REPORT OF RECEIPTS AND DISBURSEMENTS 2023 Election RECEIVED

Michael Watson
Ref No: CF202329928 .
Date Filed: 6/8/2023
Michael Watson

Secretary of State

By Secretary of State Elections Division at 8:31 am, Jun 08, 2023

Name of Candidate Chris Brown for Mississippi			
Address 100 Bluebird Lane	City/Zip Columbus/39702		
Telephone (Work) 662-319-1030 (Home)	(Fax)		
Contact Name Kim Hobson	Email Address kimhobson@outlook.com		
Office Sought Public Service Commission - Northern District			
Check here if above is different from previous report  TYPE OF REPORT			
May 10, 2023 Periodic Report (January 1, 2023 through	igh April 30, 2023)Mandatory		
June 9, 2023 Periodic Report (May 1, 2023 through )	May 31, 2023)Mandatory		
July 10, 2023 Periodic Report (June 1, 2023 through	June 30, 2023)Mandatory		
August 1, 2023 Primary Pre-Election Report (July 1	, 2023 through July 29, 2023)		
August 22, 2023 Primary Pre-Runoff Report (July 3	30, 2023 through August 19, 2023)Runoff Candidates Only		
October 10, 2023 Periodic Report (July 1, 2023 thro	ugh September 30, 2023)Mandatory		
October 31, 2023 Pre-Election Report (October 1, 20	023 through October 29, 2023)Mandatory		
November 21, 2023 Pre-Runoff Report (October 30,	2023 through November 19, 2023)Runoff Candidates Only		
January 10, 2024 Periodic Report (October 1, 2023	through December 31, 2023)Mandatory		
Termination Report (Committee will no longer accependitures, has no outstandi	· · · · · · · · · · · · · · · · · · ·		

## **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 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"

Ref No: CF202329928

Date Filed: 6/8/2023

Michael Watson Secretary of State

restrictions of Section 2-15-821. Miss. Code Ann.—Separate record keeping and reporting is required and officeholders for any campaign contributions held prior to Jan. 1, 2018, disbursed therefrom and contributions earned thereon in the form of interest or dividends.

(5) The receiving office must be in actual receipt of the required reports by 5:00 p.m. on the deadline, 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

	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	S	s	\$	\$
TOTAL AMT OF DISBURSEMENTS	S	s	S	S

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

	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$700.00	\$236.42	\$ 936.42	\$816,046.57
TOTAL AMT OF DISBURSEMENTS	\$50,825.29	\$ 100.00	\$ 50,925.29	\$ 198,122.06

() ī	6(6/23	
Ous Krum		
Signature of Candidate	Date	

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

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

Candidates for Statewide, State District or Legislative Office file this Report with the Secretary of State to 401 Mississippi Street, Jackson, MS; P. O. Box 136, Jackson, MS 39205; fax (601) 576-2545; or email <u>Campaign Finance a sostmotion</u>.
Candidates for county and/or county district office file this Report with their respective Circuit Clerk's Office.

Page \_\_\_\_\_ of \_\_\_

Name of Candidate or Committee Chris Brown for Mississippi

Reporting period 05/01/2023

through <u>05/31/2023</u>

Ref No: CF202329928 Date Filed: 6/8/2023 Michael Watson

## ITEMIZED RECEIPTS

TTEMIZED RECEIP	IS	Secretary of State
A. Source: Corporation PAC Individual Loan	Date (Ma Day Year)	receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Oseman Insurance Agency	05/30/23	<sup>\$</sup> 500.00
Mailing Address 6060 Primacy Parkway Primacy III, Suite 201	_'_'_	<b>S</b>
City, State, Zip Code Memphis, TN 38119	_'_'_	\$
Name of Employer (Required)	''	S
Occupation (Required)	Aggregate year-to-date	<sup>\$</sup> 500.00
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Kim Hobson	05/08/23	<sup>\$</sup> 200.00
Mailing Address 91 County Rd. 440	_/_/_	\$
City, State, Zip Code Ripley, MS 38663	'	\$
Name of Employer (Required) BRS Offroad	//	\$
Occupation (Required) Account Manager	Aggregate year–to-date	<sup>\$</sup> 200.00
C. Source: OCorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	'	\$
Mailing Address		\$
City, State, Zip Code	_'_'_	\$
Name of Employer (Required)	_'_'_	S
Occupation (Required)	Aggregate year-to-date	\$
D. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name	(, 20,, 100,,	this period
	'	\$
Mailing Address	'	\$
City, State, Zip Code	'	s
Name of Employer (Required)	'	S
Occupation (Required)	Aggregate year-to-date	\$

		Page 1	of_1
Name of Candidate or Committee	Chris Brown for Mississippi		Ref No: CF202329928
Reporting period 05/01/2023	through	1/2023	Date Filed: 6/8/2023
ITE	MIZED DISBURSE	EMENTS	Michael Watson
Disbursements from contributions	accumulated Prior to January 1, 2018 or	On or After Ja	Secretary of State
A. Full name		Date	Amount of each
1 Vision		(Mo., Day, Year)	disbursement this period
Mailing Address 9346 Telge Rd.		05,31,23	\$ 1,918.08
City, State, Zip Code		1 1	\$
Houston, TX 77095			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ 1,918.08
B. Full marme J Russell & Associates		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3651 Mars Hill Rd. Ste 500B		05,30,23	\$ 8,845.25
City, State, Zip Code Watkinsville, GA 30677		05/10/23	\$ 27,346.96
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ 36,192.21
C. Full name Jamie Peavy		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 584 Boardwalk Blvd		05,19,23	\$ 2,500.00
City, State, Zip Code Ridgeland, MS 39157		05 /03 /23	\$ 5,000.00
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ 7,500.00
D. Full name Jacob Walters		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 285 Old Mayhew Rd. Apt. 8		05/16/23	\$ 215.00
City, State, Zip Code Starkville, MS 39759		05,16,23	\$ 4,000.00
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ 4,215.00
E. Full name Jacob Walters		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 285 Old Mayhew Rd. Apt. 8		05,09,23	\$ 1,000.00
City, State, Zip Code Starkville, MS 39759		'	S
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ 1,000.00
F. Fuil name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		, ,	\$

City, State, Zip Code

Purpose of Disbursement (Optional)

S

\$

Aggregate Year-to-date