2022 ELECTION CYCLE

SECRETARY OF STATE

Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2022 Annual Report

RECEIVED
By Shelby Scoggins at 2:52 pm, Jan 31, 2023

Name of Candidate Chris B McDaniel

Address 506 Court Street City/State/Zip Ellisville, MS 39437

Telephone (Work) 601-649-8611 (Home) 601-580-5833 (Fax) _____

Contact Name Susan Perkins Email Address skperkins135@gmail.com

Office Sought Senate

☐ Check here if above information is different from previous report

TYPE OF REPORT

X Tuesday, January 31, 2023 (January 1, 2022 through December 31, 2022) ..... Annual Report

_____ Termination Report (Candidate will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation) **Required to terminate reporting obligations**

IMPORTANT

(1) **Annual Reports are mandatory for all candidates who did not run for office in 2022 filing 2022 Periodic Reports and have not filed a Termination Report prior to December 31, 2022, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and expenditures during the reporting period.**

(2) **Annual Reports are mandatory for 2022 judicial candidates who did not file a Termination report by January 10, 2023, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and expenditures during the reporting period.**

(3) **Beginning on Jan. 1, 2018, candidates and officeholders may not "personally use" campaign contributions. Section 23-15-821, Miss. Code Ann., sets forth those "personal use" expenditures which are specifically prohibited from campaign contributions and those disbursements which are not defined as "personal use" and therefore permissible from campaign contributions. Campaign contributions accepted and held prior to Jan. 1, 2018 ARE NOT subject to the "personal use" restrictions of Section 23-15-821, Miss. Code Ann. Beginning on Jan. 1, 2018, campaign contributions accepted and accumulated therefrom ARE subject to the "personal use" restrictions of Section 2-15-821, Miss. Code Ann. Separate record keeping and reporting is required for candidates and officeholders for any campaign contributions held prior to Jan. 1, 2018, disbursements made therefrom and contributions earned thereon in the form of interest or dividends.**

(4) **Until a Candidate files a Termination Report, all campaign finance disclosure reports must be filed in accordance with the applicable schedule set forth by Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).**

(5) **The receiving office must be in actual receipt of the required report by 5:00 p.m. on the deadline. If the deadline falls on a weekend or legal holiday, the office must be in actual receipt of the required report by 5:00 p.m. on the first working day *before* the deadline. Reports may be faxed or emailed. Candidates who have previous ran for Statewide, State District or Legislative Office file with the Secretary of State's Office. County or County District Office candidates file with the County Circuit Clerk's Office. Municipal candidates file with the Municipal Clerk's Office.**

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

JAN. 1, 2022 CASH ON HAND BALANCE $

	Itemized (+)	Non-Itemized (=)	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS[1]	$	$	$
TOTAL AMT OF DISBURSEMENTS	$	$	$

DEC. 31, 2022 CASH ON HAND BALANCE $

[1] *Contributions to pre-Jan. 1, 2018 campaign funds are limited to interest and dividends earned upon pre-Jan. 1, 2018 monies.*

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

JAN. 1, 2022 CASH ON HAND BALANCE			$8863.93
	Itemized (+)	Non-Itemized (=)	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	$689,790.49	$20241.17	$710,031.66
TOTAL AMT OF DISBURSEMENTS	$4,642.17	$1,294.27	$5,957.44
DEC. 31, 2022 CASH ON HAND BALANCE			$712,928.15

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

Signature of Candidate **Date** 1/31/23

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

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

Name of Candidate or Committee Chris McDaniel

Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ◯ Corporation ◉ PAC ◯ Individual ◯ Loan Other (please specify) Full name: MPVR PAC Mailing Address: P O Box 432 City, State, Zip Code: Forest, MS 39074 Name of Employer (Required) Occupation (Required)	8/3/22	$10,000.00
	1/17/23	$10,000,00
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$20,000.00
B. Source: ◯ Corporation ◯ PAC ◉ Individual ◯ Loan Other (please specify) Full name: Chris McDaniel Mailing Address: 414 W Oak Street City, State, Zip Code: Laurel, MS 39441 Name of Employer (Required): Hortman Harlow Law Firm Occupation (Required): Partner	Date (Mo., Day, Year)	Amount of each receipt this period
	8/3/22	$10,000.00
	1/9/23	$43,000.00
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$53,000.00
C. Source: ◯ Corporation ◯ PAC ◉ Individual ◯ Loan Other (please specify) Full name: Jack Fairchilds Mailing Address: 801 Main Street, Apt 9 City, State, Zip Code: Ellisville, MS 39437 Name of Employer (Required): Howard Industries Occupation (Required): Media Education	Date (Mo., Day, Year)	Amount of each receipt this period
	8/3/23	$1,000.00
	1/9/23	$500.00
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,500.00
D. Source: ◯ Corporation ◉ PAC ◯ Individual ◯ Loan Other (please specify) Full name: Gatorpac LLC Candidate Mailing Address: P O Box 1685 City, State, Zip Code: Gulfport,MS 39502 Name of Employer (Required) Occupation (Required)	Date (Mo., Day, Year)	Amount of each receipt this period
	8/2/22	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00

Name of Candidate or Committee Chris McDaniel

Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Ricky Matthews	9/15/22	$2,000.00
Mailing Address 1250 Matthews Road	__/__/__	$
City, State, Zip Code Sara, MS 38665	__/__/__	$
Name of Employer (Required) No. MS Rock Haulers, LLC	__/__/__	$
Occupation (Required) Director	Aggregate year-to-date	$2,000.00
B. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify)	**Date (Mo., Day, Year)**	**Amount of each receipt this period**
Full name John T Williams	9/15/22	$250.00
Mailing Address 1474 Hernando Pointe Cv N	__/__/__	$
City, State, Zip Code Hernando, MS 38632	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required) Retired	Aggregate year-to-date	$250.00
C. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify)	**Date (Mo., Day, Year)**	**Amount of each receipt this period**
Full name Don McQueen	9/11/22	$500.00
Mailing Address 131 Bill McQueen Road	__/__/__	$
City, State, Zip Code Seminary, MS 39479	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required) Retired	Aggregate year-to-date	$500.00
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify)	**Date (Mo., Day, Year)**	**Amount of each receipt this period**
Full name Debbie Armour	9/15/22	$480.30
Mailing Address 109 Reagan Ranch Road	__/__/__	$
City, State, Zip Code Laurel, MS 39443	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required) Homemaker	Aggregate year-to-date	$480.30

Name of Candidate or Committee Chris McDaniel

Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: R J Armstrong Mailing Address: 224 Armstrong Road City, State, Zip Code: Columbia, MS 39429 Name of Employer (Required): Self, Farmer Occupation (Required)	9/22/22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	$200.00 $ $ $ $200.00
B. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Jeff Troyka Mailing Address: 37 Fernwood Drive City, State, Zip Code: Laurel, MS 39440 Name of Employer (Required): Retired Occupation (Required)	Date (Mo., Day, Year) 9/22/22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	Amount of each receipt this period $200.00 $ $ $ $200.00
C. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Scott Kiewit Mailing Address: 33 Kimberly Drive City, State, Zip Code: Laurel, MS 39440 Name of Employer (Required): Self Occupation (Required): Kiewit Forestry Service	Date (Mo., Day, Year) 12/29/22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	Amount of each receipt this period $500.00 $ $ $ $500.00
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Danny Shows Mailing Address: PO Box 331 City, State, Zip Code: Ellisville, MS 39437 Name of Employer (Required): Retired Occupation (Required)	Date (Mo., Day, Year) 9/30/22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	Amount of each receipt this period $250.00 $ $ $ $250.00

Name of Candidate or Committee Chris McDaniel

Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name Catherine Tucker Mailing Address 40 Nancy Lane City, State, Zip Code Lumberton, MS 39455 Name of Employer (Required) Retired Occupation (Required)	Date (Mo., Day, Year) 9/30/22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	Amount of each receipt this period $200.00 $ $ $ $200.00
B. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name Jerry Munroe Mailing Address 2701 13th Avenue City, State, Zip Code Gulfport, MS 39501 Name of Employer (Required) Sales Occupation (Required) Monroe Products	Date (Mo., Day, Year) 10/31/22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	Amount of each receipt this period $250.00 $ $ $ $250.00
C. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name Joy Payne Mailing Address 441 Jordan Ridge City, State, Zip Code Madison, MS Name of Employer (Required) Retired Occupation (Required)	Date (Mo., Day, Year) 8/18/22 8/18/22 __/__/__ __/__/__ Aggregate year-to-date	Amount of each receipt this period $250.00 $250.00 $ $ $250.00
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name Michelle Poulin Mailing Address 3552 Glenwood Dr City, State, Zip Code Nesbit, MS 38651 Name of Employer (Required) Self	Date (Mo., Day, Year) 6/9/22 __/__/__ __/__/__ __/__/__	Amount of each receipt this period $250.00 $ $ $

Name of Candidate or Committee Chris McDaniel

Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ○Corporation ○PAC ◉Individual ○Loan Other (please specify) Full name: Larry Hammonds Mailing Address: 23055 Sims Mill Pond Road City, State, Zip Code: Vancleave, MS 39565 Name of Employer (Required): Chevron Refinery Occupation (Required): Executive	8/2/22	$200.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$200.00
B. Source: ○Corporation ○PAC ◉Individual ○Loan Other (please specify) Full name: Peter Wilson Mailing Address: 453 Carmargue Lane City, State, Zip Code: Biloxi, MS 39531 Name of Employer (Required): Occupation (Required): Retired	8/2/22	$200.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$200.00
C. Source: ○Corporation ○PAC ◉Individual ○Loan Other (please specify) Full name: Denny King Mailing Address: 734 Coachman Rd City, State, Zip Code: Madison, MS 39110 Name of Employer (Required): Retired Occupation (Required):	9/6/22	$5,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$5,000.00
D. Source: ○Corporation ○PAC ◉Individual ○Loan Other (please specify) Full name: Kathy Chism Mailing Address: 1506 Moss Hill Dr City, State, Zip Code: New Albany, MS 38652 Name of Employer (Required): Plum Creek Properties Occupation (Required): Administrator	9/13/22	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00

Name of Candidate or Committee Chris McDaniel

Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name Donis Jefcoat Mailing Address P O Box 117 City, State, Zip Code Soso, MS 39480 Name of Employer (Required) Occupation (Required) Retired	Date (Mo., Day, Year) 9 / 3 / 22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	Amount of each receipt this period $1,000.00 $ $ $ $1,000.00
B. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name Palmer Zimmerman Mailing Address 1305 Broad Street City, State, Zip Code Columbia, MS 39429 Name of Employer (Required) US Army Occupation (Required) Officer	Date (Mo., Day, Year) 11 / 3 / 22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	Amount of each receipt this period $720.45 $ $ $ $720.45
C. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name Jamie Stone Mailing Address 139 Fox Farm Road City, State, Zip Code Tupelo, MS38801 Name of Employer (Required) Occupation (Required) Retired	Date (Mo., Day, Year) 8 / 8 / 22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	Amount of each receipt this period $240.15 $ $ $ $240.15
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name Carol Elnicki Mailing Address 45 Preston Road City, State, Zip Code Griswold, CT 06351 Name of Employer (Required) Occupation (Required) Retired	Date (Mo., Day, Year) 10 / 12 / 22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	Amount of each receipt this period $240.15 $ $ $ $240.15

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Reporting period January 1,2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name Richard Conrad Mailing Address P O Box 4164 City, State, Zip Code Laurel, MS 39441 Name of Employer (Required) Wayne Sanderson Farms Occupation (Required) Internal Auditor	10/11/22 1/9/23 __/__/__ __/__/__ Aggregate year-to-date	$480.30 $1,500.00 $ $ $1,98030
B. Source: ◉Corporation ◯PAC ◯Individual ◯Loan Other (please specify) LLC Full name Rightway Strategies, LLC Mailing Address P O Box 641 City, State, Zip Code Ellisville, MS 39437 Name of Employer (Required) Occupation (Required)	10/17/22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	$500.00 $ $ $ $500.00
C. Source: ◉Corporation ◯PAC ◯Individual ◯Loan Other (please specify) Full name Tokyo Inc Mailing Address 2031 Hwy 15 N City, State, Zip Code Laurel, MS 39440 Name of Employer (Required) Occupation (Required)	Date (Mo., Day, Year) 10/20/22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	Amount of each receipt this period $500.00 $ $ $ $500.00
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name Kelvin Smith Mailing Address 66 Lake Eddins 1638 City, State, Zip Code Pachuta, MS 39347 Name of Employer (Required) Rightway Strategies Occupation (Required) Partner	Date (Mo., Day, Year) 10/20/22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	Amount of each receipt this period $250.00 $ $ $ $250.00

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Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Jim Ceglelski	8/9/22	$2,5000.00
Mailing Address: 1214 Woodland Hills Dr	10/18/22	$1,000.00
City, State, Zip Code: Laurel, MS 39440	__/__/__	$
Name of Employer (Required): Laurel Leader Call Newspaper	__/__/__	$
Occupation (Required): Owner	Aggregate year-to-date	$3,500.00
B. Source: ◯Corporation ◯PAC ◯Individual ◯Loan Other (please specify): Private business	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: The Hunters Edge	10/29/22	$500.00
Mailing Address: 407 Hwy 11S	__/__/__	$
City, State, Zip Code: Ellisville, MS 39437	__/__/__	$
Name of Employer (Required): The Hunters Edge	__/__/__	$
Occupation (Required): Self	Aggregate year-to-date	$500.00
C. Source: ◉Corporation ◯PAC ◯Individual ◯Loan Other (please specify): Consultant	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Chiropractic Neurology Consultant	10/3/22	$1,000.00
Mailing Address: 266 CR 506	__/__/__	$
City, State, Zip Code: Shannon, MS 38868	__/__/__	$
Name of Employer (Required): self	__/__/__	$
Occupation (Required): Consultant	Aggregate year-to-date	$1,000.00
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Andy Barlow	11/3/22	$4,000.00
Mailing Address: 266 CR 506	__/__/__	$
City, State, Zip Code: Shannon, MS 38868	__/__/__	$
Name of Employer (Required): self	__/__/__	$
Occupation (Required): Consultant	Aggregate year-to-date	$4,000.00

Name of Candidate or Committee Chris McDaniel

Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ○Corporation ○PAC ◉Individual ○Loan Other (please specify) Full name: David Moffett Mailing Address: 724 Paulding Road City, State, Zip Code: Ellisville, MS 39437 Name of Employer (Required): Retired Occupation (Required)	12/30/22	$300.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$300.00
B. Source: ○Corporation ○PAC ◉Individual ○Loan Other (please specify) Full name: James Carney Mailing Address: 2700 Marigold Cove City, State, Zip Code: Tupelo,MS 38801 Name of Employer (Required): Life at Tupelo Pentecost Church Occupation (Required): Pastor	11/10/22	$2,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$2,000.00
C. Source: ○Corporation ○PAC ◉Individual ○Loan Other (please specify) Full name: Jonathan Berry Mailing Address: 39 Wintergreen Road City, State, Zip Code: Madison MS 39110 Name of Employer (Required): Berry Consruction Occupation (Required): Owner	11/10/22	$4,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$4,000.00
D. Source: ◉Corporation ○PAC ○Individual ○Loan Other (please specify) Full name: Berry Construction Mailing Address: 39 Wintergreen Road City, State, Zip Code: Madison, MS 39110 Name of Employer (Required): Self Occupation (Required): Construction	11/10/22	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00

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ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ◯Corporation ◉PAC ◯Individual ◯Loan Other (please specify) Full name: MPC State Pac	11/__/__	$350.00
Mailing Address: 2992 West Beach Blvd	11/__/__	$350.00
City, State, Zip Code: Gulfport, MS 39501	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$700.00
B. Source: ◯Corporation ◉PAC ◯Individual ◯Loan Other (please specify) Full name: United Conservatives	__/__/__	$2,516.83
Mailing Address: PO Box 1409	__/__/__	$
City, State, Zip Code: Laurel, MS 39440	__/__/__	$
Name of Employer (Required): Jack Fairchilds	__/__/__	$
Occupation (Required): Conservator	Aggregate year-to-date	$2,516.83
C. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Kacee Waters	__/__/__	$300.00
Mailing Address: 8000 Fountainbleu Rd	__/__/__	$250.00
City, State, Zip Code: Ocean Springs, MS 39564	__/__/__	$
Name of Employer (Required): Retired	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$550.00
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Carol Walters	__/__/__	$300.00
Mailing Address: 1311 Augusta Road	__/__/__	$
City, State, Zip Code: Ellisville, MS 39437	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required): Retired	Aggregate year-to-date	$300.00

Name of Candidate or Committee Chris McDaniel

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	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Max Phillips Mailing Address: 1207 SCR 8 City, State, Zip Code: Taylorsville, MS 39168 Name of Employer (Required) Occupation (Required): Farmer	12/1/22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	$500.00 $ $ $ $500.00
B. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Robin Torske Mailing Address: 23 Copperhead Road City, State, Zip Code: Laurel, MS 39443 Name of Employer (Required) Occupation (Required): Retired	12/1/22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	$250.00 $ $ $ $250.00
C. Source: ◉Corporation ◯PAC ◯Individual ◯Loan Other (please specify) Full name: Trustpoint LLC Mailing Address: P O Box 1283 City, State, Zip Code: Laurel, MS 39443 Name of Employer (Required) Occupation (Required)	12/1/22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	$250.00 $ $ $ $250.00
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: John Chandler Mailing Address: 3503 Rocky Branch Road City, State, Zip Code: Sumrall, MS 39482 Name of Employer (Required): Self Occupation (Required): Dentist	12/1/22 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	$$500.00 $ $ $ $500.00

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Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ○Corporation ○PAC ◉Individual ○Loan Other (please specify) Full name: Donis Jefcoat Mailing Address: P O Box 117 City, State, Zip Code: Soso, MS 39480 Name of Employer (Required) Occupation (Required): Retired	9/13/22	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00
B. Source: ◉Corporation ○PAC ○Individual ○Loan Other (please specify) Full name: Plum Creek LLC Mailing Address: 540 CR102 City, State, Zip Code: Walnut, MS 38683 Name of Employer (Required) Occupation (Required)	9/13/22	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00
C. Source: ○Corporation ○PAC ◉Individual ○Loan Other (please specify) Full name: Jamie Stone Mailing Address: 139 Fox Farm Road City, State, Zip Code: Tupelo, MS 38801 Name of Employer (Required) Occupation (Required): Retired	8/8/22	$240.15
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$240.15
D. Source: ○Corporation ◉PAC ○Individual ○Loan Other (please specify) Full name: Hold The Line Mailing Address: 18237 Hwy 53 City, State, Zip Code: Gulfport, MS 39403 Name of Employer (Required) Occupation (Required)	1/3/23	$10,000.00
	1/25/23	$455,000.00
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$465,000.00

Name of Candidate or Committee: Chris McDaniel

Reporting period: January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Melanie Sojourner Mailing Address: 438 Upper Kingston Road City, State, Zip Code: Natchez, MS 39120 Name of Employer (Required): Farmer Occupation (Required)	12/19/22	$1,500.00
	1/30/23	$2,000.00
	1/6/23	$480.03
	__/__/__	$
	Aggregate year-to-date	$3,980.03
B. Source: ◉Corporation ◯PAC ◯Individual ◯Loan Other (please specify) Full name: Palace Wine and Liquor Mailing Address: 2132 Hwy 15 N Ste B City, State, Zip Code: Laurel, MS 39440 Name of Employer (Required): self Occupation (Required)	Date (Mo., Day, Year)	Amount of each receipt this period
	12/19/22	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00
C. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Charlotte McDaniel Mailing Address: 26 Carlos Drive City, State, Zip Code: Ellisville, MS 39437 Name of Employer (Required): Retired Occupation (Required)	Date (Mo., Day, Year)	Amount of each receipt this period
	12/19/22	$10,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$10,000.00
D. Source: ◉Corporation ◯PAC ◯Individual ◯Loan Other (please specify) Full name: Blackstone Corporations Mailing Address: 414 W Oak Street City, State, Zip Code: Laurel, MS 39440 Name of Employer (Required) Occupation (Required)	Date (Mo., Day, Year)	Amount of each receipt this period
	12/27/22	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00

Name of Candidate or Committee Chris McDaniel

Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ○Corporation ○PAC ◉Individual ○Loan Other (please specify) Full name: Jane McArthur Mailing Address: 300 Mason Street #221 City, State, Zip Code: Laurel, MS 39440 Name of Employer (Required): Retired Occupation (Required)	12/27/22	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00
B. Source: ○Corporation ○PAC ◉Individual ○Loan Other (please specify) Full name: Eugene Harlow Mailing Address: 2514 Highway84 W City, State, Zip Code: Laurel, MS 39440 Name of Employer (Required): Hortman, Harlow Occupation (Required): Lawyer Partner	Date (Mo., Day, Year)	Amount of each receipt this period
	12/27/22	$2,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$2,000.00
C. Source: ○Corporation ○PAC ◉Individual ○Loan Other (please specify) Full name: Brett W Robinson Mailing Address: 16 Northgate Drive City, State, Zip Code: Laurel, MS 39440 Name of Employer (Required): Hortman Harlow Occupation (Required): Lawyer Partner	Date (Mo., Day, Year)	Amount of each receipt this period
	12/27/22	$2,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$2,000.00
D. Source: ○Corporation ○PAC ◉Individual ○Loan Other (please specify) Full name: Norman G Hortman, Jr Mailing Address: P O Box 1409 City, State, Zip Code: Laurel, MS 39441 Name of Employer (Required): Hortmen Harlow Occupation (Required): Lawyer Partner	Date (Mo., Day, Year)	Amount of each receipt this period
	12/27/22	$2,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$2,000.00

Name of Candidate or Committee Chris McDaniel

Reporting period Januuary 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Bradley Patano Mailing Address: 147 Pittman Road City, State, Zip Code: Ocean Springs, MS 39564 Name of Employer (Required): Mississippi State University Occupation (Required): Principal	12/27/22	$2,500.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$2,500.00
B. Source: ◯Corporation ◉PAC ◯Individual ◯Loan Other (please specify) Full name: ECM Co-Pac Mailing Address: P O Box 3300 City, State, Zip Code: Ridgeland, MS 39158 Name of Employer (Required) Occupation (Required)	Date (Mo., Day, Year)	Amount of each receipt this period
	12/21/22	$500.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$500.00
C. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Deidra Bassi Mailing Address: 541 N 6th Avenue City, State, Zip Code: Laurel, MS 39440 Name of Employer (Required): Hortman Harlow Occupation (Required): Lawyer Partner	Date (Mo., Day, Year)	Amount of each receipt this period
	12/27/22	$2,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$2,000.00
D. Source: ◉Corporation ◯PAC ◯Individual ◯Loan Other (please specify) Full name: Hortman Harlow Bassi Robingon McDaniel Mailing Address: P O Drawer 1409 City, State, Zip Code: Laurel MS 39441 Name of Employer (Required) Occupation (Required)	Date (Mo., Day, Year)	Amount of each receipt this period
	12/21/22	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00

Name of Candidate or Committee Chris McDaniel

Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Hayden Newman	1 / 30 / 23	$ 1,000.00
Mailing Address 791 Kingston Road	__/__/__	$
City, State, Zip Code Natchez, MS 39120	__/__/__	$
Name of Employer (Required) Self	__/__/__	$
Occupation (Required) Constsruction Contractor	Aggregate year-to-date	$ 1,000.00
B. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Kaelin Daye	1 / 30 / 23	$ 1,000.00
Mailing Address 206 Margaret Avenue	__/__/__	$
City, State, Zip Code Natchez, MS 39120	__/__/__	$
Name of Employer (Required) Self	__/__/__	$
Occupation (Required) Boutique owner	Aggregate year-to-date	$ 1,000.00
C. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Jack Sojourner	1 / 30 / 23	$ 2,000.00
Mailing Address 1 Oakwood Plantation Road	__/__/__	$
City, State, Zip Code Natchez, MS 39120	__/__/__	$
Name of Employer (Required) Self	__/__/__	$
Occupation (Required) Farmer	Aggregate year-to-date	$ 2,000.00
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Billy Aguillard	1 / 30 / 23	$ 1,000.00
Mailing Address P O Box 429	__/__/__	$
City, State, Zip Code Prairieville, LA 70769	__/__/__	$
Name of Employer (Required) Self	__/__/__	$
Occupation (Required) Construction Company	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee Chris McDaniel

Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Bobby Cox Mailing Address: P O Box 892 City, State, Zip Code: Natchez, MS 39120 Name of Employer (Required): Self Occupation (Required): Attorney	1/30/23	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00
B. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Friends of Melanie Sojourner Mailing Address: 438 Upper Kingston Rd City, State, Zip Code: Natchez, MS 39120 Name of Employer (Required): State of MS Occupation (Required): Senator	Date (Mo., Day, Year)	Amount of each receipt this period
	1/2/23	$480.03
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$480.03
C. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Carol McCarty Mailing Address: 109 Burne Run City, State, Zip Code: Madison, MS 39110 Name of Employer (Required): Occupation (Required): Retired	Date (Mo., Day, Year)	Amount of each receipt this period
	1/30/23	$250.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$250.00
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Joyce Blasingame Mailing Address: 6 Twelve Oaks City, State, Zip Code: Sherman, MS 38828 Name of Employer (Required): Occupation (Required): Retired	Date (Mo., Day, Year)	Amount of each receipt this period
	1/9/23	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00

Name of Candidate or Committee: Chris McDaniel

Reporting period: January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Ralph D Cahill, Jr Mailing Address: 63 Craven Drive City, State, Zip Code: Soso, MS 39480 Name of Employer (Required): Southeastern Fundraising Occupation (Required): Agent	1/9/23	$2,500.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$2,500.00
B. Source: ◉Corporation ◯PAC ◯Individual ◯Loan Other (please specify) Full name: Overstreet and Associates PLCC Mailing Address: 161 Lameuse St., Suite 203 City, State, Zip Code: Biloxi, MS 39530 Name of Employer (Required): Occupation (Required):	Date (Mo., Day, Year)	Amount of each receipt this period
	1/9/23	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00
C. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Aleta McDaniel Mailing Address: 804 Justus Road City, State, Zip Code: Banner Elk, NC 28604 Name of Employer (Required): Rustic Shanty Occupation (Required): Designer	Date (Mo., Day, Year)	Amount of each receipt this period
	1/9/23	$50,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$50,000.00
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Lauren Smith Mailing Address: 113 Winchester Place City, State, Zip Code: Saltillo, MS 38866 Name of Employer (Required): Candor Technical Consultanting Occupation (Required): Lab Technical Consultant	Date (Mo., Day, Year)	Amount of each receipt this period
	1/9/23	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00

Name of Candidate or Committee Chris McDaniel

Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Susan Berel Mailing Address: 6145 Gruich Circle City, State, Zip Code: Ocean Springs,MS 39564 Name of Employer (Required): Self Occupation (Required): CPA	1/6/23	$240.15
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$240.15
B. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Steven Utroska Mailing Address: 166 Pleassant Grove Drive City, State, Zip Code: Brandon, MS 39042 Name of Employer (Required): State Freedom Caucus Occupation (Required): Director	Date (Mo., Day, Year)	Amount of each receipt this period
	1/6/23	$480.30
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$480.30
C. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Dana Criswell Mailing Address: 251 County Road 550 City, State, Zip Code: Ripley, MS 38663 Name of Employer (Required): Fedex Occupation (Required): Pilot	Date (Mo., Day, Year)	Amount of each receipt this period
	1/5/23	$240.15
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$240.15
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Dan Carr Mailing Address: 18237 Hwy 53 City, State, Zip Code: Gulfport, MS 39503 Name of Employer (Required): Faith Baptist Church Occupation (Required): Minister	Date (Mo., Day, Year)	Amount of each receipt this period
	1/10/23	$11,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$11,000.00

Name of Candidate or Committee Chris McDaniel

Reporting period January 1, 2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Jameson Haygood Mailing Address: 110 Fawn Lane City, State, Zip Code: Madison, MS 39110 Name of Employer (Required): WYAB Occupation (Required): Radio Host	1/24/23 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	$481.30 $ $ $ $481.30
B. Source: ◉Corporation ◯PAC ◯Individual ◯Loan Other (please specify) Full name: Memorial Asset Protection Plan LLC Mailing Address: PO Box 7302 City, State, Zip Code: Diberville, MS 39640 Name of Employer (Required) Occupation (Required)	1/9/23 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	$500.00 $ $ $ $500.00
C. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: George Emile Mailing Address: 154 Seal Ave City, State, Zip Code: Biloxi,MS Name of Employer (Required): Retired Occupation (Required)	1/10/23 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	$250.00 $ $ $ $250.00
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Susan Perkins Mailing Address: 2631 Hwy 29 N City, State, Zip Code: Laurel, MS 39443 Name of Employer (Required): Retired Occupation (Required)	1/7/23 __/__/__ __/__/__ __/__/__ Aggregate year-to-date	$500.00 $ $ $ $500.00

Name of Candidate or Committee Chris McDaniel

Reporting period January 1,2022 through December 31, 2022

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Jerel Wade Mailing Address: 311 Watermill Road City, State, Zip Code: Laurel, MS 39443 Name of Employer (Required): Sylva Bay Academy Occupation (Required): Administrator	1/30/23	$1,000.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$1,000.00
B. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Scott Brewster Mailing Address: 407Huntington Pt City, State, Zip Code: Brandon MS 39047 Name of Employer (Required): BCBS Occupation (Required): Sales	1/30/23	$960.60
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$960.60
C. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Dean Sellars Mailing Address: 7617 Carter Road City, State, Zip Code: Moss Point, MS Name of Employer (Required): Retired Occupation (Required):	1/31/23	$200.00
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$200.00
D. Source: ◯Corporation ◯PAC ◉Individual ◯Loan Other (please specify) Full name: Daniel Grantham Mailing Address: 261 Hopkins Blvd City, State, Zip Code: Biloxi, MS 39530 Name of Employer (Required): Retired Occupation (Required):	1/31/23	$960.60
	__/__/__	$
	__/__/__	$
	__/__/__	$
	Aggregate year-to-date	$960.60

Name of Candidate or Committee: Chris McDaniel

Reporting period: 01/01/2022 through 12/31/2022

ITEMIZED DISBURSEMENTS

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

A. Full name Ryan Walters Mailing Address 2001Hwy 360 #8305 City, State, Zip Code Euless, TX 76039 Purpose of Disbursement (Optional) Research	Date (Mo., Day, Year) 1 / /	Amount of each disbursement this period $ 300.00
	3 / /	$ 900.00
	Aggregate Year-to-date	$ 1,200.00
B. Full name Susan Perkins Mailing Address 2631 Hwy 29 N City, State, Zip Code Laurel, MS 39443 Purpose of Disbursement (Optional) Research	Date (Mo., Day, Year) 5 / /	Amount of each disbursement this period $ 428.99
	5 / /	$ 219.65
	Aggregate Year-to-date	$ 648.64
C. Full name Susan Perkins Mailing Address 2631 Hwy 29 N City, State, Zip Code Laurel, MS 39443 Purpose of Disbursement (Optional) Research and supplies	Date (Mo., Day, Year) 8 / /	Amount of each disbursement this period $ 251.54
	8 / /	$ 367.95
	Aggregate Year-to-date	$ 1,268.13
D. Full name Susan Perkins Mailing Address 2631 Hwy 29 N City, State, Zip Code Laurel, MS 39443 Purpose of Disbursement (Optional) Research and supplies	Date (Mo., Day, Year) 10 / /	Amount of each disbursement this period $ 255.50
	10 / /	$ 252.49
	Aggregate Year-to-date	$ 1,776.12
E. Full name Susan Perkins Mailing Address 2631 Hwy 29 N City, State, Zip Code Laurel, MS 39443 Purpose of Disbursement (Optional) Research and supplies	Date (Mo., Day, Year) 12 / /	Amount of each disbursement this period $ 434.17
	/ /	$ 431.88
	Aggregate Year-to-date	$ 2,642.17
F. Full name Casey Reed Mailing Address 538 Reid Road City, State, Zip Code Laurel, MS 39443 Purpose of Disbursement (Optional) Little League sponsorship	Date (Mo., Day, Year) 7 / /	Amount of each disbursement this period $ 500.00
	/ /	$
	Aggregate Year-to-date	$ 500.00