\$3,305.00
Full Name Angelo Ruiz	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 127 S Roach St	10/02/2023	\$1,994.23
City, State, Zip Code Jackson, MS 39201-2916		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$18,538.87
Full Name Comfort Inn	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 10750 Columbia Pike	10/02/2023	\$117.54
City, State, Zip Code Silver Spring, MD 20901-4402		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$878.47
Full Name Shawn Patterson	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1160 1st St NE	10/13/2023	\$2,974.48
City, State, Zip Code Washington, DC 20002-4799		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$42,260.62
Full Name Mississippi Democratic Party	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 811 E River Pl	10/16/2023	\$107,000.00
City, State, Zip Code Jackson, MS 39202-3432		
Purpose of Disbursement (Optional) Political Contribution	Aggregate year-to-date	\$771,950.00

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023**ITEMIZED DISBURSEMENTS**Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ashley Floyd	10/02/2023	\$5,000.00
Mailing Address 1010 Bellevue Pl City, State, Zip Code Jackson, MS 39202-2712		
Purpose of Disbursement (Optional) Political Consulting	Aggregate year-to-date	\$5,683.68
Full Name Payroll Data Processing	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3501 E Frontage Rd City, State, Zip Code Tampa, FL 33607-1723	10/02/2023	\$29,846.33
Purpose of Disbursement (Optional) Payroll Taxes	Aggregate year-to-date	\$322,917.78
Full Name DoorDash	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 303 2nd St City, State, Zip Code San Francisco, CA 94107-1366	10/02/2023	\$31.68
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$307.69
Full Name Omar Washington	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 215 South Blvd City, State, Zip Code Drew, MS 38737-3503	10/13/2023	\$1,162.28
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,162.28
Full Name Abby O'Keefe	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1404 Highland Valley Cir City, State, Zip Code Wildwood, MO 63005-4259	10/16/2023	\$286.80
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$41,157.31

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Battleaxe Digital	10/11/2023	\$66,145.84
Mailing Address 1405 Florida Ave NW City, State, Zip Code Washington, DC 20009-5801		
Purpose of Disbursement (Optional) Digital Consulting	Aggregate year-to-date	\$248,063.24
Full Name Expedia.com	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1111 Expedia Group Way W City, State, Zip Code Seattle, WA 98119-1111	10/18/2023	\$84.05
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$8,848.55
Full Name ExxonMobil	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5959 Las Colinas Blvd City, State, Zip Code Irving, TX 75039-4202	10/23/2023	\$11.00
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$684.67
Full Name Walmart	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 702 SW 8th St City, State, Zip Code Bentonville, AR 72716-6209	10/23/2023	\$185.24
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$6,249.68
Full Name Donohoe Partners, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1250 Connecticut Ave NW City, State, Zip Code Washington, DC 20036-2657	10/06/2023	\$90,000.00
Purpose of Disbursement (Optional) Field Consulting	Aggregate year-to-date	\$400,000.00

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023**ITEMIZED DISBURSEMENTS**Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mississippi Democratic Party	10/10/2023	\$1,500.00
Mailing Address 811 E River Pl City, State, Zip Code Jackson, MS 39202-3432		
Purpose of Disbursement (Optional) Political Contribution	Aggregate year-to-date	\$771,950.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Old Town Media	10/23/2023	\$535,547.00
Mailing Address 114 Quay St City, State, Zip Code Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$5,822,884.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
TW Express	10/25/2023	\$1,203.75
Mailing Address 951 Highway 51 S City, State, Zip Code Grenada, MS 38901-8414		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$2,808.75
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart	10/25/2023	\$24.21
Mailing Address 702 SW 8th St City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$6,249.68
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hampton Inn	10/06/2023	\$131.79
Mailing Address 7930 Jones Branch Dr City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$2,471.50

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023**ITEMIZED DISBURSEMENTS**Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
William A. Cox	10/13/2023	\$1,000.00
Mailing Address 1739 Swann St NW		
City, State, Zip Code Washington, DC 20009-5536		
Purpose of Disbursement (Optional) Contribution Refund	Aggregate year-to-date	\$1,000.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chevron Stations	10/26/2023	\$49.52
Mailing Address 6001 Bollinger Canyon Rd		
City, State, Zip Code San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,283.83
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jada Barnes	10/02/2023	\$1,528.98
Mailing Address 395 Lampton Hilltop Rd		
City, State, Zip Code Columbia, MS 39429-9189		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$14,214.61
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	10/10/2023	\$69.62
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Lauren Cobb	10/02/2023	\$3,022.75
Mailing Address 3334 Riverbend Rd		
City, State, Zip Code Belden, MS 38826-1003		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$8,587.93

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Alexis Carraway	10/13/2023	\$677.59
Mailing Address 106 Roberts Cv City, State, Zip Code Starkville, MS 39759-6628		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$9,821.84
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.	10/23/2023	\$38.62
Mailing Address 410 Terry Ave N City, State, Zip Code Seattle, WA 98109-5210		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$3,236.62
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com	10/27/2023	\$122.84
Mailing Address 1111 Expedia Group Way W City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$8,848.55
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Katharine Kurz	10/02/2023	\$1,994.23
Mailing Address 634 W Main St City, State, Zip Code Tupelo, MS 38804-3745		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$24,568.79
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Rebecca Holden	10/13/2023	\$2,529.90
Mailing Address 5045 E 1st Sq SW City, State, Zip Code Vero Beach, FL 32968-2246		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$2,529.90

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023**ITEMIZED DISBURSEMENTS**Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	10/06/2023	\$16.53
Mailing Address PO Box 2463 City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Benjamin Nordstrom	10/02/2023	\$675.33
Mailing Address 711 Ridgewood Manor Dr City, State, Zip Code Oxford, MS 38655-2413		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$2,285.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Clay May	10/13/2023	\$263.20
Mailing Address 1265 Lamar Ave City, State, Zip Code Memphis, TN 38104-4525		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$263.20
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Circle K	10/23/2023	\$87.98
Mailing Address 1130 W Warner Rd City, State, Zip Code Tempe, AZ 85284-2816		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$625.51
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	10/19/2023	\$32.47
Mailing Address PO Box 2463 City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Trinity Aviation	10/20/2023	\$5,472.82
Mailing Address 1501 County Road 119 City, State, Zip Code Water Valley, MS 38965-3101		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$7,513.72
London and Stetelman Inc	10/02/2023	\$1,198.00
Mailing Address 3906 Hardy St City, State, Zip Code Hattiesburg, MS 39402-1684		
Purpose of Disbursement (Optional) Rent	Aggregate year-to-date	\$6,417.00
Shinitra Russell	10/02/2023	\$2,320.98
Mailing Address 1185 Collier Rd NW City, State, Zip Code Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$28,771.75
Amanda Powell	10/13/2023	\$1,740.96
Mailing Address PO Box 16982 City, State, Zip Code Hattiesburg, MS 39404-6982		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,615.45
Sprint Print of Tupelo	10/23/2023	\$1,269.13
Mailing Address 450 E President Ave City, State, Zip Code Tupelo, MS 38801-5599		
Purpose of Disbursement (Optional) Printing of Campaign Materials	Aggregate year-to-date	\$1,269.13

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
DoorDash		
Mailing Address		
303 2nd St	10/02/2023	\$70.50
City, State, Zip Code		
San Francisco, CA 94107-1366		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$307.69
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
John-Mark Worth		
Mailing Address		
11503 Raymond Ave	10/13/2023	\$535.74
City, State, Zip Code		
Saint Louis, MO 63138-2422		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$535.74
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address		
1111 Expedia Group Way W	10/20/2023	\$400.40
City, State, Zip Code		
Seattle, WA 98119-1111		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,848.55
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
United States Postal Service		
Mailing Address		
475 Lenfant Plz SW	10/02/2023	\$28.75
City, State, Zip Code		
Washington, DC 20260-0004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,695.24
Postage		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Declaration Media Group		
Mailing Address		
1152 15th St NW	10/16/2023	\$97,236.00
City, State, Zip Code		
Washington, DC 20005-1723		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$339,567.48
Video Production		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	10/10/2023	\$19.73
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$6,249.68
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero		
Mailing Address		
200 Spectrum Center Dr	10/11/2023	\$1,063.25
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$75,732.64
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ExxonMobil		
Mailing Address		
5959 Las Colinas Blvd	10/05/2023	\$52.56
City, State, Zip Code		
Irving, TX 75039-4202		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$684.67
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shawn Patterson		
Mailing Address		
1160 1st St NE	10/11/2023	\$47.12
City, State, Zip Code		
Washington, DC 20002-4799		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$42,260.62
Reimbursement - Subscriptions (Otter, ABBYY)		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hampton Inn		
Mailing Address		
7930 Jones Branch Dr	10/06/2023	\$131.79
City, State, Zip Code		
McLean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,471.50
Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	10/17/2023	\$35.64
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$6,249.68
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stripe		
Mailing Address		
3180 18th St	10/22/2023	\$25.39
City, State, Zip Code		
San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$851.18
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Marathon Petroleum Corporation		
Mailing Address		
539 S Main St	10/24/2023	\$44.84
City, State, Zip Code		
Findlay, OH 45840-3229		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$356.11
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero		
Mailing Address		
200 Spectrum Center Dr	10/02/2023	\$85.25
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$75,732.64
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Morgan Benjamin		
Mailing Address		
4212 28th St	10/02/2023	\$1,812.30
City, State, Zip Code		
Long Island City, NY 11101-6258		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$18,402.78
Salary		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	10/23/2023	\$913.79
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$75,732.64
Full Name Amazon, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 410 Terry Ave N	10/27/2023	\$53.16
City, State, Zip Code Seattle, WA 98109-5210		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$3,236.62
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	10/10/2023	\$35.46
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87
Full Name Louise Cole	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 518 N Church St	10/02/2023	\$1,528.98
City, State, Zip Code Okolona, MS 38860-1017		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$12,106.39
Full Name Jessica Carter	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5505 Meadow Oaks Park Dr	10/13/2023	\$917.50
City, State, Zip Code Jackson, MS 39211-4348		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,835.00

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.		
Mailing Address		
410 Terry Ave N	10/16/2023	\$210.80
City, State, Zip Code		
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,236.62
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Angelique LaCour		
Mailing Address		
PO Box 2585	10/02/2023	\$1,528.98
City, State, Zip Code		
Bay St Louis, MS 39521-2585		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$6,336.73
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Benjamin Hunt		
Mailing Address		
510 S Broadway St	10/13/2023	\$2,167.10
City, State, Zip Code		
Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$30,476.11
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	10/19/2023	\$59.93
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,727.87
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	10/10/2023	\$57.66
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,727.87
Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Abby O'Keefe	10/02/2023	\$2,974.48
Mailing Address 1404 Highland Valley Cir		
City, State, Zip Code Wildwood, MO 63005-4259		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$41,157.31
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Circle K	10/12/2023	\$58.70
Mailing Address 1130 W Warner Rd		
City, State, Zip Code Tempe, AZ 85284-2816		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$625.51
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Gregory McCain	10/13/2023	\$712.03
Mailing Address 308 S Montgomery St		
City, State, Zip Code Starkville, MS 39759-3334		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,618.69
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Towne Center Properties LLC	10/24/2023	\$230.00
Mailing Address PO Box 321149		
City, State, Zip Code Flowood, MS 39232-1149		
Purpose of Disbursement (Optional) Utilities	Aggregate year-to-date	\$3,305.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Silly Sisters, LLC	10/02/2023	\$900.00
Mailing Address 310 County Road 640		
City, State, Zip Code Baldwyn, MS 38824-8680		
Purpose of Disbursement (Optional) Rent	Aggregate year-to-date	\$8,100.00

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Tai Sims		
Mailing Address		
5049 Wishing Well Dr	10/02/2023	\$2,484.86
City, State, Zip Code		
Grand Blanc, MI 48439-4239		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$12,424.30
Salary		
Greta Presley		
Mailing Address		
182 Verona Ave	10/13/2023	\$1,623.42
City, State, Zip Code		
Nettleton, MS 38858-6004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$20,512.64
Salary		
DoorDash		
Mailing Address		
303 2nd St	10/25/2023	\$9.99
City, State, Zip Code		
San Francisco, CA 94107-1366		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$307.69
Staff Meals		
Ashley Floyd		
Mailing Address		
1010 Bellevue Pl	10/16/2023	\$683.68
City, State, Zip Code		
Jackson, MS 39202-2712		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,683.68
Reimbursement - Travel		
Expedia.com		
Mailing Address		
1111 Expedia Group Way W	10/20/2023	\$416.32
City, State, Zip Code		
Seattle, WA 98119-1111		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,848.55
Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ALG Polling, Inc. DBA Impact Research	10/11/2023	\$48,311.94
Mailing Address 260 Commerce St		
City, State, Zip Code Montgomery, AL 36104-2546		
Purpose of Disbursement (Optional) Research Consultant	Aggregate year-to-date	\$319,561.94
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero	10/12/2023	\$267.84
Mailing Address 200 Spectrum Center Dr		
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$75,732.64
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
United States Postal Service	10/19/2023	\$28.75
Mailing Address 475 Lenfant Plz SW		
City, State, Zip Code Washington, DC 20260-0004		
Purpose of Disbursement (Optional) Postage	Aggregate year-to-date	\$2,695.24
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart	10/12/2023	\$166.75
Mailing Address 702 SW 8th St		
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$6,249.68
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Fast Wrapz	10/24/2023	\$10,500.00
Mailing Address 502 Crossover Rd		
City, State, Zip Code Tupelo, MS 38801-4946		
Purpose of Disbursement (Optional) Bus Wrap	Aggregate year-to-date	\$10,500.00

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stripe		
Mailing Address 3180 18th St	10/06/2023	\$20.07
City, State, Zip Code San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$851.18
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Trey Till		
Mailing Address 105 Morning Glory Dr	10/11/2023	\$374.46
City, State, Zip Code Madison, MS 39110-7898		
Purpose of Disbursement (Optional) Reimbursement - Travel (Mileage)	Aggregate year-to-date	\$11,654.88
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	10/24/2023	\$17.25
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$6,249.68
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hampton Inn		
Mailing Address 7930 Jones Branch Dr	10/06/2023	\$131.79
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$2,471.50
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Katelyn Mabus Presley		
Mailing Address 4536 Union Ave	10/23/2023	\$779.40
City, State, Zip Code Nettleton, MS 38858-6036		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$779.40

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Marathon Petroleum Corporation	10/24/2023	\$23.53
Mailing Address 539 S Main St City, State, Zip Code Findlay, OH 45840-3229		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$356.11
Full Name Adam Beyer	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4288 N Gloster St City, State, Zip Code Tupelo, MS 38804-7249	10/02/2023	\$2,974.48
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$44,194.40
Full Name Bernice Alexander	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 505 Chandler St City, State, Zip Code Indianola, MS 38751-3212	10/13/2023	\$1,640.28
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,226.92
Full Name Amazon, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 410 Terry Ave N City, State, Zip Code Seattle, WA 98109-5210	10/27/2023	\$46.54
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$3,236.62
Full Name Cynthia Cook	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 141 Mapleton Rd City, State, Zip Code Grosse Pointe Farms, MI 48236-3614	10/02/2023	\$1,994.23
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,986.01

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Samuel Case		
Mailing Address		
4104 Fieldstone Loop	10/13/2023	\$712.03
City, State, Zip Code		
Oxford, MS 38655-3463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,485.92
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chevron Stations		
Mailing Address		
6001 Bollinger Canyon Rd	10/27/2023	\$29.04
City, State, Zip Code		
San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,283.83
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	10/18/2023	\$37.43
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,727.87
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.		
Mailing Address		
410 Terry Ave N	10/19/2023	\$91.52
City, State, Zip Code		
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,236.62
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Candlewood Suites		
Mailing Address		
3 Ravinia Dr	10/11/2023	\$130.01
City, State, Zip Code		
Atlanta, GA 30346-2121		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$336.91
Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walker Lake		
Mailing Address		
1850 Highland Ter	10/02/2023	\$675.33
City, State, Zip Code		
Jackson, MS 39211-5718		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,611.93
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Khalilah Karriem		
Mailing Address		
1326 15th St N	10/13/2023	\$707.68
City, State, Zip Code		
Columbus, MS 39701-3610		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,123.90
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	10/16/2023	\$60.56
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,727.87
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Pine Belt Motors		
Mailing Address		
802 Broadway Dr	10/27/2023	\$7,531.01
City, State, Zip Code		
Hattiesburg, MS 39401-7531		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$7,531.01
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	10/11/2023	\$73.33
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,727.87
Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ron Owens		
Mailing Address		
3545 Mitchell Rd	10/02/2023	\$3,935.75
City, State, Zip Code		
Tupelo, MS 38801-9616		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$73,167.71
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Julie McDermott		
Mailing Address		
1119 Bratton Rd	10/13/2023	\$2,073.82
City, State, Zip Code		
New Albany, MS 38652-9328		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$17,725.67
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Circle K		
Mailing Address		
1130 W Warner Rd	10/04/2023	\$47.55
City, State, Zip Code		
Tempe, AZ 85284-2816		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$625.51
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Bumperactive		
Mailing Address		
5907 Burnet Rd	10/20/2023	\$1,568.82
City, State, Zip Code		
Austin, TX 78757-3224		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$28,196.06
Store Overhead		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Acme Investment Company		
Mailing Address		
2032 Tidewater Ln	10/02/2023	\$500.00
City, State, Zip Code		
Madison, MS 39110-8981		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,500.00
Rent		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stripe		
Mailing Address		
3180 18th St	10/02/2023	\$12.36
City, State, Zip Code		
San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$851.18
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jacob Smith		
Mailing Address		
4100 N Gloster St	10/02/2023	\$2,811.60
City, State, Zip Code		
Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$31,042.63
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shinitra Russell		
Mailing Address		
1185 Collier Rd NW	10/13/2023	\$2,420.63
City, State, Zip Code		
Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$28,771.75
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
State Farm Insurance		
Mailing Address		
1 State Farm Plz	10/05/2023	\$110.74
City, State, Zip Code		
Bloomington, IL 61710-0001		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$947.34
Insurance		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Payroll Data Processing		
Mailing Address		
3501 E Frontage Rd	10/13/2023	\$31,114.47
City, State, Zip Code		
Tampa, FL 33607-1723		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$322,917.78
Payroll Taxes		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address		
1111 Expedia Group Way W	10/04/2023	\$250.52
City, State, Zip Code		
Seattle, WA 98119-1111		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,848.55
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Benjamin Hunt		
Mailing Address		
510 S Broadway St	10/16/2023	\$702.71
City, State, Zip Code		
Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$30,476.11
Reimbursement - Travel, Communications Tools		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hotel Tupelo		
Mailing Address		
314 E Main St	10/18/2023	\$643.50
City, State, Zip Code		
Tupelo, MS 38804-4026		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,125.34
Event Space Rental		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address		
1111 Expedia Group Way W	10/23/2023	\$100.10
City, State, Zip Code		
Seattle, WA 98119-1111		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,848.55
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
United States Postal Service		
Mailing Address		
475 Lenfant Plz SW	10/24/2023	\$28.75
City, State, Zip Code		
Washington, DC 20260-0004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,695.24
Postage		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Google		
Mailing Address 1600 Amphitheatre Pkwy	10/02/2023	\$24.39
City, State, Zip Code Mountain View, CA 94043-1351		
Purpose of Disbursement (Optional) Email Services	Aggregate year-to-date	\$1,845.66
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Old Town Media		
Mailing Address 114 Quay St	10/24/2023	\$65,000.00
City, State, Zip Code Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$5,822,884.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	10/16/2023	\$23.81
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$6,249.68
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Rally by Relentless PBC		
Mailing Address 2093 Philadelphia Pike	10/10/2023	\$125,000.00
City, State, Zip Code Claymont, DE 19703-2424		
Purpose of Disbursement (Optional) Organizing Consulting	Aggregate year-to-date	\$400,000.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Holiday Inn		
Mailing Address 3 Ravinia Dr	10/23/2023	\$184.17
City, State, Zip Code Atlanta, GA 30346-2118		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,301.71

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.		
Mailing Address		
410 Terry Ave N	10/26/2023	\$22.43
City, State, Zip Code		
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,236.62
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Marathon Petroleum Corporation		
Mailing Address		
539 S Main St	10/10/2023	\$87.99
City, State, Zip Code		
Findlay, OH 45840-3229		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$356.11
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
City of Columbus		
Mailing Address		
523 Main St	10/26/2023	\$660.00
City, State, Zip Code		
Columbus, MS 39701-5733		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$660.00
Event Permit		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Noah Britt		
Mailing Address		
1537 S 11th St	10/02/2023	\$675.33
City, State, Zip Code		
Ocean Springs, MS 39564-9568		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,798.07
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Rhonda Bailey		
Mailing Address		
1520 24th St N	10/13/2023	\$1,513.50
City, State, Zip Code		
Columbus, MS 39701-2564		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,151.78
Salary		

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ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.		
Mailing Address		
410 Terry Ave N	10/27/2023	\$37.17
City, State, Zip Code		
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,236.62
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	10/10/2023	\$48.19
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,727.87
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Nicholas Cosmo		
Mailing Address		
202 Milford St	10/02/2023	\$2,320.98
City, State, Zip Code		
Tupelo, MS 38801-4687		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$16,957.74
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Lauren Cobb		
Mailing Address		
3334 Riverbend Rd	10/13/2023	\$3,022.75
City, State, Zip Code		
Belden, MS 38826-1003		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,587.93
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.		
Mailing Address		
410 Terry Ave N	10/16/2023	\$63.17
City, State, Zip Code		
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,236.62
Office Supplies		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Circle K		
Mailing Address		
1130 W Warner Rd	10/27/2023	\$72.88
City, State, Zip Code		
Tempe, AZ 85284-2816		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$625.51
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Issac Lampner		
Mailing Address		
945 Mitchell St	10/02/2023	\$2,798.60
City, State, Zip Code		
Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$56,764.98
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	10/12/2023	\$7.25
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,727.87
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero		
Mailing Address		
200 Spectrum Center Dr	10/03/2023	\$2,255.75
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$75,732.64
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jordan Kelley		
Mailing Address		
8364 Barton Dr	10/13/2023	\$2,384.54
City, State, Zip Code		
Strongsville, OH 44149-1017		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$26,203.42
Salary		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	10/10/2023	\$955.82
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$75,732.64
Full Name Amanda Pagoaga	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5341 Melville Cv	10/02/2023	\$1,528.98
City, State, Zip Code Olive Branch, MS 38654-8363		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$6,371.49
Full Name John J. Miller	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 30 Rock Hill Rd	10/13/2023	\$1,994.23
City, State, Zip Code Sumrall, MS 39482-9537		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$8,791.44
Full Name Circle K	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1130 W Warner Rd	10/23/2023	\$54.27
City, State, Zip Code Tempe, AZ 85284-2816		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$625.51
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	10/05/2023	\$51.14
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Take 5 Oil Change		
Mailing Address		
201 S GLOSTER St	10/11/2023	\$185.46
City, State, Zip Code		
Tupelo, MS 38804		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$802.30
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Andrew Buehrer		
Mailing Address		
3249 Pepper Ridge Dr	10/02/2023	\$468.00
City, State, Zip Code		
Maumee, OH 43537-9697		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$15,479.07
Reimbursement - Travel (Mileage)		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Trey Till		
Mailing Address		
105 Morning Glory Dr	10/02/2023	\$1,812.30
City, State, Zip Code		
Madison, MS 39110-7898		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$11,654.88
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Trinity Aviation		
Mailing Address		
1501 County Road 119	10/12/2023	\$2,040.90
City, State, Zip Code		
Water Valley, MS 38965-3101		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$7,513.72
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Tai Sims		
Mailing Address		
5049 Wishing Well Dr	10/13/2023	\$2,484.86
City, State, Zip Code		
Grand Blanc, MI 48439-4239		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$12,424.30
Salary		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address		
1111 Expedia Group Way W	10/05/2023	\$402.06
City, State, Zip Code		
Seattle, WA 98119-1111		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,848.55
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ethan Cox		
Mailing Address		
3614 N Fremont St	10/16/2023	\$5,719.23
City, State, Zip Code		
Chicago, IL 60613-4372		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$41,374.23
Reimbursement - Travel, Shipping		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hotel Tupelo		
Mailing Address		
314 E Main St	10/18/2023	\$778.22
City, State, Zip Code		
Tupelo, MS 38804-4026		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,125.34
Event Catering		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
KMM Consulting		
Mailing Address		
8242 Birch St	10/11/2023	\$7,500.00
City, State, Zip Code		
New Orleans, LA 70118-2822		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$78,274.44
Fundraising Consulting		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address		
1111 Expedia Group Way W	10/23/2023	\$99.64
City, State, Zip Code		
Seattle, WA 98119-1111		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,848.55
Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023**ITEMIZED DISBURSEMENTS**Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
United States Postal Service	10/03/2023	\$28.75
Mailing Address 475 Lenfant Plz SW City, State, Zip Code Washington, DC 20260-0004		
Purpose of Disbursement (Optional) Postage	Aggregate year-to-date	\$2,695.24
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Greta Presley	10/11/2023	\$721.11
Mailing Address 182 Verona Ave City, State, Zip Code Nettleton, MS 38858-6004		
Purpose of Disbursement (Optional) Reimbursement - Travel, Postage, Event Expenses	Aggregate year-to-date	\$20,512.64
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hampton Inn	10/02/2023	\$3.00
Mailing Address 7930 Jones Branch Dr City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$2,471.50
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart	10/06/2023	\$74.87
Mailing Address 702 SW 8th St City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$6,249.68
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Número	10/19/2023	\$189.76
Mailing Address 200 Spectrum Center Dr City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$75,732.64

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Holiday Inn		
Mailing Address		
3 Ravinia Dr	10/23/2023	\$151.86
City, State, Zip Code		
Atlanta, GA 30346-2118		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,301.71
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services		
Mailing Address		
PO Box 382110	10/16/2023	\$3,162.05
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$38,280.76
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.		
Mailing Address		
410 Terry Ave N	10/26/2023	\$22.43
City, State, Zip Code		
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,236.62
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Will Palmer		
Mailing Address		
PO Box 925	10/11/2023	\$123.25
City, State, Zip Code		
New Albany, MS 38652-0925		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$964.25
Reimbursement - Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services		
Mailing Address		
PO Box 382110	10/23/2023	\$3,398.64
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$38,280.76
Credit Card Processing		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Marathon Petroleum Corporation	10/25/2023	\$11.01
Mailing Address 539 S Main St		
City, State, Zip Code Findlay, OH 45840-3229		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$356.11
Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	10/01/2023	\$808.96
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$75,732.64
Full Name Andrew Buehrer	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3249 Pepper Ridge Dr	10/02/2023	\$1,812.30
City, State, Zip Code Maumee, OH 43537-9697		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$15,479.07
Full Name Jada Barnes	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 395 Lampton Hilltop Rd	10/13/2023	\$1,582.62
City, State, Zip Code Columbia, MS 39429-9189		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$14,214.61
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	10/10/2023	\$81.49
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023**ITEMIZED DISBURSEMENTS**Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ethan Cox		
Mailing Address 3614 N Fremont St	10/02/2023	\$1,994.23
City, State, Zip Code Chicago, IL 60613-4372		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$41,374.23
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Democracy Engine		
Mailing Address 850 Quincy St NW	10/22/2023	\$200.00
City, State, Zip Code Washington, DC 20011-5873		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$488.08
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Louise Cole		
Mailing Address 518 N Church St	10/13/2023	\$1,564.74
City, State, Zip Code Okolona, MS 38860-1017		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$12,106.39
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Circle K		
Mailing Address 1130 W Warner Rd	10/27/2023	\$10.79
City, State, Zip Code Tempe, AZ 85284-2816		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$625.51
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.		
Mailing Address 410 Terry Ave N	10/18/2023	\$94.36
City, State, Zip Code Seattle, WA 98109-5210		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$3,236.62

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chevron Stations		
Mailing Address		
6001 Bollinger Canyon Rd	10/11/2023	\$62.44
City, State, Zip Code		
San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,283.83
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jake Laves		
Mailing Address		
699 Nation Hills Dr	10/02/2023	\$2,974.48
City, State, Zip Code		
Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$44,422.09
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Katharine Kurz		
Mailing Address		
634 W Main St	10/13/2023	\$1,994.23
City, State, Zip Code		
Tupelo, MS 38804-3745		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$24,568.79
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	10/13/2023	\$25.14
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,727.87
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Old Town Media		
Mailing Address		
114 Quay St	10/16/2023	\$466,619.00
City, State, Zip Code		
Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,822,884.00
Advertising		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
City of Hernando		
Mailing Address		
475 W Commerce St	10/20/2023	\$102.22
City, State, Zip Code		
Hernando, MS 38632-2102		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$258.22
Utilities		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	10/10/2023	\$96.63
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,727.87
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Pavlise Patterson		
Mailing Address		
1925 Shady Lane Dr	10/02/2023	\$651.07
City, State, Zip Code		
Jackson, MS 39204-4628		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,317.02
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Benjamin Nordstrom		
Mailing Address		
711 Ridgewood Manor Dr	10/13/2023	\$712.03
City, State, Zip Code		
Oxford, MS 38655-2413		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,285.00
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Número		
Mailing Address		
200 Spectrum Center Dr	10/24/2023	\$773.77
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$75,732.64
Credit Card Processing		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023**ITEMIZED DISBURSEMENTS**Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
MBA Consulting Group		
Mailing Address		
611 Pennsylvania Ave SE	10/20/2023	\$10,000.00
City, State, Zip Code		
Washington, DC 20003-4303		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$80,460.00
Compliance Services		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Tom Bigbee Fiber		
Mailing Address		
1346 Auburn Rd	10/02/2023	\$304.90
City, State, Zip Code		
Tupelo, MS 38804-8412		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,712.85
Internet		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Daniel Trimble		
Mailing Address		
8 Iris Ln	10/02/2023	\$1,528.98
City, State, Zip Code		
Redding, CT 06896-2112		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$10,415.86
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jacob Smith		
Mailing Address		
4100 N Gloster St	10/13/2023	\$2,811.60
City, State, Zip Code		
Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$31,042.63
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Vision		
Mailing Address		
9346 Telge Rd	10/16/2023	\$877.50
City, State, Zip Code		
Houston, TX 77095-5107		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$39,178.34
Printing of Campaign Materials		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Telzio		
Mailing Address		
5900 Wilshire Blvd	10/19/2023	\$10.61
City, State, Zip Code		
Los Angeles, CA 90036-5013		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$321.44
Phones		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Payroll Data Processing		
Mailing Address		
3501 E Frontage Rd	10/13/2023	\$187.23
City, State, Zip Code		
Tampa, FL 33607-1723		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$322,917.78
Payroll Fees		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address		
1111 Expedia Group Way W	10/05/2023	\$233.50
City, State, Zip Code		
Seattle, WA 98119-1111		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,848.55
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jake Laves		
Mailing Address		
699 Nation Hills Dr	10/16/2023	\$499.10
City, State, Zip Code		
Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$44,422.09
Reimbursement- Travel, Software		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Scale to Win		
Mailing Address		
13742 Harper St	10/11/2023	\$8,066.21
City, State, Zip Code		
Santa Ana, CA 92703-1419		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$17,939.21
Digital Consulting		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Valero Gas Station		
Mailing Address 1 Valero Way	10/23/2023	\$50.00
City, State, Zip Code San Antonio, TX 78249-1616		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$261.91
Full Name Expedia.com	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1111 Expedia Group Way W	10/25/2023	\$86.78
City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$8,848.55
Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	10/20/2023	\$1,385.92
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$75,732.64
Full Name Hampton Inn	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 7930 Jones Branch Dr	10/02/2023	\$338.25
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$2,471.50
Full Name Walmart	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 702 SW 8th St	10/13/2023	\$23.43
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$6,249.68

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mississippi Link Newspaper		
Mailing Address		
2659 Livingston Rd	10/24/2023	\$800.00
City, State, Zip Code		
Jackson, MS 39213-6926		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$800.00
Advertising		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hotel 27		
Mailing Address		
211 S Walnut St	10/16/2023	\$180.32
City, State, Zip Code		
Greenville, MS 38701-4004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$475.12
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.		
Mailing Address		
410 Terry Ave N	10/26/2023	\$22.43
City, State, Zip Code		
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,236.62
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services		
Mailing Address		
PO Box 382110	10/01/2023	\$50.50
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$38,280.76
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Duncan Cady		
Mailing Address		
325 Frederick St	10/02/2023	\$759.89
City, State, Zip Code		
San Francisco, CA 94117-3913		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$6,735.07
Salary		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023**ITEMIZED DISBURSEMENTS**Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
River Hills Club	10/02/2023	\$1,074.00
Mailing Address 3600 Ridgewood Rd City, State, Zip Code Jackson, MS 39211-6448		
Purpose of Disbursement (Optional) Event Space Rental	Aggregate year-to-date	\$1,074.00
Morgan Benjamin	10/13/2023	\$1,812.30
Mailing Address 4212 28th St City, State, Zip Code Long Island City, NY 11101-6258		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$18,402.78
Democracy Engine	10/22/2023	\$88.08
Mailing Address 850 Quincy St NW City, State, Zip Code Washington, DC 20011-5873		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$488.08
Cynthia Cook	10/13/2023	\$2,055.35
Mailing Address 141 Mapleton Rd City, State, Zip Code Grosse Pointe Farms, MI 48236-3614		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,986.01
Amazon, Inc.	10/23/2023	-\$71.84
Mailing Address 410 Terry Ave N City, State, Zip Code Seattle, WA 98109-5210		
Purpose of Disbursement (Optional) Office Supplies Refund	Aggregate year-to-date	\$3,236.62

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	10/24/2023	\$16.86
Mailing Address PO Box 2463 City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87
Full Name United States Postal Service	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 475 Lenfant Plz SW City, State, Zip Code Washington, DC 20260-0004	10/27/2023	\$204.00
Purpose of Disbursement (Optional) Postage	Aggregate year-to-date	\$2,695.24
Full Name Timmanisha Macon	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 19311 Crestwick St City, State, Zip Code Saucier, MS 39574-8031	10/02/2023	\$1,691.56
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$6,980.57
Full Name Chevron Stations	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 6001 Bollinger Canyon Rd City, State, Zip Code San Ramon, CA 94583-2324	10/12/2023	\$57.70
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,283.83
Full Name Angelique LaCour	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2585 City, State, Zip Code Bay St Louis, MS 39521-2585	10/13/2023	\$1,564.74
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$6,336.73

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	10/13/2023	\$14.19
Mailing Address PO Box 2463 City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87
Full Name Shawn Patterson	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1160 1st St NE City, State, Zip Code Washington, DC 20002-4799	10/02/2023	\$2,974.48
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$42,260.62
Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr City, State, Zip Code Irvine, CA 92618-5004	10/13/2023	\$1,035.60
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$75,732.64
Full Name Abby O'Keefe	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1404 Highland Valley Cir City, State, Zip Code Wildwood, MO 63005-4259	10/13/2023	\$2,974.48
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$41,157.31
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463 City, State, Zip Code Houston, TX 77252-2463	10/23/2023	\$45.45
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
United Healthcare	10/20/2023	\$15,065.57
Mailing Address PO Box 94017 City, State, Zip Code Palatine, IL 60094-4017		
Purpose of Disbursement (Optional) Health Insurance	Aggregate year-to-date	\$71,610.73
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Telzio	10/20/2023	\$10.61
Mailing Address 5900 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90036-5013		
Purpose of Disbursement (Optional) Phones	Aggregate year-to-date	\$321.44
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Michael Waller	10/02/2023	\$1,994.23
Mailing Address 103 Redbud Dr City, State, Zip Code Hendersonville, TN 37075-3982		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$20,343.49
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Boosters Inc	10/12/2023	\$5,125.00
Mailing Address PO Box 70156 City, State, Zip Code Montgomery, AL 36107-0156		
Purpose of Disbursement (Optional) Printing of Campaign Materials	Aggregate year-to-date	\$15,336.33
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Trey Till	10/13/2023	\$1,812.30
Mailing Address 105 Morning Glory Dr City, State, Zip Code Madison, MS 39110-7898		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$11,654.88

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Uber		
Mailing Address		
1515 3rd St	10/02/2023	\$20.14
City, State, Zip Code		
San Francisco, CA 94158-2211		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$340.94
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
John J. Miller		
Mailing Address		
30 Rock Hill Rd	10/16/2023	\$1,046.40
City, State, Zip Code		
Sumrall, MS 39482-9537		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,791.44
Reimbursement - Travel, Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address		
1111 Expedia Group Way W	10/06/2023	\$140.75
City, State, Zip Code		
Seattle, WA 98119-1111		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,848.55
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Switchboard Public Benefit Corp.		
Mailing Address		
195 Binney St	10/11/2023	\$13,625.41
City, State, Zip Code		
Cambridge, MA 02142-1095		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$54,919.26
Digital Fundraising		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ExxonMobil		
Mailing Address		
5959 Las Colinas Blvd	10/11/2023	\$9.19
City, State, Zip Code		
Irving, TX 75039-4202		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$684.67
Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hilton Hotels		
Mailing Address		
7930 Jones Branch Dr	10/03/2023	\$7.58
City, State, Zip Code		
Mclean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,712.94
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Issac Lampner		
Mailing Address		
945 Mitchell St	10/11/2023	\$1,030.00
City, State, Zip Code		
Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$56,764.98
Reimbursement - Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hampton Inn		
Mailing Address		
7930 Jones Branch Dr	10/02/2023	\$359.25
City, State, Zip Code		
Mclean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,471.50
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Malibu Wings		
Mailing Address		
1008 Jackson Ave E	10/24/2023	\$2,520.00
City, State, Zip Code		
Oxford, MS 38655-3906		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,520.00
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Enterprise-Tocsin Inc.		
Mailing Address		
PO Box 650	10/24/2023	\$1,000.00
City, State, Zip Code		
Indianola, MS 38751-0650		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,696.00
Advertising		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	10/16/2023	\$107.14
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$6,249.68
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stripe		
Mailing Address		
3180 18th St	10/13/2023	\$21.67
City, State, Zip Code		
San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$851.18
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Iron Horse Grill		
Mailing Address		
320 W Pearl St	10/13/2023	\$827.07
City, State, Zip Code		
Jackson, MS 39203-3001		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$827.07
Event Catering		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.		
Mailing Address		
410 Terry Ave N	10/26/2023	\$22.43
City, State, Zip Code		
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,236.62
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Larry Campbell		
Mailing Address		
200 Colony Park Dr	10/02/2023	\$675.33
City, State, Zip Code		
Pearl, MS 39208-6369		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,477.32
Salary		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
SeatGeek	10/02/2023	\$234.00
Mailing Address 902 Broadway City, State, Zip Code New York, NY 10010-6002		
Purpose of Disbursement (Optional) Event Tickets	Aggregate year-to-date	\$234.00
Full Name Adam Beyer	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4288 N Gloster St City, State, Zip Code Tupelo, MS 38804-7249	10/13/2023	\$2,974.48
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$44,194.40
Full Name Aaron Facio-Cortes	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 27006 Fordham Dr City, State, Zip Code Wesley Chapel, FL 33544-8730	10/02/2023	\$1,994.23
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$20,695.27
Full Name Nicholas Cosmo	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 202 Milford St City, State, Zip Code Tupelo, MS 38801-4687	10/13/2023	\$2,320.98
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,957.74
Full Name Amazon Web Services	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2121 7th Ave City, State, Zip Code Seattle, WA 98121-5114	10/03/2023	\$146.69
Purpose of Disbursement (Optional) Web Hosting	Aggregate year-to-date	\$573.18

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	10/17/2023	\$23.47
Mailing Address PO Box 2463 City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87
Shell Oil Co	10/20/2023	\$41.02
Mailing Address PO Box 2463 City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87
Thomas Mayfield	10/02/2023	\$346.31
Mailing Address 1412 Wisteria Dr City, State, Zip Code Vicksburg, MS 39180-4757		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$646.90
Old Town Media	10/02/2023	\$454,458.00
Mailing Address 114 Quay St City, State, Zip Code Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$5,822,884.00
Walker Lake	10/13/2023	\$712.03
Mailing Address 1850 Highland Ter City, State, Zip Code Jackson, MS 39211-5718		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$2,611.93

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023**ITEMIZED DISBURSEMENTS**Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Battleaxe Digital	10/24/2023	\$1,250.00
Mailing Address 1405 Florida Ave NW City, State, Zip Code Washington, DC 20009-5801		
Purpose of Disbursement (Optional) Digital Consulting	Aggregate year-to-date	\$248,063.24
TW Express	10/26/2023	\$1,605.00
Mailing Address 951 Highway 51 S City, State, Zip Code Grenada, MS 38901-8414		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$2,808.75
Chevron Stations	10/16/2023	\$57.04
Mailing Address 6001 Bollinger Canyon Rd City, State, Zip Code San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,283.83
S E Aviation	10/20/2023	\$8,203.95
Mailing Address 812 S Lamar Blvd City, State, Zip Code Oxford, MS 38655-4448		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$8,203.95
Jefferson Stevens, LLC	10/02/2023	\$7,500.00
Mailing Address 5907 Baxter Dr City, State, Zip Code Jackson, MS 39211-3319		
Purpose of Disbursement (Optional) Political Strategy Consultant	Aggregate year-to-date	\$52,503.89

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amanda Powell	10/02/2023	\$1,699.56
Mailing Address PO Box 16982 City, State, Zip Code Hattiesburg, MS 39404-6982		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,615.45
Comcast Cable	10/02/2023	\$352.00
Mailing Address 1701 John F Kennedy Blvd City, State, Zip Code Philadelphia, PA 19103-2833		
Purpose of Disbursement (Optional) Internet	Aggregate year-to-date	\$631.75
Ron Owens	10/13/2023	\$3,935.75
Mailing Address 3545 Mitchell Rd City, State, Zip Code Tupelo, MS 38801-9616		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$73,167.71
Stefon Ward	10/02/2023	\$1,623.42
Mailing Address 138 Brookwood Ln City, State, Zip Code Hattiesburg, MS 39401-5763		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$8,396.11
Daniel Trimble	10/13/2023	\$1,446.99
Mailing Address 8 Iris Ln City, State, Zip Code Redding, CT 06896-2112		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$10,415.86

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023**ITEMIZED DISBURSEMENTS**Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Delta Democrat Times	10/23/2023	\$1,518.00
Mailing Address 988 N Broadway St City, State, Zip Code Greenville, MS 38701-2349		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$1,518.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Telzio	10/23/2023	\$10.61
Mailing Address 5900 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90036-5013		
Purpose of Disbursement (Optional) Phones	Aggregate year-to-date	\$321.44
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero	10/16/2023	\$372.80
Mailing Address 200 Spectrum Center Dr City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$75,732.64
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Uber	10/02/2023	\$54.48
Mailing Address 1515 3rd St City, State, Zip Code San Francisco, CA 94158-2211		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$340.94
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com	10/16/2023	\$527.16
Mailing Address 1111 Expedia Group Way W City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$8,848.55

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mission Control Inc	10/11/2023	\$17,053.25
Mailing Address 624 Hebron Ave City, State, Zip Code Glastonbury, CT 06033-2470		
Purpose of Disbursement (Optional) Direct Mail Production	Aggregate year-to-date	\$17,053.25
ExxonMobil	10/23/2023	\$32.49
Mailing Address 5959 Las Colinas Blvd City, State, Zip Code Irving, TX 75039-4202		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$684.67
Walmart	10/10/2023	\$21.59
Mailing Address 702 SW 8th St City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$6,249.68
Julie McDermott	10/11/2023	\$679.20
Mailing Address 1119 Bratton Rd City, State, Zip Code New Albany, MS 38652-9328		
Purpose of Disbursement (Optional) Reimbursement - Travel (Mileage)	Aggregate year-to-date	\$17,725.67
The Jackson Advocate Inc.	10/24/2023	\$6,199.20
Mailing Address PO Box 3708 City, State, Zip Code Jackson, MS 39207-3708		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$6,199.20

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Enterprise-Tocsin Inc.	10/24/2023	\$1,096.00
Mailing Address PO Box 650 City, State, Zip Code Indianola, MS 38751-0650		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$3,696.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hampton Inn	10/18/2023	\$4.44
Mailing Address 7930 Jones Branch Dr City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$2,471.50
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Johnny T's Bistro & Blues	10/10/2023	\$600.00
Mailing Address 538 N Farish St City, State, Zip Code Jackson, MS 39202-3201		
Purpose of Disbursement (Optional) Event Catering	Aggregate year-to-date	\$600.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.	10/26/2023	\$44.86
Mailing Address 410 Terry Ave N City, State, Zip Code Seattle, WA 98109-5210		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$3,236.62
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Número	10/18/2023	\$227.03
Mailing Address 200 Spectrum Center Dr City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$75,732.64

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Alexis Carraway		
Mailing Address		
106 Roberts Cv	10/02/2023	\$641.83
City, State, Zip Code		
Starkville, MS 39759-6628		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$9,821.84
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	10/02/2023	\$37.92
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,727.87
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Noah Britt		
Mailing Address		
1537 S 11th St	10/13/2023	\$733.38
City, State, Zip Code		
Ocean Springs, MS 39564-9568		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,798.07
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero		
Mailing Address		
200 Spectrum Center Dr	10/05/2023	\$254.78
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$75,732.64
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Benjamin Hunt		
Mailing Address		
510 S Broadway St	10/02/2023	\$2,167.10
City, State, Zip Code		
Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$30,476.11
Salary		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ethan Cox		
Mailing Address 3614 N Fremont St	10/13/2023	\$1,994.23
City, State, Zip Code Chicago, IL 60613-4372		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$41,374.23
Full Name AT&T	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 208 S Akard St	10/17/2023	\$53.50
City, State, Zip Code Dallas, TX 75202-4206		
Purpose of Disbursement (Optional) Phones	Aggregate year-to-date	\$366.50
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	10/17/2023	\$81.80
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87
Full Name Old Town Media	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 114 Quay St	10/10/2023	\$492,916.00
City, State, Zip Code Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$5,822,884.00
Full Name Gregory McCain	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 308 S Montgomery St	10/02/2023	\$675.33
City, State, Zip Code Starkville, MS 39759-3334		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,618.69

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Issac Lampner	10/13/2023	\$2,798.60
Mailing Address 945 Mitchell St City, State, Zip Code Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$56,764.98
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chick-Fil-A	10/06/2023	\$142.02
Mailing Address 5200 Buffington Rd City, State, Zip Code Atlanta, GA 30349-2945		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$396.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	10/16/2023	\$63.81
Mailing Address PO Box 2463 City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,727.87
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
KEP Strategies, LLC	10/02/2023	\$7,500.00
Mailing Address PO Box 450268 City, State, Zip Code Atlanta, GA 31145-0268		
Purpose of Disbursement (Optional) Fundraising Consulting	Aggregate year-to-date	\$77,608.46
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Greta Presley	10/02/2023	\$1,623.42
Mailing Address 182 Verona Ave City, State, Zip Code Nettleton, MS 38858-6004		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$20,512.64

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Comcast Cable		
Mailing Address 1701 John F Kennedy Blvd	10/02/2023	\$279.75
City, State, Zip Code Philadelphia, PA 19103-2833		
Purpose of Disbursement (Optional) Internet	Aggregate year-to-date	\$631.75
Full Name Mississippi Democratic Party	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 811 E River Pl	10/03/2023	\$142,100.00
City, State, Zip Code Jackson, MS 39202-3432		
Purpose of Disbursement (Optional) Political Contribution	Aggregate year-to-date	\$771,950.00
Full Name Amanda Pagoaga	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5341 Melville Cv	10/13/2023	\$1,582.62
City, State, Zip Code Olive Branch, MS 38654-8363		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$6,371.49
Full Name Southern Prohibition Brewing	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 301 Mobile St	10/17/2023	\$312.50
City, State, Zip Code Hattiesburg, MS 39401-3406		
Purpose of Disbursement (Optional) Event Catering	Aggregate year-to-date	\$1,783.58
Full Name Kaci Wilcox	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 415 Warren Pl	10/02/2023	\$613.57
City, State, Zip Code Madison, MS 39110-8394		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,846.37

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Declaration Media Group	10/23/2023	\$19,470.00
Mailing Address 1152 15th St NW		
City, State, Zip Code Washington, DC 20005-1723		
Purpose of Disbursement (Optional) Video Production	Aggregate year-to-date	\$339,567.48
Full Name Michael Waller	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 103 Redbud Dr	10/13/2023	\$2,055.35
City, State, Zip Code Hendersonville, TN 37075-3982		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$20,343.49
Full Name Telzio	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5900 Wilshire Blvd	10/24/2023	\$10.61
City, State, Zip Code Los Angeles, CA 90036-5013		
Purpose of Disbursement (Optional) Phones	Aggregate year-to-date	\$321.44
Full Name Dodge's Store	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2290 W Main St	10/05/2023	\$55.18
City, State, Zip Code Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$565.79
Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	10/25/2023	\$641.02
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$75,732.64

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Service Printing Co		
Mailing Address		
1110 Emory Folmar Blvd	10/16/2023	\$13,905.00
City, State, Zip Code		
Montgomery, AL 36110-3228		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$30,736.00
Printing of Campaign Materials		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Uber		
Mailing Address		
1515 3rd St	10/02/2023	\$36.25
City, State, Zip Code		
San Francisco, CA 94158-2211		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$340.94
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Adam Beyer		
Mailing Address		
4288 N Gloster St	10/16/2023	\$223.77
City, State, Zip Code		
Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$44,194.40
Reimbursement - Travel, Subscriptions		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address		
1111 Expedia Group Way W	10/16/2023	\$383.04
City, State, Zip Code		
Seattle, WA 98119-1111		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,848.55
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services		
Mailing Address		
PO Box 382110	10/09/2023	\$1,257.85
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$38,280.76
Credit Card Processing		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ExxonMobil		
Mailing Address		
5959 Las Colinas Blvd	10/23/2023	\$53.51
City, State, Zip Code		
Irving, TX 75039-4202		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$684.67
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero		
Mailing Address		
200 Spectrum Center Dr	10/05/2023	\$312.66
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$75,732.64
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jones Mandel		
Mailing Address		
1752 NW Market St	10/06/2023	\$7,433.60
City, State, Zip Code		
Seattle, WA 98107-5264		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$33,661.40
Research Consulting		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	10/19/2023	\$58.26
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$6,249.68
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hampton Inn		
Mailing Address		
7930 Jones Branch Dr	10/10/2023	\$11.10
City, State, Zip Code		
McLean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,471.50
Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 10/1/2023 through 10/29/2023

ITEMIZED DISBURSEMENTS

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

Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	10/03/2023	\$1,525.00
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing Fee	Aggregate year-to-date	\$75,732.64
Full Name Walmart	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 702 SW 8th St	10/16/2023	\$161.94
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$6,249.68
Full Name The Kroger Co.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1014 Vine St	10/11/2023	\$51.49
City, State, Zip Code Cincinnati, OH 45202-1141		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$1,291.10
Full Name Amazon, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 410 Terry Ave N	10/26/2023	\$37.96
City, State, Zip Code Seattle, WA 98109-5210		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$3,236.62
Full Name Bradley Palmer	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 925	10/17/2023	\$454.68
City, State, Zip Code New Albany, MS 38652-0925		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$6,388.32