#### Candidate REPORT OF RECEIPTS AND **DISBURSEMENTS**

games and	SECRETARY OF STATE
A COMPANY CONTRACTOR	RECEIVED
Win vennendon i o vo	<b>JAN</b> 3 1 2018
A STATE OF THE STA	Campate Stamp
	IS Secretary of State

Name of Candida	teJ. Tate Reeves				Campate HAMP
Address PO Box	x 24355, Jackson, MS 39225		County	HINDS	TWIN DAGICERTY OF SEE
Telephone (Work	)	_ Telephone (Home)		Fax	
Contact Name	Terry Reeves	Email			
Office Sought	Lieutenant Governor				
Check h	ere if above is different from p	revious report			
		TYPE O	F REPORT		
_*_January 3	I, <b>2018 Annual Report</b> (Janu	ary 1, 2017, through Dece	ember 31, 201		
campaign	on Report (Candidate will no expenditures, has no outstar cash on hand balance)	longer accept contribution ding campaign debt obliga	ns, make ation and	Requir obliga	ed to terminate reporting tions

#### <u>IMPORTANT</u>

- (1) Annual Reports are mandatory, unless a candidate has filed a Termination Report prior to January 31, 2017. If no contributions or expenditures have occurred, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and expenditures during the year, and the total cash on hand balance.
- (2) Until a candidate files a Termination Report, annual, periodic and pre-election reports must be filed in accordance with Miss. Code Ann.
- § 23-15-807 (b) (ii) and (iii). A Termination Report, may be filed at the same time as another type of report by checking both reports.

	REPORTE!			AND DISBURSEMENT This Period	Calendar Year-To-Date
Total amount of contributions	<b>\$</b> 1,203,968.76	+	\$8,369.27	\$1,212,338.03	\$1,212,338.03
Total amount of disbursements	\$172,333.00	+	\$975.35	\$173,308.35	\$173,308.35
Total amount of cash on hand				\$5,367,011.77	

mined this report and to the best of my knowledge and belief it is true, accurate, and complete. 1/31/2018 Date

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

Penalties: A candidate who falls to file, or fails to timely file, required reports in accordance with the statutory deadline cannot be

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).

Send to: Candidates for Statewide, State-District and/or Legislative Office file this form with the Secretary of State: hand delivered to 401

		Page	Page 1 of 126
Name of Candidate or Committee  Reporting Period01/01/2017	Friends Of Tate Reeves through	12/31/2017	
. zop o			

Durce: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
☐ Other (please specify)  uil Name Robert Wells	10/24/2017	\$25,000.00
ailing Address 226 Westfield Road		
Ity, State, Zip Code Ridgeland, MS 39157-9492		
ame of Employer (Required) Young Wells	Aggregate	#25 000 00
ccupation (Required) Attorney	Year-to-date	\$25,000.00 Amount of each
ource: 🗆 Corporation 🗀 PAC 🛅 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	04/18/2017	\$1,000.00
Glance research		
139 Bayou Road  Greenville, MS 38701-7702		
iame of Employer (Required) Reed & Joseph		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	09/12/2017	\$10,000.00
Tommy E Dulaney		
Mailing Address 5601 10th Ave  City, State, Zip Code Meridian, MS 39305-1925		
City, State, Zip Code  Meridian, MS 39305-1925  Name of Employer (Required)  Structural Steel Services, Inc.		
Atom (Populard)	Aggregate Year-to-date	\$10,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	12/29/2017	\$1,000.00
Full Name Airbus Helicopters, Inc.	12120120	
Mailing Address 2701 Forum Drive		
City, State, Zip Code Grand Prairie, TX 75052-8927		
Name of Employer (Required)  Occupation (Required)	Aggregate Year-to-date	\$1,000.0

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Name of Candidate or Committee Reporting Period01/01/2017	Friends Of Tate Reeves	12/31/2017	

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name ENPAC Mississippi	08/30/2017	\$1,500.00
Mailing Address PO Box 1640		
City, State, Zip Code Jackson, MS 39215-1640		
Name of Employer (Required)	Aggregate	\$1,500.00
Occupation (Required)	Year-to-date	Amount of each
Source: Corporation TPAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Full Name Mississippi Association of Nurse Anesthetists PAC	11/02/2017	\$5,000.00
Mailing Address 1022 Highland Colony Pkwy Ste 101		
City, State, Zip Code Ridgeland, MS 39157-2048		
Name of Employer (Required)  Occupation (Required)	Aggregate Year-to-date	\$5,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)  Full Name	10/03/2017	\$1,000.00
Full Name Phil Abernethy  Malling Address  137 Eastpointe Circle		
City, State, Zip Code Madison, MS 39110-7850		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggregate	04.000.00
Occupation (Required) Attorney	Year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)  Full Name Pickering, Inc. PAC	09/18/2017	\$1,000.00
r lokeling, make		
Mailing Address 6775 Lenox Center Ct Ste 300  City, State, Zip Code Memphis, TN 38115-4435		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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Name of Candidate or Committee	Friends Of Tate Reeves		
Reporting Period01/01/2017	through	12/31/2017	

Ource: Corporation PAC Individual Coan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)  Full Name  Michael D Caples	10/04/2017	\$1,000.00
Malling Address 303 Vinca Cove		
City, State, Zip Code Madison, MS 39110-6529		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	A gata	
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00  Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/03/2017	\$1,000.00
Full Name MISS Life Under PAC	`	
Mailing Address 5475 Executive Place		
City, State, Zip Code Jackson, MS 39206-4104		
Name of Employer (Required)  Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
TOther (please specify)  Full Name  Marko Enterprise LLC	11/07/2017	\$5,000.00
Malling Address 15401 Milloit Lane S.		<u> </u>
City, State, Zip Code Covington, LA 70433-6871		
Name of Employer (Required)	Aggregate Year-to-date	\$5,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)	04/06/2017	\$1,000.00
Full Name Lester W. Myers		
Mailing Address PO Box 878		
City, State, Zip Code Indianola, MS 38751-0878		
Name of Employer (Required) Delta Western Inc	Aggregate	\$1,000.00
	Year-to-date	

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Name of Candidate or Committee	Friends Of Tate Reeves through 12/31/2017	
Reporting Period 000012511	SECTIOTS	

ITEMIZED RECEIP I	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)  James H Creekmore	10/16/2017	\$2,500.00
ailing Address 7 Cypress Lane		
ity, State, Zip Code Jackson, MS 39211-5935	_	
ame of Employer (Required) Telepak Networks	Aggregate	\$2,500.00
Owner	Year-to-date	Amount of each
Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan	Date (Mo., Day, Year)	receipt this period
☐ Other (please specify)	09/22/2017	\$1,000.00
Full Name W H Benson		
Mailing Address 475 County Road 520		
City, State, Zip Code Shannon, MS 38868-8753		
Name of Employer (Required)  Lee County, MS	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Chancery Clerk  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/09/2017	\$1,000.00
Fuil Name Elizabeth Lambert Clark		
Mailing Address 114 Lake Village Dr		
City, State, Zlp Code Madison, MS 39110-6520		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Attorney  DAC Individual Loan	Date	Amount of each receipt
Source: Corporation LI PAC LI IIII	(Mo., Day, Yea	
Under (please specify)  Full Name  Waste Management	09/27/2017	\$1,000.00
AAGGG		
Mailing Address PO Box 3027		
City, State, Zip Code Houston, TX 77253-3027		
Name of Employer (Required)  Occupation (Required)	Aggregate Year-to-dat	

		Page Page 5 of 126
Name of Candidate or Committee  Reporting Period01/01/2017	Friends Of Tate Reeves 12/31/20	17
Reporting Ferror	ITEMIZED RECEIP	TS

#### ITEMIZED RECEIPTS Amount of each Date receipt ☐ Loan 🖺 Individual ☐ PAC ☐ Corporation (Mo., Day, Year) this period Source: Other (please specify) \$5,000.00 11/16/2017 Full Name Pete Johnson Mailing Address 405 Court Street City, State, Zip Code Clarksdale, MS 38614-2715 Name of Employer (Required) Self Aggregate \$6,000.00 Year-to-date Occupation (Required) Attorney Amount of each Date receipt ☐ Loan Individual ☐ PAC Corporation (Mo., Day, Year) this period Source: Other (please specify) \$1,000.00 10/16/2017 Full Name Bluetick, Inc. Mailing Address 1501 Highwoods Blvd Ste 104 Greensboro, NC 27410-2051 City, State, Zip Code Name of Employer (Required) Aggregate \$1,000.00 Year-to-date Occupation (Required) Amount of each ☐ Loan **Date** receipt Individual ☐ PAC ☐ Corporation this period (Mo., Day, Year) Source: LLC Other (please specify) \$1,000.00 12/07/2017 **Full Name** Ride Right LLC **Mailing Address** 16 Hawk Ridge Drive Lake Saint Louis, MO 63367-1861 City, State, Zip Code Name of Employer (Required) Aggregate \$1,000.00 Year-to-date Occupation (Required) Amount of each ☐ Loan Date receipt Individual ☐ PAC ☐ Corporation (Mo., Day, Year) this period Source: Other (please specify) \$1,000.00 04/04/2017 Full Name Charles R Veazey III **Mailing Address** 25 Sunset Drive City, State, Zip Code Indianola, MS 38751-2562 Name of Employer (Required) Gresham Petroleum Aggregate \$1,000.00 Year-to-date Occupation (Required)

Executive

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	Page Page 6 of 1	
Friends Of Tate Reeves		
Name of Candidate or Committee Friends Of Tuto Rose 12/31/2017 through	-	•
ITEMIZED RECEIPTS		Amount of each
Loan.	Date	receipt
Source: Corporation L PAC L Individual	(Mo., Day, Year)	this period
△ Other (please specify)	12/07/2017	\$500.00
Full Name Philips Pest Control Co LLC	12/07/2017	
Mailing Address 18516 Joe Moran Road	1	
City, State, Zip Code Kiln, MS 39556-8219		
Name of Employer (Required)	Aggregate	\$500.00
Occupation (Required)	Year-to-date	Amount of each
Loan	Date	receipt
Source: Corporation PAC Individual Li Loan	(Mo., Day, Year)	this period
Other (please specify)	06/28/2017	\$350.00
Full Name Concerned Executives for Healthcare PAC	00/20/2011	
Mailing Address 5100 Poplar Ave FI 30		
City, State, Zip Code Memphis, TN 38137-1400		
Name of Employer (Required)		
	Aggregate Year-to-date	\$350.00
Occupation (Required)		Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/10/2017	\$1,000.00
Full Name Troy Johnston	13.13.21	
Mailing Address 167 Green Glades		
City, State, Zip Code Ridgeland, MS 39157-8661		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggregate	\$1,000.00
	Year-to-date	

Loan

Individual

Occupation (Required)

Source:

Full Name

Mailing Address

City, State, Zip Code

Occupation (Required)

Name of Employer (Required)

☐ Corporation

Other (please specify)

Charles L. Boatner Jr.

PO Box 307

Attorney

☐ PAC

Sherman, MS 38869-0307

Executive

Vision Engineering

Amount of each

receipt

this period

\$1,000.00

\$1,000.00

Date

(Mo., Day, Year)

Aggregate

Year-to-date

10/11/2017

		Pag	ge Page 7 of 126
Name of Candidate or Committee Reporting Period01/01/2017	Friends Of Tate Reeves	12/31/2017	

OUTCE: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period	
Ull Name Xan Robertson	04/04/2017	\$1,000.00	
Tailing Address 3305 Old Highway 61 S			
Leland, MS 38756-9797			
ame of Employer (Required) Self	Aggregate	\$1,000.00	
Occupation (Required) Farmer	Year-to-date	Amount of each	
Source: 🔲 Corporation 🔲 PAC 🛅 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period	
Other (please specify)  Full Name Konneth Windham	10/04/2017	\$500.00	
Kelment Antonesis			
Mailing Address 94 Grandview Circle  City, State, Zip Code  Brandon, MS 39047-7398			
Diction			
	Aggregate Year-to-date	\$500.00	
Occupation (Required)  Market President  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period	
Other (please specify)	04/03/2017	\$1,000.00	
Full Name W. Tom Robertson Jr.			
Mailing Address 65 Holly Ridge Road			
City, State, Zip Code Indianola, MS 38751-9691			
Name of Employer (Required)  N/A	Aggregate Year-to-date	\$1,000.00	
Occupation (Required)  Retired  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period	
Other (please specify)	10/02/2017	\$2,500.00	
Full Name Stephen C. Edds	10/02/2011		
Mailing Address 120 Herons Landing			
City, State, Zip Code Ridgeland, MS 39157-8687			
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggregate	\$2,500.0	
Occupation (Required) Attorney	Year-to-date		

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Name of Candidate or Committee	Friends Of Tate Reeves through 12/31/2017	
Reporting Period	- WIED DECEIDTS	

OUTCE: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/16/2017	\$5,000.00
ull Name Haley Barbour		
Mailing Address 648 Dogwood Drive		
ity, State, Zip Code Yazoo City, MS 39194-8205		
ame of Employer (Required) BGR Group	Aggregate	\$5,000.00
Occupation (Required)  Lobbyist	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	04/05/2017	\$500.00
Full Name Tom J. Gary Jr.		
Mailing Address 1005 River Birch Cove		
City, State, Zip Code Greenwood, MS 38930-2518		
Name of Employer (Required) Gary Beall Enterprises LLC	Aggregate Year-to-date	\$500.00
Occupation (Required)  CFO  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	04/07/2017	\$1,000.00
Full Name John W McPherson Jr.		
Mailing Address PO Box 690		
City, State, Zip Code Indianola, MS 38751-0690		
Name of Employer (Required)  Double Quick Inc	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  VP  Source: ** Corporation   PAC   Individual   Loan	Date (Mo., Day, Yea	Amount of each receipt this period
Other (please specify)		\$1,000.00
Full Name Polk Inc.	11/07/2017	
Mailing Address P.O. Box 1190		
City, State, Zip Code Magee, MS 39111-1190		
Name of Employer (Required)	Aggregate	
Occupation (Required)	Aggregate Year-to-da	\$1,000.0 te

		Page	Page 9 of 126
Name of Candidate or Committee	Friends Of Tate Reeves through 12/31/2017		
Reporting Period 01/01/2017	tillough		

ITEMIZED RECEIP 1	Date	Amount of each receipt
urce: 🗌 Corporation 🔲 PAC 🖺 Individual 🔲 Loan	(Mo., Day, Year)	this period
Other (please specify)	10/05/2017	\$500.00
II Name Arthur L. Cook		
alling Address 107 W Jefferson St.		
ty, State, Zip Code Kosciusko, MS 39090-3618	-	
ame of Employer (Required) Self	Aggregate	\$500.00
ccupation (Required) Architect	Year-to-date	Amount of each
Source: 🗆 Corporation 🗀 PAC 🖺 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	11/16/2017	\$5,000.00
Full Name Johnny Morgan		
Malling Address PO Box 309		
Oxford, MS 38655-0309		
Name of Employer (Required) Morgan White Group	Aggregate Year-to-date	\$14,000.00
Occupation (Required)  President  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	07/18/2017	\$1,000.00
Full Name Advance America		
Malling Address 135 N. Church Street		
City, State, Zip Code Spartanburg, SC 29306-5138		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt this period
Other (please specify)	10/01/2017	\$1,000.00
Full Name Jetson G Hollingsworth	10/01/2011	
Mailing Address 2253 Wild Valley Drive		
City, State, Zip Code Jackson, MS 39211-6165		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggregate	\$1,000.0
Occupation (Required) Attorney	Year-to-dat	e

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Name of Candidate or Committee	Friends Of Tate Reeves  through 12/31/2017	
Reporting Period	DECEIDE	

ITEMIZED RECEIF 1	Date (Mo., Day, Year)	Amount of each receipt this period	
Other (please specify)  Full Name  James W. Rayner	11/16/2017	\$5,000.00	
Mailing Address 6 Oak Place			
City, State, Zip Code Oxford, MS 38655-2704			
Name of Employer (Required) Self	Aggregate	\$5,000.00	
Occupation (Required) Opthmologist	Year-to-date	Amount of each	
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period	
Other (please specify)  Full Name Scott Moak	10/16/2017	\$250.00	
Full Name Scott Moak  Malling Address 114 Oakridge Trail		,	
City, State, Zip Code Flowood, MS 39232-8687			
Name of Employer (Required)  Ross & Yerger Insurance, Inc	Aggregate Year-to-date	\$250.00	
Source: Corporation PAC Individual Loan Partnership	Date (Mo., Day, Year)	Amount of each receipt this period	
Tother (please specify)  Full Name  G.S. Partnership	09/22/2017	\$5,000.00	
Full Name G S Partnership  Malling Address  12 Ashton Garden		-	
City, State, Zip Code Jackson, MS 39211			
Name of Employer (Required)  Occupation (Required)	Aggregate Year-to-date	\$5,000.00	
Source: Corporation PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt this period	
Other (please specify)	04/10/2017	\$500.00	
Full Name Huey Townsend			
Mailing Address 710 Francis Drive			
City, State, Zip Code Belzoni, MS 39038-3422  Name of Employer (Required) Guaranty Bank And Trust			
Occupation (Required)  Banker	Aggregate Year-to-da	\$500.0 te	

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Name of Candidate or Committee	Friends Of Tate Reeves	12/31/2017	<del></del>
Reporting Period01/01/2017			

Reporting PeriodITEMIZED RECEIPT	S	
□	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation C PAC C Individual Components of the Corporation C PAC C Individual Components of the Corporation C PAC C Individual Components of the Corporation C Individual C Indiv	·	\$500.00
	10/16/2017	φοσοιστ
Hoy !		
Mailing Address 216 Greenfield Place		
Brandon, MS 39047-9008		
Name of Employer (Required) Blair & Bondurant PA	Aggregate Year-to-date	\$500.00
Occupation (Required)  Attorney  Source:   Corporation   PAC   Individual   Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/16/2017	\$1,000.00
Full Name First Heritage Credit LLC  Mailing Address 605 Crescent Boulevard Suite 101		
City, State, Zip Code Ridgeland, MS 39157-8659		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	09/22/2017	\$10,000.00
Full Name Ronnie Slay		
Malling Address 7461 Poplar Springs Dr.		
City, State, Zip Code Meridian, MS 39305-9245		
Name of Employer (Required) Slay Steel	Aggregate Year-to-date	\$10,000.00
Occupation (Required)  Executive  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Yea	Amount of each receipt this period
Other (please specify)	09/25/2017	\$2,500.00
Full Name Clark PAC		
Mailing Address 300 Oakland Flatrock Rd		
City, State, Zip Code Oakland, KY 42159-9766		
Name of Employer (Required)	Aggregat Year-to-da	e \$2,500.
Occupation (Required)	Gal-20 du	

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Name of Candidate or Committee	Friends Of Tate Reeves		
04/01/2017	through		<del></del>
Reporting Period 01/01/2311	SCALIDIC		

Ource: Corporation PAC Individual Coan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/04/2017	\$500.00
ull Name Nancy A. Collins		
alling Address 1604 Briar Ridge Road		
ty, State, Zip Code Tupelo, MS 38804-5108		
ame of Employer (Required) N/A	Aggregate	\$500.00
occupation (Required) Retired	Year-to-date	Amount of each
Source: 🖺 Corporation 🔲 PAC 🔲 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	08/07/2017	\$500.00
Full Name Monsanto Company		
Mailing Address 800 N Lindbergh Boulevard		
City, State, Zip Code Saint Louis, MO 63167-1000		
Name of Employer (Required)	Aggregate	\$500.00
Occupation (Required)	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year	receipt
Other (please specify)	09/19/2017	\$1,000.00
Full Name Huntington Ingalls Industries	00, 10.	
Mailing Address PO Box 149		
City, State, Zip Code Pascagoula, MS 39568-0149		
Name of Employer (Required)	Aggregate	\$1,000.00
Occupation (Required)	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Ye	receipt
Other (please specify)	10/16/2017	\$1,000.0
Full Name Benjamin P Thompson	10/10/2017	
Mailing Address PO Box 16097		
City, State, Zip Code Jackson, MS 39236-6097		
Name of Employer (Required) BPT Strategies, LLC	Aggregat	e \$1,000.
Occupation (Required) Government Relations	Year-to-da	ite

		,	Page	Page 13 of 126
Name of Candidate or Committee Reporting Period 01/01/2017	Friends Of Tate Reeves through	12/31/2017		

TEMIZED RECEIP I	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)  Full Name  Richard Brent Tice	11/06/2017	\$3,000.00
Mailing Address PO Box 458		
Sity, State, Zip Code Wiggins, MS 39577-0458		
ame of Employer (Required) Tice & Associates, P.A.	Aggregate	\$3,000.00
Occupation (Required) CPA	Year-to-date	Amount of each
Source: ☐ Corporation ☐ PAC   ☐ Individual ☐ Loan	Date (Mo., Day, Year)	receipt this period
☐ Other (please specify)  Full Name  Johnny R Jones	10/19/2017	\$1,000.00
Mailing Address 6119 Waverly Drive		
City, State, Zip Code Jackson, MS 39206-2202		
Name of Employer (Required) Sanjo Security Services	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  CFO  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)  Full Name Howard Buford	09/15/2017	\$500.00
Full Name Howard Buford  Mailing Address 3329 Moncure Marble Road		
City, State, Zip Code Terry, MS 39170-9631		+
Name of Employer (Required) Buford Plumbing Co.	Aggregate Year-to-date	\$500.00
Occupation (Required)  Owner  Source:  Corporation PAC Individual Loan  LLC	Date (Mo., Day, Yea	Amount of each receipt  This period
Full Name Point One Strategies LLC	10/16/2017	\$1,500.00
Mailing Address P.O. Box 3015		
City, State, Zip Code Jackson, MS 39207-3015		
Name of Employer (Required)	Aggregate	\$1,500.0
Occupation (Required)	Year-to-dat	

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Name of Candidate or Comminee	nds Of Tate Reeves12/31/2017		
Reporting Period			

ITEMIZED RECEIPT	Date	Amount of each receipt
irce: 🗆 Corporation 🗀 PAC 🗀 Individual 🗀 Loan	(Mo., Day, Year)	this period
Other (please specify)	09/26/2017	\$5,000.00
II Name John M. Hairston	00/20/2	
9114 Victoria Circle		
ty, State, Zip Code Gulfport, MS 39503-6140		
ame of Employer (Required) Hancock Bank	Aggregate	\$5,000.00
ccupation (Required) President	Year-to-date	Amount of each
Source: 🗆 Corporation 🗀 PAC 🏲 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/04/2017	\$1,000.00
Full Name Amanda Jones Tollison		
Mailing Address 114 Pinecrest Drive		
City, State, Zip Code Oxford, MS 38655-2617		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Attorney  Source:   Corporation   PAC  Individual   Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/16/2017	\$1,000.00
Full Name Robert Carroll King		
Mailing Address 110 Bridgewater Crossing		
City, State, Zip Code Ridgeland, MS 39157-8603		
Name of Employer (Required) Triangle Development LLC	Aggregate Year-to-date	\$1,000.00
Occupation (Required) President	Date	Amount of each
Source: Corporation PAC Individual Loan	(Mo., Day, Yea	receipt ar) this period
Other (please specify)	12/06/2017	\$500.0
Full Name Joseph K Sims		
Mailing Address 188 E Capitol Street # 910		
City, State, Zip Code Jackson, MS 39201-2129		
Name of Employer (Required)  Cornerstone Government Affairs, LLC	Aggregate	\$500.
Occupation (Required) Sr. Vice President	Year-to-da	te

Friends Of Tate Reeves	Page Page 15	of 126
Name of Candidate or Committee through 12/31/2017		-
Reporting Period OTOTIZETI ITEMIZED RECEIPTS		Amount of each
Source: 🗆 Corporation 🗀 PAC 🛅 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/16/2017	\$500.00
Full Name John A. Maloney		
Mailing Address 1313 Harding Street		
City, State, Zip Code Jackson, MS 39202-3409		
Name of Employer (Required) Cowboy Maloney	Aggregate Year-to-date	\$500.00
Occupation (Required) Principal	100.	Amount of each

☐ Loan

☐ Loan

☐ Loan

🔼 Individual

Individual

🖺 Individual

Columbus Communities LLC

☐ PAC

1025 Annandale Drive

Madison, MS 39110-9450

PAC

1068 Highland Colony Pkwy

BankPlus PAC for Responsible Government

Ridgeland, MS 39157-8807

☐ PAC

909 Poydras Street Suite 1700

New Orleans, LA 70112-4010

CEO, President, Chairman

Xerox Corporation

Pricing & Contracts Consultant

☐ Corporation

Other (please specify)

David McMillin

Source:

Full Name

Source:

Full Name

**Mailing Address** 

Source:

Full Name

**Mailing Address** 

City, State, Zip Code

Occupation (Required)

Name of Employer (Required)

City, State, Zip Code

Occupation (Required)

Name of Employer (Required)

☐ Corporation

Other (please specify)

Joseph C Canizaro

Malling Address

City, State, Zip Code

Occupation (Required)

Name of Employer (Required)

☐ Corporation

Other (please specify)

Date

(Mo., Day, Year)

Aggregate

Year-to-date

Date

(Mo., Day, Year)

Aggregate

Year-to-date

Date

(Mo., Day, Year)

Aggregate

Year-to-date

11/30/2017

08/03/2017

10/16/2017

receipt

this period

\$500.00

\$500.00

\$2,500.00

\$2,500.00

\$2,500.00

\$16,500.00

Amount of each

receipt

this period

Amount of each

receipt

this period

	P	age Page 16 of 126
Name of Candidate or Committee	Friends Of Tate Reeves	
Reporting Period01/01/2017	through	

ITEMIZED RECEIP	Date	Amount of each receipt
eurce: Li Corporation	(Mo., Day, Year)	this period
Other (please specify)	09/17/2017	\$1,000.00
II Name Gary J Herring		
ailing Address 184 Dogwood Place		
y, State, Zlp Code Flowood, MS 39232-9578		
me of Employer (Required) First Presbyterian Day School	Aggregate	\$1,000.00
ccupation (Required) Headmaster	Year-to-date	Amount of each
iource: 🗆 Corporation 🗀 PAC 🖺 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/01/2017	\$1,000.00
Caroline Sims		
Mailing Address 4125 Crane Blvd		
City, State, Zip Code Jackson, MS 39216-3406		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Government Relations  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)	10/12/2017	\$750.00
Full Name Senior Care		
Mailing Address 6 Neshaminy Iterples STE 401		
City, State, Zip Code Feasterville Trevose, PA 19053-6942		
Name of Employer (Required)	Aggregate Year-to-date	\$750.00
Occupation (Required)	Date (Mo., Day, Ye	Amount of each receipt
Source: Corporation		
Gother (please specify)  Full Name  MS Association of Builders & Contractors PAC	11/01/2017	\$1,000.0
Mailing Address PO Box 16522		
City, State, Zip Code Jackson, MS 39236-6522		
Name of Employer (Required)		
Occupation (Required)	Aggregat Year-to-da	e \$1,000.

		Page	Page 17 of 126
Name of Candidate or Committee	Friends Of Tate Reeves through	12/31/2017	

ITEMIZED RECEIP	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	09/18/2017	\$500.00
ull Name Rhonda L. Dunaway	00,10,24	
alling Address 10673 Oakcrest Drive N.		
ity, State, Zip Code Biloxi, MS 39532-8305		
lame of Employer (Required) Coastal Family Health Center	Aggregate	\$500.00
Pharmacist Deac Dindividual Dean	Year-to-date  Date	Amount of each receipt
Source: LLC	(Mo., Day, Year)	this period
Other (please specify)	12/15/2017	\$1,000.00
Full Name HDI Solutions, LLC		
Mailing Address 391 Industry Drive		
City, State, Zip Code Auburn, AL 36832-4274		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)	11/10/2017	\$5,000.00
Full Name John Dane III		
Mailing Address 11638 Bluff Lane		
City, State, Zip Code Gulfport, MS 39503-6151		
Name of Employer (Required) Retired	Aggregate Year-to-dat	e
Occupation (Required)  N/A  Source: Corporation PAC Individual Loan	Date (Mo., Day, Yo	Amount of each receipt this period
Other (please specify)	09/29/2017	\$500.0
Full Name H & E Builders, Inc.	00/20/20	
Mailing Address 11645 Stanton Circle		
City, State, Zip Code Gulfport, MS 39503-6164		
Name of Employer (Required)	Aggrega	te \$500.

		Page	Page 18 of 126
	Friends Of Tate Reeves		
Name of Candidate or Committee	through12/31/2017		
Reporting Period			

ITEMIZED RECEIPTS	1	Amount of each
ource: 🗆 Corporation 🗀 PAC 🖺 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/16/2017	\$2,500.00
Full Name David McRae		
Malling Address 152 Green Glades		
City, State, Zip Code Ridgeland, MS 39157-8662		
Name of Employer (Required) Self	Aggregate	\$5,000.00
Occupation (Required) Attorney	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	09/25/2017	\$1,000.00
Full Name Loren L Monroe		
Mailing Address 1513 Highwood Drive		
City, State, Zip Code Mc Lean, VA 22101-5800		
Name of Employer (Required) BGR Group	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Principal  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)	10/11/2017	\$1,000.00
Full Name Magee Enterprises Inc.		
Mailing Address 105 Millcreek Corners		
City, State, Zip Code Brandon, MS 39047-9011		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Ye	Amount of each receipt
Other (please specify)	12/07/2017	\$1,000.00
Full Name Andrew M. Gilich	12/01/20 11	
Mailing Address 2026 Tuilleries Cove		
City, State, Zip Code Biloxi, MS 39531-2423		
Name of Employer (Required) City of Biloxi	Aggrega	te \$1,000.00
Occupation (Required)  Mayor	Year-to-da	ate

	F	Page 19 of 126
Name of Candidate or Committee	Friends Of Tate Reeves through 12/31/2017	
Reporting Period 01/01/2017	DECEMBES	•

Ource: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	12/27/2017	\$1,000.00
Mississippi Behavioral Health Services, LLC		
alling Address 816 Benton Road		
ty, State, Zip Code Bossier City, LA 71111-3744		
ame of Employer (Required)	Aggregate	\$1,000.00
occupation (Required)	Year-to-date	Amount of each
Source: 🔲 Corporation 🔲 PAC 🖺 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	04/18/2017	\$250.00
Full Name John M. Alexander		
Mailing Address 517 Fayette Davis Ave		
City, State, Zip Code Cleveland, MS 38732-2206		
Name of Employer (Required)  Alexander, Johnson, & Alexander	Aggregate Year-to-date	\$250.00
Occupation (Required)  Attorney  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	11/06/2017	\$2,500.00
Full Name Timothy Parkman		
Mailing Address PO Box 2220		
City, State, Zip Code Clinton, MS 39060-2220		
Name of Employer (Required) TPI Insurance	Aggregate Year-to-date	\$2,500.00
Occupation (Required)  President  President  PAC Individual I Loan	Date (Mo., Day, Yea	Amount of each receipt this period
Source: Corporation Corporatio	10/16/2017	\$2,500.00
Full Name Friends of Joel Carter	10/16/2017	
Mailing Address PO Box 1842		
City, State, Zip Code Gulfport, MS 39502-1842		
Name of Employer (Required)	Aggregate	\$2,500.0
Occupation (Required)	Year-to-dat	e

		Page	Page 20 of 126	
1	Trionde Of Tate Reeves			,
Name of Candidate or Committee	through12/31/2017			
Reporting Period 01/01/2017	WITED DECEIPTS			

ITEMIZED RECEIP	Date	Amount of each receipt
ource: 🛘 Corporation 🔻 PAC 🖺 Individual 🗍 Loan	(Mo., Day, Year)	this period
Other (please specify)	11/15/2017	\$1,000.00
ull Name Charlie Williams		
Mailing Address 1303 Pelican Loup		
Oxford, MS 38655-7345		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggregate	\$1,000.00
Occupation (Required) Government Relations	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/13/2017	\$1,000.00
Full Name William L. Smith		
Mailing Address 1200 Meadowbrook Road Apt. 18		
City, State, Zip Code Jackson, MS 39206-6109		
Name of Employer (Required) Balch & Bingham	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Partner  Source: Corporation PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt r) this period
Other (please specify)	12/06/2017	\$1,000.00
Full Name Medical Transportation Management	12.00.2	
Mailing Address 16 Hawk Ridge Dr		
City, State, Zip Code Lake St Louis, MO 63367-1861		
Name of Employer (Required)	Aggregate Year-to-da	te
Occupation (Required)  Source: Corporation PAC Individual Loan	Date (Mo., Day, Y	Amount of each receipt ear) this period
Other (please specify)	10/12/2017	\$1,000.00
Full Name Acadia Healthcare Company, Inc. FEDPAC		
Mailing Address 6100 Tower Cir Ste 1000		
City, State, Zip Code Franklin, TN 37067-1509		
Name of Employer (Required)	Aggreg Year-to-	ate \$1,000.0
Occupation (Required)	Tear-to-	

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Name of Candidate or Committee Reporting Period 01/01/2017

Friends Of Tate Reeves

12/31/2017 \_ through \_

ITEMIZED RECEIPTS	Date (Mo., Day	∍	mount of each receipt this period
Source: Corporation LLC			\$1,000.00
Other (please specify)	10/16/201	17	
Full Name Kinetic Staffing, LLC			
Mailing Address PO Box 55914			
City, State, Zip Code Jackson, MS 39296-5914			
Name of Employer (Required)	Aggi Year-	egate to-date	\$1,000.00
Occupation (Required)		ate	Amount of each receipt
Source: ☐ Corporation ☐ PAC 描 Individual ☐ Loan		)ay, Year)	this period
Other (please specify)	10/16/	2017	\$1,000.00
Full Name John Lundy			
Malling Address 458 Greenwood Lane			
City, State, Zip Code Ridgeland, MS 39157-4000			
Name of Employer (Required) Capitol Resources	A	ggregate ar-to-date	\$1,000.00
Occupation (Required)  Partner		Date ., Day, Year)	Amount of each receipt this period
Source: Torporation	OW)	., Day, Tour,	\$1,000.00
Other (please specify)	10/0	)5/2017	\$1,000.00
Full Name Enova			<u> </u>
Mailing Address 175 W. Jackson Blvd STE 1000			<u> </u>
City, State, Zip Code Chicago, IL 60604-2863			
Name of Employer (Required)		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date No., Day, Year	Amount of each receipt this period
Source:	<del></del> +	1/16/2017	\$5,000.00
Full Name Peyton Self III		1/10/2011	
Mailing Address PO Box 367			
City, State, Zip Code Marks, MS 38646-0367			
Name of Employer (Required) Self & Company Gins		Aggregate Year-to-dat	\$5,000.00 te
Occupation (Required) Executive		1601-10-00	

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	Friends Of Tate Reeves		
Name of Candidate or Committee	through12/31/2017		
Reporting Period 01/01/2011	CEIDTC		

ITEMIZED RECEIPT	Date (Mo., Day, Year)	Amount of each receipt this period
Cource: LI Corporation  LLC  Other (please specify)	09/26/2017	\$1,000.00
Full Name The Corbitt Company, LLC	1	
Mailing Address PO Box 14225		
City, State, Zip Code Jackson, MS 39236-4225		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	04/03/2017	\$250.00
Full Name Andy Anderson  Mailing Address 525 Parkway Ave		
City, State, Zip Code Rolling Fork, MS 39159-5101		
Name of Employer (Required) Bank of Anguilla	Aggregate Year-to-date	\$250.00
Occupation (Required)  President and CEO  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	12/03/2017	\$500.00
Full Name George Jones		
Mailing Address 1603 Girvan Court		
City, State, Zip Code Ocean Springs, MS 39564-3446		
Name of Employer (Required) Huntington Ingalls Industries	Aggregate Year-to-date	\$500.00
Occupation (Required)  Vice President of Operations  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Ye	Amount of each receipt this period
Other (please specify)	10/03/2017	\$1,000.00
Full Name Nicholas H. Manley		
Mailing Address 2470 Cumberland Drive		
City, State, Zip Code Southaven, MS 38672-7123		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggregat Year-to-da	e \$1,000.0

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Name of Candidate or Committee	Friends Of Tate Reeves through 12/31/2017	
Reporting Period 01/01/2017	ITEMIZED RECEIPTS	

	Amount of each
Date (Mo., Day, Year)	receipt this period
10/04/2017	\$5,000.00
1	
Aggregate Year-to-date	\$5,000.00
Date (Mo., Day, Year)	Amount of each receipt this period
12/07/2017	\$1,000.00
Aggregate Vegeto-date	\$1,000.00
Date (Mo., Day, Year)	Amount of each receipt this period
10/16/2017	\$10,000.00
	<u> </u>
Aggregate Year-to-date	\$10,000.00
Date	Amount of each receipt r) this period
10/25/2017	\$1,000.00
	Date (Mo., Day, Year)  10/04/2017  Aggregate Year-to-date  Date (Mo., Day, Year)  Aggregate Year-to-date  Aggregate Year-to-date  Date (Mo., Day, Year)  10/16/2017  Aggregate Year-to-date  Date (Mo., Day, Year)  10/16/2017

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	Friends Of Tate Reeves		
Name of Candidate or Committee 01/01/2017	through12/31/2017		
- Gran Boriod Uliotizati			

Reporting Period ITEMIZED RECEIP	Į	Date Day, Year)	Amount of each receipt this period
Source: Corporation	<del>-</del>		\$1,000.00
Other (please specify)  Full Name C. D. Simmons III		4/2017	
Mailing Address PO Box 65			
City, State, Zip Code Arcola, MS 38722-0065		Aggregate	\$1,000.00
Name of Employer (Required) Farmer	\ ,	Aggregate /ear-to-date	
Occupation (Required)  Self  Source:  Corporation  PAC  Individual  Loan	(n	Date No., Day, Year)	Amount of each receipt this period
Source: Corporation  Other (please specify)	1	0/02/2017	\$1,000.00
Full Name Anna H. Watson			
Mailing Address 177 Harper St.			
City, State, Zip Code Ridgeland, MS 39157-8675			
Name of Employer (Required) Butler Snow Omara Stevens & Cannada		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Attorney  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Year	Amount of each receipt this period
Source:		10/18/2017	\$3,000.00
Full Name Cerner Corporation PAC		10.11	
Malling Address 2800 Rockcreek Pkwy			
City, State, Zip Code Kansas City, MO 64117-2521			
Name of Employer (Required)		Aggregate Year-to-dat	e
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Yo	Amount of each receipt
Source:		11/07/2017	\$1,000.00
Full Name Lake Garner		-	
Mailing Address 98 Waterford Drive		-	
City, State, Zip Code Hattiesburg, MS 39402-2927			
Name of Employer (Required) Self		Aggrega Year-to-	ate \$1,000.00
Occupation (Required)  Dentist			

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lame of Candidate or Committee	Friends Of Tate Reeves	12/31/2017	
Reporting Period 01/01/2017	through		

ITEMIZED RECEIP	Date	Amount of each receipt
urce: 🛘 Corporation 🖺 PAC 🔲 Individual 🔲 Loan	(Mo., Day, Year)	this period
Other (please specify)	10/11/2017	\$5,000.00
II Name Mississippi Medical PAC -State		<u> </u>
PO Box 2548		
ny, State, Zip Code Ridgeland, MS 39158-2548		
ame of Employer (Required)	Aggregate	\$7,500.00
ccupation (Required)	Year-to-date	Amount of each
Source: 🗆 Corporation 🗀 PAC 🏲 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/11/2017	\$5,000.00
Full Name Chip Crane II		
Mailing Address PO Box 428		
City, State, Zip Code Fulton, MS 38843-0428		
Name of Employer (Required) F.L. Crane & Sons, Inc.	Aggregate Year-to-date	\$5,000.00
Occupation (Required)  CEO  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	09/22/2017	\$1,000.00
Full Name Thomas M. Duff		
Mailing Address 73 Tidewater Rd		
City, State, Zip Code Hattiesburg, MS 39402-9780		
Name of Employer (Required) T L Wallace Construction	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Executive  Source:   Corporation   PAC   Individual   Loan	Date (Mo., Day, Yea	Amount of each receipt r) this period
Other (please specify)	12/13/2017	\$5,000.0
Full Name Mississippi Power Company State PAC	12/10/201	
Mailing Address PO Box 4079		
City, State, Zip Code Gulfport, MS 39502-4079		
Name of Employer (Required)	Aggregate	
Occupation (Required)	Year-to-da	<u> </u>

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Name of Candidate or Committee Friends O	Tate Reeves	12/31/2017		
Reporting Period	through	12/31/2017		

ITEMIZED RECEIP	Date	Amount of each receipt
urce: 🛎 Corporation 🔲 PAC 🔲 Individual 🔲 Loan	(Mo., Day, Year)	this period
Other (please specify)	10/16/2017	\$1,000.00
II Name The Heidelberg Group, Inc.		
ailing Address 685 Woodland Drive		
ty, State, Zip Code Yazoo City, MS 39194-9710		
ame of Employer (Required)	Aggregate	\$1,000.00
ccupation (Required)	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan PLLC	Date (Mo., Day, Year)	receipt this period
Tull Name Wier Boerner Allin Architecture, PLLC	09/19/2017	\$1,000.00
Mailing Address 2727 Old Canton Road STE 200		
City, State, Zip Code Jackson, MS 39216-4310		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	04/21/2017	\$500.00
Full Name Michael W. Sanders Jr.		
Mailing Address 535 Hillcrest Circle		
City, State, Zip Code Cleveland, MS 38732-2009		
Name of Employer (Required) Sanders Inc	Aggregate Year-to-date	\$500.00
Occupation (Required)  Executive  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Yea	Amount of each receipt this period
Other (please specify)	10/30/2017	\$5,000.00
Full Name John M. Hairston		
Mailing Address 9114 Victoria Circle		
City, State, Zip Code Gulfport, MS 39503-6140		
Name of Employer (Required) Hancock Bank	Aggregate	
Occupation (Required) President	Year-to-da	te

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lame of Candidate or Committee	Friends Of Tate Reeves		
Reporting Period01/01/2017			

Ource: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/13/2017	\$500.00
ull Name Walter M. Denny Jr.	10/13/2017	
lailing Address 800 Woodlands Parkway Suite 118		
ity, State, Zip Code Ridgeland, MS 39157-5200		
lame of Employer (Required) Barksdale Management	Aggregate	\$500.00
Occupation (Required)	Year-to-date	Amount of each
Source: 🗆 Corporation 🔲 PAC 🖺 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	12/05/2017	\$1,000.00
Full Name Billy F. Thornton		
Mailing Address PO Box 4079		
City, State, Zip Code Gulfport, MS 39502-4079		
Name of Employer (Required) Mississippi Power	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Vice President, Legislative & Regulatory Affairs  Source:   Corporation  PAC  Individual  Loan  LLC	Date (Mo., Day, Year	
Other (please specify)	10/16/2017	\$500.00
Full Name Armstrong and Associates LLC		
Mailing Address 113 Park Avenue		
City, State, Zip Code Madison, MS 39110-8430		
Name of Employer (Required)	Aggregate Year-to-date	\$500.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Ye	Amount of each receipt
Other (please specify)	09/26/2017	\$250.0
Full Name James W Rawlings		
Mailing Address 521 Louisiana Avenue		
City, State, Zip Code McComb, MS 39648-4032		
Name of Employer (Required) City of McComb	Aggrega	te \$250.
Occupation (Required) Mayor	Year-to-d	ate

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Name of Candidate or Committee	Friends Of Tate Reeves 12/31/2017	
Reporting Period 01/01/2011	TENUZED PECEIPTS	

DUTCE: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/16/2017	\$1,000.00
II Name Inside Capitol LLC		
alling Address 1888 Main St. STE C		
ty, State, Zip Code Madison, MS 39110-6337		
ame of Employer (Required)	Aggregate	\$1,000.00
ccupation (Required)	Year-to-date	Amount of each
Source: 🗆 Corporation 🖺 PAC 🗀 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/12/2017	\$3,000.00
Full Name Teladoc, Inc PAC		
Mailing Address 28 Liberty Ship Way Ste 2815		
City, State, Zip Code Sausalito, CA 94965-3321		
Name of Employer (Required)	Aggregate Year-to-date	\$12,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	11/06/2017	\$3,000.00
Full Name Troy S. Griffin		
Mailing Address PO Box 188		
City, State, Zip Code Braxton, MS 39044-0188		
Name of Employer (Required) Self	Aggregate Year-to-date	\$3,000.00
Occupation (Required)  CPA  Source: Corporation PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt this period
Other (please specify)	10/06/2017	\$1,000.0
Full Name Alliance Health Center	10/00/2017	
Mailing Address 50000 Highway 39 North		
City, State, Zip Code Meridian, MS 39301		
Name of Employer (Required)	Aggregate	\$1,000.
Occupation (Required)	Year-to-dat	e \$1,000.

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Name of Candidate or Committee	Friends Of Tate Reeves 12/31/2017		
Reporting Period 01/01/2011	TEMIZED RECEIPTS		

ITEMIZED RECEIPTS	Date	Amount of each receipt
ource: 🗆 Corporation 🗀 PAC 🖆 Individual 🗀 Loan	(Mo., Day, Year)	this period
Other (please specify)	09/19/2017	\$500.00
Full Name H. Larry Fortenberry		
Mailing Address PO Box 16566		
City, State, Zip Code Jackson, MS 39236-6566		
Name of Employer (Required) Executive Planning Group	Aggregate Year-to-date	\$500.00
Occupation (Required) Insurance Broker		Amount of each
Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/11/2017	\$2,500.00
Full Name James L. Barksdale		
Mailing Address 111 Green Drive		
City, State, Zip Code Jackson, MS 39211-6457		
Name of Employer (Required) Self	Aggregate Year-to-date	\$2,500.00
Occupation (Required)  Investor  Source: Corporation PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt this period
Other (please specify)	09/11/2017	\$250.00
Full Name Bruce D. Walt	00.1	
Mailing Address 108 Hickory Cove		
City, State, Zip Code Brandon, MS 39047-8311		
Name of Employer (Required) Horne	Aggregate Year-to-da	te
Occupation (Required)  CPA  Source: Corporation PAC Individual Loan	Date (Mo., Day, Y	Amount of each receipt ear) this period
Other (please specify)	12/31/2017	\$1,000.00
Full Name Michael William Chancellor		
Mailing Address 1228 West 5th St		
City, State, Zip Code Laurel, MS 39440-3808		
Name of Employer (Required) Chancellor, Inc.	Aggreg	ate \$1,000.0

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Friends Of Tate Reeves			
lame of Candidate or Committee	12/31/2017		
Reporting Period throu			

ITEMIZED RECEIPTS		Amount of each
ource: 🗆 Corporation 🖺 PAC 🗀 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	08/15/2017	\$5,000.00
ull Name Baker Donelson Mississippi PAC	1	
Mailing Address PO Box 14167		
City, State, Zip Code Jackson, MS 39236-4167		
Name of Employer (Required)	Aggregate	\$5,000.00
Occupation (Required)	Year-to-date	Amount of each
Source: 🖺 Corporation 🔲 PAC 🔲 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/12/2017	\$833.00
Full Name Deviney Equipment		
Malling Address PO Box 7179		
City, State, Zip Code Jackson, MS 39282-7179		
Name of Employer (Required)	Aggregate Year-to-date	\$833.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)	10/14/2017	\$1,000.00
Full Name Barry Eskridge		
Mailing Address 885 Scotland Road		
City, State, Zip Code Winona, MS 38967-9744		
Name of Employer (Required) MedStat EMS	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Owner  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Ye	Amount of each receipt ar) this period
Other (please specify)	11/29/2017	\$1,000.00
Full Name John M Harral		
Mailing Address PO Box 4248		
City, State, Zip Code Gulfport, MS 39502-4248		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggrega	te \$1,000.0

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	Friends Of Tate Reeves		
Name of Candidate or Committee	through	12/31/2017	
Reporting Period01/01/2017			

ITEMIZED RECEIPT	Date	Amount of each
ource: 🗌 Corporation 🔲 PAC 🖺 Individual 🔲 Loan	(Mo., Day, Year)	receipt this period
Other (please specify)	12/11/2017	\$500.00
II Name Nicole Faulk		
ailing Address 645 2nd Street		
gulfport, MS 39501-2208		
ame of Employer (Required) MS Power Co	Aggregate	\$500.00
ccupation (Required) Vice President	Year-to-date	Amount of each
Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	11/14/2017	\$5,000.00
Donna E. Roberts		
Malling Address 503 N Lamar Boulevard  City, State, Zip Code Oxford, MS 38655-3205		
Name of Employer (Required)  N/A	Aggregate	pr. 000 00
(Demirod)	Year-to-date	\$5,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/02/2017	\$1,000.00
Full Name Lucien L Bourgeois		
Malling Address 102 Fenwick Circle		
City, State, Zip Code Madison, MS 39110-7782		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggregate	\$1,000.00
Occupation (Required) Attorney	Year-to-date	Amount of each
Source: 🗆 Corporation 🔲 PAC 🖺 Individual 🔲 Loan	Date (Mo., Day, Yea	receipt r) this period
Other (please specify)	04/18/2017	\$500.00
Full Name William P. Litton III		
Malling Address 619 Aubrey Circle South		
City, State, Zip Code Greenwood, MS 38930-2403		
Name of Employer (Required) Wade, Inc.	Aggregate	
Occupation (Required) CFO	Year-to-dat	е

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Name of Candidate or Committee	Friends Of Tate Reeves  through 12/31/2017	
Reporting Period 07/01/2017	CEIDTC	

ITEMIZED RECEIP	Date	Amount of each receipt
ource: 🔲 Corporation 🔲 PAC 🖺 Individual 🔲 Loan	(Mo., Day, Year)	this period
Other (please specify)	12/13/2017	\$1,000.00
ull Name Jonathan P. Dyal		
lailing Address 9360 Oak Island Road		
ity, State, Zip Code Gulfport, MS 39503-7054		
ame of Employer (Required) Balch & Bingham LLP	Aggregate	\$1,000.00
Occupation (Required) Attorney	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	12/07/2017	\$2,500.00
Full Name Michael Wren		
Malling Address 302 Lynwood Circle		
City, State, Zip Code Long Beach, MS 39560-4420		
Name of Employer (Required) Retired	Aggregate Year-to-date	\$2,500.00
Occupation (Required)  N/A  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	12/18/2017	\$5,000.00
Full Name Mcright Services, LLC		
Mailing Address PO Box 4812		
City, State, Zip Code Greenville, MS 38704-4812		
Name of Employer (Required)	Aggregate Year-to-date	\$7,500.00
Occupation (Required)  Source: Corporation PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt this period
Other (please specify)	08/30/2017	\$500.00
Full Name Ann Cleland	Uoi3Ui2U11	
Mailing Address 603 Davis Street Apt. 1511		
City, State, Zip Code Austin, TX 78701-4249		
Name of Employer (Required) Horne LLP	Aggregate	\$500.0
Occupation (Required)	Year-to-dat	

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Name of Candidate or Committee Reporting Period 01/01/2017

Friends Of Tate Reeves

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12/31/2017

Corporation PAC  Other (please specify)  Full Name James Y Palmer  Mailing Address 8 Abbey Nord Place  City, State, Zip Code Jackson, MS 39216-3743  Name of Employer (Required) Coker Palmer  Occupation (Required) Advisor	09/20/2017  Aggregate Year-to-date	\$1,000.00	<u></u>
Mailing Address 8 Abbey Nord Place  City, State, Zip Code Jackson, MS 39216-3743  Name of Employer (Required) Coker Palmer  Occupation (Required) Advisor	Aggregate Year-to-date	\$1,000.0	
City, State, Zip Code  Jackson, MS 39216-3743  Name of Employer (Required)  Coker Palmer  Occupation (Required)  Advisor	Aggregate Year-to-date	\$1,000.0	
Name of Employer (Required) Coker Palmer  Occupation (Required) Advisor	Aggregate Year-to-date	\$1,000.0	
Occupation (Required) Advisor	Aggregate Year-to-date	\$1,000.0	<del></del> -1
	\ '		
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period	
Other (please specify)	12/01/2017	\$5,000	.00
Full Name Tourism Mississippi PAC  Mailing Address 103 W Washington St Ste B6			
City, State, Zip Code Ridgeland, MS 39157-2427			
Name of Employer (Required)	Aggregate Year-to-date	\$5,00	0.00
Occupation (Required)  Source: Torporation PAC Individual Loan	Date (Mo., Day, Ye	Amount of ea receipt	
Source:	08/29/2017	\$1,0	00.00
Full Name Regions			
Malling Address 1900 5th Avenue N Floor 6			
City, State, Zip Code Birmingham, AL 35203-2610			
Name of Employer (Required)	Aggrega Year-to-d	late	00.00
Occupation (Required)  Source: Corporation PAC Individual Loan	Date (Mo., Day,		t
Other (please specify)	04/03/2017	7 \$1	1,000.00
Full Name B. Bryan Jones III			
Mailing Address PO Box 1062			
City, State, Zip Code Yazoo City, MS 39194-1062			
Name of Employer (Required) Self  Occupation (Required) Farmer	Aggre Year-to	egate ·	\$1,000.0

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Committee	Friends Of Tate Reeves		
Name of Candidate or Committee	through	12/31/2017	
Reporting Period	<del>-</del>		•

ITEMIZED RECEIPTS	<del></del>	Amount of each
Source: 🗌 Corporation 🔲 PAC 🖺 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/16/2017	\$2,500.00
Full Name Wesley Goings III		
Mailing Address 101 Kirkwood Court		
City, State, Zip Code Jackson, MS 39211-6062	-	
Name of Employer (Required) CSpire	Aggregate	\$2,500.00
Occupation (Required) Executive	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	09/18/2017	\$1,000.00
Full Name Robert Morrison III		
Mailing Address 3330 Indiana Avenue		
City, State, Zip Code Vicksburg, MS 39180-4541		
Name of Employer (Required) Morrison Oil	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Executive  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)	09/16/2017	\$500.00
Full Name Rodney C Richardson		
Mailing Address 3823 23rd Ave		
City, State, Zip Code Meridian, MS 39305-3842		
Name of Employer (Required) Self	Aggregate Year-to-date	9
Occupation (Required)  Dentist  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Ye	Amount of each receipt this period
Other (please specify)	10/16/2017	\$1,000.00
Full Name Belk Investments LLC		
Mailing Address 21481 Old River Road		
City, State, Zip Code Vancleave, MS 39565-8922		
Name of Employer (Required)	Aggrega Year-to-d	te \$1,000.00

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Friends Of Tate Reeves		
through	12/31/2017	<del></del>

Name of Candidate or Committee Reporting Period 01/01/2017

ITEMIZED RECEIPTS	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)		\$2,500.00
Name Rebecca Jones Jaeger	11/07/2017	
iling Address 15401 Milloit Lane S.	_	
ty, State, Zip Code Covington, LA 70433-6871	_	
me of Employer (Required) Marko Enterprise LLC	Aggregate	\$2,500.00
ccupation (Required) Executive	Year-to-date	Amount of each
Source: 🗆 Corporation 🗀 PAC 🖺 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	11/28/2017	\$250.00
Full Name Denise Doyle		
Malling Address 6505 Shore Drive		
City, State, Zip Code Ocean Springs, MS 39564-2521		
Name of Employer (Required) Continuing Professional Education Associate	Aggregate	\$250.00
Occupation (Required) Steve Passin & Associates  Source:   Corporation   PAC  Individual  Loan	Year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	09/24/2017	\$10,000.00
Full Name Billy S Oubre	0072 1120	
Mailing Address PO Box 464		
City, State, Zip Code Marion, MS 39342-0464		
Name of Employer (Required) Oubre Partners LP	Aggregate Year-to-date	\$10,000.00
Occupation (Required)  Executive  Source: Corporation PAC Individual Loan	Date (Mo., Day, Ye	Amount of each receipt
Other (please specify)	09/21/2017	\$1,000.0
Full Name Pigott Oil, Inc.		
Mailing Address PO Box 229		
City, State, Zip Code Tylertown, MS 39667-0229		
Name of Employer (Required)	Aggregat Year-to-da	

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ame of Candidate or Committee	Friends Of Tate Reeves	12/31/2017	t
tenorting Period 01/01/2017	(IIIOugi.		

ITEMIZED RECEIPTS		Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/09/2017	\$1,000.00
The Hurst Group LLC		
Mailing Address 1020 Highland Colony STE 1400		
City, State, Zip Code Ridgeland, MS 39157-2139		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)		Amount of each
Source: 🖺 Corporation 🔲 PAC 🔲 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	09/21/2017	\$5,000.00
Full Name Construction Services Inc.		
Mailing Address PO Box 5737		
City, State, Zip Code Meridian, MS 39302-5737		
Name of Employer (Required)	Aggregate Year-to-date	\$5,000.00
Occupation (Required)  Source: Torporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt  this period
Source: Corporation  Other (please specify)	09/25/2017	\$1,000.00
Full Name PhRMA	09/25/2017	
Mailing Address 950 F Street NW Suite 300		
City, State, Zip Code Washington, DC 20004-1440		
Name of Employer (Required)	Aggregate Year-to-dat	e
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Yo	Amount of each receipt ear) this period
Other (please specify)	08/29/2017	\$1,000.00
Full Name James K Williams	00,20.	
Malling Address 2030 Eastover Drive		
City, State, Zip Code Jackson, MS 39211-6717		
Name of Employer (Required) Greenover Managers LLC	Aggrega	ate \$1,000.0
Occupation (Required) Executive	Year-to-0	1916

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Name of Candidate or Committee	Friends Of Tate Reeves through12/31/2017		
Reporting Period 01/01/2011	DECEIDTS		

TEMIZED RECEIF  Ource: □ Corporation □ PAC □ Individual □ Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/02/2017	\$1,000.00
III Name R. Wilson Montjoy II		
alling Address 202 Agency Burn		
ty, State, Zip Code Ridgeland, MS 39157-9740		
ame of Employer (Required)  Butler Snow Omara Stevens & Cannada	Aggregate	\$1,000.00
ccupation (Required) Attorney	Year-to-date	Amount of each
Source: 🗆 Corporation 🗀 PAC 🖺 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	12/01/2017	\$1,000.00
Full Name William Lucien Smith II		
Mailing Address 1716 Lyncrest Ave		
City, State, Zip Code Jackson, MS 39202-1225		
Name of Employer (Required) Balch & Bingham LLP	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Partner  Source: Corporation PAC Individual Conduction	Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)	11/09/2017	\$10,000.00
Full Name Edward L. Rispone		
Mailing Address 18250 S. Mission Hills Ave		
City, State, Zip Code Baton Rouge, LA 70810-7974		
Name of Employer (Required) ISC Constructors LLC  Occupation (Required) Chairman	Aggregate Year-to-date	\$10,000.00
Occupation (Required) Chairman  Source: Corporation PAC Individual Loan	Date (Mo., Day, Ye	Amount of each receipt this period
Other (please specify)	10/12/2017	\$1,000.0
Full Name Valley Services, Inc.	(Or LETZO 17	
Mailing Address 775 Woodlands Pkwy STE 100		
City, State, Zip Code Ridgeland, MS 39157-5214		
Name of Employer (Required)	Aggregat	e \$1,000.
Occupation (Required)	Year-to-da	

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Name of Candidate or Committee Reporting Period 01/01/2017

Friends Of Tate Reeves

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12/31/2017

ITEMIZED RECEIP		Date ., Day, Year)	Amount of each receipt this period
Source: Corporation PAC	<del></del>	2/2017	\$250.00
Full Name Alben Norris Hopkins Jr.	121	2/2017	
Mailing Address 2701 24th Ave			
City, State, Zip Code Gulfport, MS 39501-4941			
Name of Employer (Required) Hopkins, Barvie, and Hopkins PLLC		Aggregate Year-to-date	\$250.00
Occupation (Required)  Attorney  Source:   Corporation PAC Individual Loan		Date Mo., Day, Year)	Amount of each receipt this period
Other (please specify)		0/16/2017	\$2,500.00
Malling Address PO Box 217			
City, State, Zip Code Jackson, MS 39205-0217			
Name of Employer (Required)		Aggregate Year-to-date	\$2,500.00
Occupation (Required)  Source: T Corporation PAC Individual Loan		Date (Mo., Day, Year	Amount of each receipt this period
Source: Carporation  Other (please specify)		10/16/2017	\$1,000.00
Full Name Climate Master, Inc.			
Mailing Address PO Box 6276			
City, State, Zip Code Pearl, MS 39288-6276			
Name of Employer (Required)		Aggregate Year-to-dat	e
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Y	Amount of each receipt
Close (please specify)		10/16/2017	\$2,500.00
Full Name Home Builders Association of Mississippi (Build PAC)		10/10/25	
Mailing Address 290 Commerce Park Dr Ste B			
City, State, Zip Code Ridgeland, MS 39157-2241			
Name of Employer (Required)		Aggreg Year-to-	ate \$2,500.00
Occupation (Required)		Year-to-	

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Name of Candidate	or Committee
	01/01/2017
Reporting Period	

Friends Of Tate Reeves

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12/31/2017

Reporting Period 01/01/2017 ITEMIZED RECEIPT	S		Amount of each
PAC Individual I Loan	1	Date , Day, Year)	receipt this period
Source: Corporation  Other (please specify)	06/2	0/2017	\$1,000.00
Full Name Walgreens			
Malling Address 104 Wilmot Road # 1415			
City, State, Zip Code Deerfield, IL 60015-5121			
Name of Employer (Required)		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date No., Day, Year)	Amount of each receipt this period
Source:	1	2/13/2017	\$1,000.00
Full Name Ricky J. Cox			
Mailing Address 21 Colonel Wink Drive			
City, State, Zip Code Gulfport, MS 39507-4252			
Name of Employer (Required) Balch & Bingham		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Managing Partner  Source:   Corporation   PAC   Individual   Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Source: LI Corporation  LLC  Other (please specify)		09/21/2017	\$1,000.00
Full Name Carley-Enterprises LLC			
Mailing Address 104 Eli Pigott Road			
City, State, Zip Code Tylertown, MS 39667-7181			
Name of Employer (Required)		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Yea	Amount of each receipt
Source:		12/11/2017	\$1,000.00
Full Name Stephen L. Oseman		1211111111	
Mailing Address 6750 Poplar Avenue STE 410			
City, State, Zip Code Memphis, TN 38138-7443			
Name of Employer (Required) Oseman Insurance Agency		Aggregat Year-to-da	te \$1,000.00
Occupation (Required) President		, 00.	

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oitto	Friends Of Tate Reeves	
Name of Candidate or Committee	through12/31/2017	
Reporting Period	DECEIDTS	

ITEMIZED RECEIPT	Date	Amount of each
source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan LP	(Mo., Day, Year)	this period
Other (please specify)	11/30/2017	\$1,000.00
Mailing Address P.O. Box 820768		
City, State, Zip Code Vicksburg, MS 39182-0768		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)		Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	09/26/2017	\$10,000.00
Full Name E. Bruce Martin		
Mailing Address PO Box 1729		
City, State, Zip Code Meridian, MS 39302-1729		
Name of Employer (Required) Rosenbaum Insurance	Aggregate Year-to-date	\$10,000.00
Occupation (Required)  Insurance Agent  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)	11/21/2017	\$1,000.00
Full Name EMS Management, LLC		
Mailing Address 6363 S Fiddlers Green Cr MS 14th FL		
City, State, Zip Code Greenwood Village, CO 80111-5011		
Name of Employer (Required)	Aggregate Year-to-dat	e
Occupation (Required)  Source: Corporation PAC Individual Loan	Date (Mo., Day, Yo	Amount of each receipt ear) this period
Other (please specify)	12/15/2017	\$1,000.00
Full Name Palladium Hospice	120 130	
Mailing Address 1001 Hawkins St.		
City, State, Zip Code Nashville, TN 37203-4758		
Name of Employer (Required)	Aggrega Year-to-0	ate \$1,000.0
Occupation (Required)	Year-to-c	

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o umittoo	Friends Of Tate Reeves	104/0047	
Name of Candidate or Committee	through	12/31/2017	
Benerting Period -			

ITEMIZED RECEIP	TS 	Amount of each
Source: 🔲 Corporation 🔲 PAC 🛅 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period
Source: LI Corporation  Other (please specify)	09/21/2017	\$500.00
Full Name Waymon Tigrett		
Mailing Address PO Box 395		
City, State, Zip Code Brandon, MS 39043-0395		
Name of Employer (Required) Brandon Discount Drugs	Aggregate Year-to-date	\$500.00
Occupation (Required) Pharmacist		Amount of each receipt
Source: 🔲 Corporation 🖺 PAC 🔲 Individual 🔲 Loan	Date (Mo., Day, Year)	this period
Other (please specify)	11/06/2017	\$1,000.00
Full Name Mississippi Association for Home Care State PAC		
Mailing Address 134 Fairmont St Ste B		
City, State, Zip Code Clinton, MS 39056-4739		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC Individual Other (please specify)	10/10/2017	\$1,000.00
Full Name Property Casualty Insurers Association of America PAC	10/10/2011	
Mailing Address 2600 S River Rd		
City, State, Zip Code Des Plaines, IL 60018-3203		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source: Corporation PAC Individual Loan	Date (Mo., Day, Ye	Amount of each receipt
Source: Li Corporation  Other (please specify)	10/16/2017	\$500.00
Full Name Gulf Guaranty Life Insurance Company		
Mailing Address PO Box 12409		
City, State, Zip Code Jackson, MS 39236-2409		
Name of Employer (Required)	Aggrega Year-to-d	te \$500.00
Occupation (Required)	Tour to u	

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Name of Candidate or Committee	Friends Of Tate Reeves through 12/31/2017	
Reporting Period 01/01/2017	(mough	0

ITEMIZED RECEIP		Amount of each
ource: 🗆 Corporation 🗈 PAC 🗀 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	08/24/2017	\$1,000.00
uli Name Truck PAC		
Malling Address 825 N President St		
ity, State, Zip Code Jackson, MS 39202-2561		
lame of Employer (Required)	Aggregate	\$1,000.00
Occupation (Required)	Year-to-date	Amount of each
Source: 🖺 Corporation 🔲 PAC 🔲 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	05/25/2017	\$1,000.00
Full Name BNSF Railway Company		
Malling Address 5280 E Shelby Drive		
City, State, Zip Code Memphis, TN 38118-7503		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/11/2017	\$833.00
Full Name Deviney Construction Company, Inc.	10.7.7.2	
Malling Address PO Box 6717		
City, State, Zlp Code Jackson, MS 39282-6717		
Name of Employer (Required)	Aggregate Year-to-date	\$833.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)	09/18/2017	\$500.00
Full Name Phyllis Y. Cade	05, 15,25	
Mailing Address 177 Phillips Hill Road		
City, State, Zip Code Columbus, MS 39702-8297		
Name of Employer (Required) N/A	Aggregate	\$500.00
Occupation (Required) Retired	Year-to-date	

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Friends	Of Tate Reeves			
Name of Candidate or Committee 01/01/2017	through	12/31/2017		
Penorting Period				

ITEMIZED RECEIPTS		Amount of each
Source: 🔲 Corporation 🔲 PAC 🖺 Individual 🔲 Loan	(Mo., Day, Year)	receipt this period
Other (please specify)	11/02/2017	\$250.00
Robbie W. Hughes		
Mailing Address 200 Dominican Drive #2308		
City, State, Zip Code Madison, MS 39110-8630		
Name of Employer (Required) N/A	Aggregate Year-to-date	\$250.00
Occupation (Required) Retired		Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Yea	
Other (please specify)	08/24/2017	\$2,500.00
Full Name Atmos Energy Corporation PAC		
Mailing Address 790 Liberty Rd		
City, State, Zip Code Flowood, MS 39232-9321		
Name of Employer (Required)	Aggregat Year-to-da	te \$2,500.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Y	Amount of each receipt
Source:	10/03/2017	\$1,000.00
Full Name Ryan Beckett		
Mailing Address 4166 Dogwood Drive		
City, State, Zip Code Jackson, MS 39211-6520		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggreg Year-to-	-date
Occupation (Required)  Attorney  Source:  Corporation PAC Individual Loan	Date (Mo., Day	Amount of each te receipt
Other (please specify)	09/21/201	\$1,000.0
Full Name Silver Slipper Casino Venture, LLC		
Mailing Address PO Box 3270		
City, State, Zip Code Bay Saint Louis, MS 39521-3270		
Name of Employer (Required)	Aggr	regate \$1,000.
Occupation (Required)	1 cal-	

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Name of Candidate or Committee	Friends Of Tate Reeves through	12/31/2017		

ITEMIZED RECEIP		Date ., Day, Year)	Amount of each receipt this period
ource: Corporation PAC Communication Cource: Other (please specify)		0/2017	\$1,000.00
Full Name Bully Bloc		10,2011	
Mailing Address PO Box 1591			
City, State, Zip Code Jackson, MS 39215-1591			
Name of Employer (Required)		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date No., Day, Year)	Amount of each receipt this period
Other (please specify)	1	0/16/2017	\$1,000.00
Full Name Treetop Midstream Services LLC  Malling Address 124 One Madison Plaza STE 2200			
City, State, Zip Code Madison, MS 39110-2022			
Name of Employer (Required)		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)		09/22/2017	\$1,000.00
Full Name B. Bryan Jones III			
Mailing Address PO Box 1062			
City, State, Zip Code Yazoo City, MS 39194-1062			
Name of Employer (Required) Self		Aggregate Year-to-date	\$2,000.00
Occupation (Required)  Farmer  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Ye	Amount of each receipt
Other (please specify)		10/16/2017	\$2,500.00
Full Name Brandon G Payne		1	
Mailing Address PO Box 6213		1	
City, State, Zip Code Gulfport, MS 39506-6213			
Name of Employer (Required) The Payne Group		Aggrega Year-to-d	te \$5,000.0

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L Of Tata Reeves	

Name of Candidate or Committee Reporting Period 01/01/2017

Friends Of Tate Reeves \_through \_

12/31/2017

PAC L'Individual L	Date Mo., Day, Year)	receipt this period
Source: LJ Corporation		\$1,000.00
	12/31/2017	
Full Name Jeremy Felder		
Mailing Address 1228 W 5th St		
City, State, Zip Code Laurel, MS 39440-3808  Name of Employer (Required) Chancellor Construction	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Vice President  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	11/10/2017	\$5,000.00
Malling Address PO Box 1237		
City, State, Zip Code Oxford, MS 38655-1237  Name of Employer (Required)	Aggregate Year-to-date	e
Occupation (Required)  Source: ** Corporation   PAC   Individual   Loan	Date (Mo., Day, Ye	Amount of each receipt
Other (please specify)	09/25/2017	\$250.00
Full Name Stevens Mechanical Systems, Inc.		
Mailing Address 110 Lone Wolf Drive		
City, State, Zip Code Madison, MS 39110-7028		
Name of Employer (Required)	Aggrega Year-to-d	iate
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day,	Amount of each receipt
Source: Corporation LLC  Other (please specify)	04/05/2017	7 \$1,000.0
Full Name Good Hope Peanuts LLC		
Mailing Address PO Box 1546		
City, State, Zip Code Yazoo City, MS 39194-1546	Aggre	egate \$1,000
Name of Employer (Required)  Occupation (Required)	Year-to	o-date

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lame of Candidate or Committee	Friends Of Tate Reeves through	12/31/2017		

Reporting Period			
ITEMIZED RECEIP I	- \	Date	Amount of each receipt this period
Source: Corporation PAC Mindividual Components	(Mo.	, Day, Year)	
Other (please specify)	04/2	5/2017	\$1,000.00
Full Name James H Lipscomb			
Mailing Address PO Box 636			
City, State, Zip Code Greenville, MS 38702-0636			
Name of Employer (Required) Lipscomb Oil Company		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  President  T RAC  Individual  Loan		Date No., Day, Year)	Amount of each receipt this period
Source: Corporation			
Other (please specify)	11	0/02/2017	\$10,000.00
Full Name Mississippi Health Care Association PAC, LLC			
Malling Address 303 Brame Rd			
City, State, Zip Code Ridgeland, MS 39157-9423			
Name of Employer (Required)		Aggregate Year-to-date	\$10,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Source: LI Corporation  LLC  Tother (please specify)		11/06/2017	\$5,000.00
Full Name Stribling Equipment, LLC		1 1100/20	
Mailing Address PO Box 6038			
City, State, Zip Code Jackson, MS 39288-6038		ļ	
Name of Employer (Required)		Aggregate Year-to-date	\$5,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Yea	Amount of each receipt  this period
Source: LI Corporation  LLC  Other (please specify)		09/22/2017	\$5,000.00
Full Name Prosperity PAC LLC			
Mailing Address P.O. Box 1869		-	
City, State, Zip Code Brandon, MS 39043-1869			
Name of Employer (Required)		Aggregat Year-to-da	e \$5,000.0
Occupation (Required)			<del></del>

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Friends Of Tate Reeves		
Name of Candidate or Committee through	12/31/2017	
Deporting Period		

ITEMIZED RECEIPTS	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC Comments of the Corporation Control Corporation Control Corporation Control Corporation Control Corporation Control Corporation Corporatio	12/12/2017	\$2,500.00
Full Name Ben Stone		
Mailing Address PO Box 130	1	
City, State, Zip Code Gulfport, MS 39502-0130	+	
Name of Employer (Required) Balch & Bingham LLP	Aggregate Year-to-date	\$2,500.00
Occupation (Required)  Attorney	Date	Amount of each receipt this period
Source: Corporation	(Mo., Day, Year)	
Other (please specify)	04/06/2017	\$500.00
Full Name Wade Litton		*Pr_
Mailing Address 110 E Wilson Avenue		<u> </u>
City, State, Zip Code Greenwood, MS 38930-2351		
Name of Employer (Required) Wade Incorporated	Aggregate Year-to-date	\$500.00
Occupation (Required)  CEO  PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period
Source: Corporation  Other (please specify)	10/03/2017	\$1,000.00
Full Name Intervest Corporation	10,000	
Mailing Address PO Box 2118		
City, State, Zip Code Madison, MS 39130-2118		
Name of Employer (Required)	Aggregate Year-to-dat	e
Occupation (Required)  Source: Corporation PAC Individual Loan	Date (Mo., Day, Yo	Amount of each receipt
Other (please specify)	11/07/2017	\$5,000.00
Full Name Goose Creek Mall, LLC		
Mailing Address 2302 Jackson Ave. West		
City, State, Zip Code Oxford, MS 38655-5416		
Name of Employer (Required)	Aggrega Year-to-0	ate \$5,000.00
Occupation (Required)	Year-to-t	

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	Friends Of Tate Reeves		
Name of Candidate or Committee	through 12/31/2017		`
- Hing Period			

ITEMIZED RECEIPTS	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation C PAC C IIII	11/09/2017	\$5,000.00
Full Name William G. Yates Jr.	11/09/2017	
Mailing Address PO Box 456		
City, State, Zip Code Philadelphia, MS 39350-0456		
Name of Employer (Required) Yates Construction	Aggregate	\$5,000.00
(Deguired)	Year-to-date	
Occupation (Required)  CEO  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Source:	12/07/2017	\$500.00
Full Name James H Heidelberg		
Mailing Address 1300 Driftwood Street		
City, State, Zip Code Pascagoula, MS 39567-7592		
Name of Employer (Required) Heidelberg Steinberger Colmer & Burrow, P.A.	Aggregate Year-to-date	\$1,500.00
Occupation (Required)  Attorney  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Yea	Amount of each receipt this period
Source: Corporation  Other (please specify)	11/10/2017	\$5,000.00
Full Name William G. Yates III	101020	
Mailing Address 2104 Ward Lane		
City, State, Zip Code Biloxi, MS 39531-2318		
Name of Employer (Required) Yates Construction	Aggregate Year-to-da	e
Occupation (Required)  Vice President  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Y	Amount of each receipt
Source: Corporation  Other (please specify)	11/07/2017	\$250.00
Full Name Michael B. Wood	1110112011	
Mailing Address 60 Baneberry Trace		
City, State, Zip Code Hattiesburg, MS 39402-6128		
Name of Employer (Required) Topp McWhorter Harvey LLC	Aggreg	ate \$250.0
Occupation (Required) CPA	Year-to-	ate

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•••	Friends Of Tate Reeves	
Name of Candidate or Committee	through12/31/201	17
Reporting Period		TO

Ource: Corporation PAC Individual Coan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/16/2017	\$10,000.00
ull Name George R. Walker III		
Mailing Address 4025 Eastover Drive		
Jackson, MS 39211-6612		
Name of Employer (Required) Heritage Properties	Aggregate	\$10,000.00
Occupation (Required) CEO	Year-to-date	Amount of each
Source: 🗆 Corporation 🗀 PAC 🖺 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	11/15/2017	\$5,000.00
Full Name Robert B. Nance		
Mailing Address 703 Muirfield Drive		
City, State, Zip Code Oxford, MS 38655-2605		
Name of Employer (Required) Nance Investment Company LLC	Aggregate	\$5,000.00
Occupation (Required)  Executive  Source:  Corporation PAC Individual Loan	Year-to-date  Date  (Mo., Day, Yea	Amount of each receipt this period
Source:		\$250.00
Full Name Aaron Samuels	08/31/2017	
Mailing Address 222 Brae Burn Dr.		
City, State, Zip Code Jackson, MS 39211-2504		
Name of Employer (Required) Horne	Aggregate Year-to-dat	e
Occupation (Required)  CPA  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Y	Amount of each receipt
Other (please specify)	09/12/2017	\$10,000.0
Full Name James Alexander	00.122	
Mailing Address PO Box 1265		
City, State, Zip Code Meridian, MS 39302-1265		
Name of Employer (Required) A & B Electric	Aggrega Year-to-0	
Occupation (Required) Owner	Teal-to-t	

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Name of Candidate or Committee	Friends Of Tate Reeves	12/31/2017	
Reporting Period			

ITEMIZED RECEIP	10	Amount of each
ource: 🗆 Corporation 🗀 PAC 🛅 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/17/2017	\$10,000.00
ull Name W. Mac Elliott		
Mailing Address PO Box 2387		
ity, State, Zip Code Madison, MS 39130-2387		
Name of Employer (Required) Self	Aggregate Year-to-date	\$10,000.00
Occupation (Required)  Private Investor  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Gother (please specify)  Full Name Empower PAC	08/10/2017	\$10,000.00
Malling Address PO Box 4028		
City, State, Zip Code Madison, MS 39130-4028		
Name of Employer (Required)	Aggregate Year-to-date	\$10,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/16/2017	\$1,000.00
Full Name KCS Rail PAC State PAC  Malling Address PO Box 219335		1
City, State, Zip Code Kansas City, MO 64121-9335		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)	10/16/2017	\$1,000.00
Full Name Buddy Medlin and Associates, Inc.		
Malling Address PO Box 24087		
City, State, Zip Code Jackson, MS 39225-4087		
Name of Employer (Required)	Aggregate	\$1,000.00
Occupation (Required)	Year-to-date	

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Name of Candidate or Committee	Friends Of Tate Reeves through 12/31/2017		
Reporting Period 01/01/2011	DECEIPTS		

ITEMIZED RECEIP	Date	Am	nount of each receipt
Source: 🔲 Corporation 🔲 PAC 🛅 Individual 🔲 Loan	(Mo., Day, Ye	ar)	this period
Other (please specify)	04/07/2017		\$1,000.00
Full Name Harry Simmons Jr.			
Mailing Address 2628 Erickson Road			
City, State, Zip Code Yazoo City, MS 39194-9457			
Name of Employer (Required) Simmons Farm Raised Catfish	Aggrega	te	\$1,000.00
Occupation (Required) Owner	Year-to-d	ate	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day,	Year)	receipt this period
Other (please specify)	11/16/2017	·	\$5,000.00
Full Name Gray Tollison for Senate			
Mailing Address PO Box 1216			
City, State, Zip Code Oxford, MS 38655-1216			
Name of Employer (Required)	Aggre Year-to	gate	\$6,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Da (Mo., Da	te	Amount of each receipt this period
Source: Li Corporation  Other (please specify)	04/18/20		\$500.00
Full Name Hue Townsend	04/10/23		
Malling Address 409 Lee Street			
City, State, Zip Code Belzoni, MS 39038-3707			
Name of Employer (Required) Guaranty Bank And Trust	Agg Year	regate -to-date	\$500.00
Occupation (Required)  Banker  Source:  Corporation PAC Individual Loan		Date Day, Year)	Amount of each receipt this period
Source:	09/28	/2017	\$500.00
Full Name E. B. Robinson Jr.			
Mailing Address 49 Eastbrook Street			
City, State, Zip Code Jackson, MS 39216-4714			
Name of Employer (Required) Retired		ggregate ear-to-date	\$500.00
Occupation (Required) N/A	Y		

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Friends Of Tate Reeves	40/24/2017		
through	12/31/2017		

Name of Candidate or Committee

Reporting Period 01/01/2017 through 12/31/20  ITEMIZED RECEIP	TS	Amount of each
ource: 🗆 Corporation 🗀 PAC 🖺 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/02/2017	\$1,000.00
ull Name Kathryn B Stewart		
Tailing Address 119 Shore Line Drive		
ity, State, Zip Code Madison, MS 39110-6829		
Butler Snow Omara Stevens & Cannada	Aggregate Year-to-date	\$1,000.00
Occupation (Required) Government Relations	Date	Amount of each receipt
Source: 🗆 Corporation 🖺 PAC 🗀 Individual 🔲 Loan	(Mo., Day, Year)	this period
Other (please specify)	12/07/2017	\$5,000.00
Full Name MAE PAC		
Mailing Address 600 Hogan St Ste 1C		
City, State, Zip Code Starkville, MS 39759-3384		
Name of Employer (Required)	Aggregate	\$5,000.00
Occupation (Required)	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Yea	receipt r) this period
Other (please specify)	11/09/2017	\$14,000.00
Full Name Joseph C Canizaro		
Mailing Address 909 Poydras Street Suite 1700		
City, State, Zip Code New Orleans, LA 70112-4010		
Name of Employer (Required) Columbus Communities LLC	Aggregate Year-to-da	
Occupation (Required)  CEO, President, Chairman  Source: Corporation PAC Individual Loan	Date (Mo., Day, Y	Amount of each receipt
Other (please specify)	09/11/2017	\$5,000.0
Full Name Robert Watson	03/10/2011	
Malling Address 6130 I 55 N		
City, State, Zip Code Jackson, MS 39211-2642		
Name of Employer (Required) Watson Quality Ford	Aggreg Year-to-	ate \$5,000.
Occupation (Required) Owner	Teal-to-	

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!#aa	Friends Of Tate Reeves
Name of Candidate or Committee	through through 12/31/2017
Reporting Period	- TOFIDTO

ITEMIZED RECEIPTS		Amount of each
Source: 🔲 Corporation 🖺 PAC 🔲 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/16/2017	\$1,000.00
Full Name Mississippi Road Builders Association PAC		
Mailing Address 601 George St		
City, State, Zip Code Jackson, MS 39202-3016		
Name of Employer (Required)	Aggregate	\$1,000.00
Occupation (Required)	Year-to-date	Amount of each
Source: Toopporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	09/22/2017	\$500.00
Full Name Tyson Foods, Inc.		
Mailing Address PO Box 2020		
City, State, Zip Code Springdale, AR 72765-2020		
Name of Employer (Required)	Aggregate Year-to-date	\$500.00
Occupation (Required)  Source: Corporation PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt this period
Source: Li Corporation  Other (please specify)		\$1,000.00
Full Name Cooper Tire & Rubber Company PAC	08/14/2017	
Malling Address PO Box 550		
City, State, Zip Code Findlay, OH 45839-0550		
Name of Employer (Required)	Aggregate Year-to-da	te
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day,	Amount of each receipt
Source: Gorphiadon  Other (please specify)	07/11/2017	\$2,500.00
Full Name David McRae		
Mailing Address 152 Green Glades		
City, State, Zip Code Ridgeland, MS 39157-8662		
Name of Employer (Required) Self	Aggreg Year-to-	tate \$2,500.00
		dato

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Name of Candidate or Commπee	Friends Of Tate Reeves  12/31/2017
Reporting Period01/01/2017	

ITEMIZED RECEIPTS	1	Amount of each
Source: 🗆 Corporation 🗀 PAC 🖺 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	08/31/2017	\$5,000.00
Full Name William A. Brown		
Mailing Address PO Box 16952		
City, State, Zip Code Jackson, MS 39236-6952		
Name of Employer (Required) Brown Bottling Group	Aggregate Year-to-date	\$5,000.00
Occupation (Required) CEO		Amount of each
Source: Torporation PAC Individual Loan	Date (Mo., Day, Year)	
Other (please specify)	11/30/2017	\$1,000.00
Full Name Exxon Mobil Corporation		
Mailing Address PO Box 2519		
City, State, Zip Code Houston, TX 77252-2519		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt
Source.  Tother (please specify)	10/16/2017	\$1,000.00
Full Name Gray Tollison for Senate	10/10/2011	
Mailing Address PO Box 1216		
City, State, Zip Code Oxford, MS 38655-1216		
Name of Employer (Required)	Aggregat Year-to-da	ite
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, \	Amount of each receipt (ear) this period
Other (please specify)	11/12/2017	\$300.00
Full Name Jack Muirhead		
Mailing Address 516 Silverstone Drive		
City, State, Zip Code Madison, MS 39110-7647		
Name of Employer (Required) Stribling Equipment	Aggreg Year-to-	gate \$300.00
Occupation (Required) Executive	real-to-	

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Name of Candidate or Committee	Friends Of Tate Reeves  12/31/2017 through
Reporting Period 01/01/2011	DECEIPTS

ITEMIZED RECEIPT	Date	Amount of each receipt
ource: 🗌 Corporation 🖺 PAC 🔲 Individual 🔲 Loan	(Mo., Day, Year)	this period
Other (please specify)	08/18/2017	\$5,000.00
Mississippi Association of Realtors PAC		
Malling Address PO Box 321000		
City, State, Zip Code Flowood, MS 39232-1000		
Name of Employer (Required)	Aggregate	\$5,000.00
Occupation (Required)	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan Candidate Campaign Committee	Date (Mo., Day, Year)	
Other (please specify)	10/16/2017	\$500.00
Full Name Committee to Elect Brice Wiggins		
Mailing Address PO Box 1877		
City, State, Zip Code Pascagoula, MS 39568-1877		
Name of Employer (Required)	Aggregate Year-to-date	\$500.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt
Source:	10/10/2017	\$1,000.00
Full Name Pete Johnson		
Mailing Address 405 Court Street		
City, State, Zip Code Clarksdale, MS 38614-2715		
Name of Employer (Required) Self	Aggregat Year-to-da	ite
Occupation (Required)  Attorney  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day,	Amount of each receipt this period
Source:	01/18/2017	\$9,000.00
Full Name Teladoc, Inc PAC	01710.2011	
Mailing Address 28 Liberty Ship Way Ste 2815		
City, State, Zip Code Sausalito, CA 94965-3321		
Name of Employer (Required)	Aggres Year-to	gate \$9,000.0
Occupation (Required)	1641-10	

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Name of Candidate or Committee	Friends Of Tate Reeves  12/31/2017 through		

eporting Period 01/01/2017 ITEMIZED RECEIPTS	S		
Florestan PAC Individual Loan	Date (Mo., Day,	<b>\</b>	nount of each receipt this period
Other (please specify)	10/10/2017		\$1,000.00
ull Name Omega Protein			
lailing Address 2105 Citywest Boulevard Suite 500			
ity, State, Zip Code Houston, TX 77042-2838			
lame of Employer (Required)	Aggre-	-date	\$1,000.00
Occupation (Required)  Source:   Corporation   PAC   Individual   Loan	Year-to-date  Date (Mo., Day, Year)		Amount of each receipt this period
Source:	09/29/20	)17	\$1,000.00
Full Name B. L. Walker			
Mailing Address 60 St. Andrews Place			
City, State, Zip Code Jackson, MS 39211-2439			
Name of Employer (Required) Physician	Agg	regate -to-date	\$1,000.00
Occupation (Required) Self  Source:  Corporation PAC Individual Loan		Date Day, Year)	Amount of each receipt this period
Source: Other (please specify)	12/07	/2017	\$1,000.00
Full Name Robert J. Granieri			
Mailing Address 1301 Kriebel Mill Road			
City, State, Zip Code Collegeville, PA 19426-1522			
Name of Employer (Required) Scarlett Pearl	A	ggregate ear-to-date	\$1,000.00
Occupation (Required)  Executive  Source:  Corporation PAC Individual Loan		Date o., Day, Year)	Amount of each receipt this period
Source:	09/	17/2017	\$300.0
Full Name Irma B. Woolard			
Mailing Address PO Box 2723			
City, State, Zip Code Tupelo, MS 38803-2723			
Name of Employer (Required) Lee County	<u> </u>	Aggregate	\$300

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Name of Candidate or Committee	Friends Of Tate Reeves 12/31/2017		

ITEMIZED RECEIF		Date Day, Year)	Amount of each receipt this period
Other (please specify)	09/28		\$1,000.00
Full Name Motorola			
Mailing Address PO Box 68429			·
City, State, Zip Code Schaumburg, IL 60168-0429			
Name of Employer (Required)		lggregate ear-to-date	\$1,000.00
Occupation (Required)  Source: Corporation PAC Individual Loan	(Me	Date o., Day, Year)	Amount of each receipt this period
Other (please specify)	04/	113/2017	\$1,000.00
Full Name Retzer Resources  Mailing Address PO Box 4457			
Mailing Address PO Box 4457  City, State, Zip Code Greenville, MS 38704-4457			
Name of Employer (Required)		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source: Corporation PAC Individual Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)		04/04/2017	\$1,000.00
Full Name W. W. Gresham III			
Mailing Address PO Box 690			
City, State, Zip Code Indianola, MS 38751-0690			
Name of Employer (Required) Gresham Petroleum		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Owner  Source:  Corporation  PAC  Individual  Loan		Date (Mo., Day, Yea	Amount of each receipt r) this period
Other (please specify)		10/04/2017	\$500.00
Full Name Charles Robert Ridgway IV			
Mailing Address 4662 Trawick Drive		1	
City, State, Zip Code Jackson, MS 39211-5834			
Name of Employer (Required) Ridgway Realty, Inc.		Aggregate Year-to-da	\$500.0

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Name of Candidate or Committee	Friends Of Tate Reeves	12/31/2017		

Reporting Periodthrough			
ITEMIZED RECEIPT		Am	ount of each
Pource: Corporation PAC Individual Loan	Date (Mo., Day, Yea	r)	receipt this period
Other (please specify)	10/16/2017		\$6,000.00
Full Name Richard H. Mills Jr.		_	
Mailing Address 602 Crescent Place Suite 100			
City, State, Zip Code Ridgeland, MS 39157-8676			
Name of Employer (Required) Tellus Energy, LLC	Aggregate		\$6,000.00
Occupation (Required) Owner	Year-to-da	te	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Y	ear)	receipt this period
Other (please specify)	12/07/2017		\$1,000.00
Full Name John Sneed			
Mailing Address 141 Bayou Circle			
City, State, Zip Code Gulfport, MS 39507-4623			
Name of Employer (Required) Stewert, Sneed, Hewes Insurance	Aggreg Year-to-		\$1,000.00
Occupation (Required)  President			Amount of each receipt
Source: Corporation PAC Individual Loan	Date (Mo., Day		this period
Other (please specify)	10/16/201	17	\$1,500.00
Full Name Kristian Agoglia			
Mailing Address 259 River Road			
City, State, Zip Code Columbia, MS 39429-8789			
Name of Employer (Required) Looks Great Services Inc	Aggr	egate to-date	\$1,500.00
Occupation (Required)  CEO  PAC Individual Loan	D	ate ay, Year)	Amount of each receipt this period
Source: Corporation PAC			\$10,000.00
Full Name Malcolm Portera	09/26/2	2017	4.2,2
Mailing Address 6721 Waterfront Drive			-
City, State, Zip Code Tuscaloosa, AL 35406-3269			
Name of Employer (Required) Self		gregate	\$10,000.0
Name of Employer ( Self	i Ag	gregate tr-to-date	\$10,000.00

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***	Friends Of Tate Reeves	
Name of Candidate or Committee	through12/31/2017	
Reporting Period	DECEIDTS	

ITEMIZED RECEIPTS	Date	Amount of each receipt
Source: Corporation PAC Individual C Loan	(Mo., Day, Year)	this period
Source: Corporation  Other (please specify)	10/06/2017	\$1,000.00
Full Name Tommie S. Cardin	10/03/25	
Mailing Address 176 Green Glades Drive		
City, State, Zlp Code Ridgeland, MS 39157-8662		
Name of Employer (Required)  Butler Snow Omara Stevens & Cannada	Aggregate Year-to-date	\$1,000.00
Occupation (Required) Attorney		Amount of each
Ourres Gorporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	09/25/2017	\$2,000.00
Full Name Market Max LLC		
Mailing Address PO Box 229		
City, State, Zip Code Tylertown, MS 39667-0229		
Name of Employer (Required)	Aggregate Year-to-date	\$7,000.00
Occupation (Required)	Date (Mo., Day, Yea	Amount of each receipt this period
Source: Corporation C PAC C THE LLC  Other (please specify)	09/28/2017	\$50,000.00
Full Name Centene Management Company LLC		
Mailing Address 7700 Forsyth Blvd		
City, State, Zip Code Saint Louis, MO 63105-1807		
Name of Employer (Required)	Aggregat Year-to-da	te
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day,	Amount of each receipt (ear) this period
Source: LI Corporation LLC  Other (please specify)	04/04/2017	\$2,500.00
Full Name Mcright Services, LLC		
Mailing Address PO Box 4812		
City, State, Zip Code Greenville, MS 38704-4812		
Name of Employer (Required)	Aggree Year-to	gate \$2,500.00
Occupation (Required)		

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Friends Of Tate	e Reeves				
Name of Candidate or Committee	through	12/31/2017			
Demosting Period		ー・コエハ			

Reporting Period ITEMIZED RECEIPT		Date ,, Day, Year)	Amount of each receipt this period
Source: LI Corporation  Cother (please specify)  LP	11/2	9/2017	\$1,000.00
Full Name Marathon Petroleum Co LP			
Mailing Address 539 S Main St			
City, State, Zip Code Findlay, OH 45840-3229			
Name of Employer (Required)		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source: Torporation PAC Individual Loan		Date Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	0	5/16/2017	\$1,000.00
Full Name Eli Lilly and Company			
Mailing Address Lilly Corporate Center			
City, State, Zip Code Indianapolis, IN 46285-0001			
Name of Employer (Required)		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Source:		10/16/2017	\$5,000.00
Full Name MADA AutoPAC		10/10/20	
Mailing Address 800 Woodlands Parkway Suite 100			
City, State, Zip Code Ridgeland, MS 39157-5215		-	
Name of Employer (Required)		Aggregate Year-to-date	\$5,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Yea	Amount of each receipt this period
Source:		10/16/2017	\$1,000.00
Full Name US Oil And Gas Assoication PAC		10/10/20 11	
Mailing Address 513 N State St Ste 202			
City, State, Zip Code Jackson, MS 39201-1110			
Name of Employer (Required)		Aggregal Year-to-da	te \$1,000.00
Occupation (Required)		Tours	

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Friends Of Tate Reeves	10047		
	12/31/2017		

Name of Candidate or Committee Reporting Period 01/01/2017

\_ through \_

12/31/2017

ITEMIZED RECEIP	Date (Mo., Day, Year)	Amount of each receipt this period
ource:	=	\$1,000.00
ull Name Nancy New	10/05/2017	<b>V</b> 1,000.
Tailing Address 111 Harper St.		
Ridgeland, MS 39157-8675		
lame of Employer (Required)  New Summit School	Aggregate	\$1,000.00
Occupation (Required) Education	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	09/07/2017	\$5,000.00
Full Name Merit Health River Oaks		
Mailing Address 1030 River Oak Drive		
City, State, Zip Code Jackson, MS 39232-9553		
Name of Employer (Required)	Aggregate Year-to-date	\$5,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year)	
Other (please specify)	12/13/2017	\$500.00
Full Name Michael Brant Pettis		
Mailing Address PO Box 132		
City, State, Zip Code Gulfport, MS 39502-0132		
Name of Employer (Required) Balch & Bingham LLP	Aggregate Year-to-date	\$500.00
Occupation (Required)  Attorney  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Yea	Amount of each receipt this period
Other (please specify)	10/02/2017	\$500.0
Full Name Timothy Beacham Sr.		
Mailing Address 357 S Gamwyn Park		
City, State, Zip Code Greenville, MS 38701-6304		
Name of Employer (Required) Delta Regional Medical Center	Aggregate	
Occupation (Required)  Anesthesiologist	Year-to-da	te

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Name of Candidate or Committee	Friends Of Tate Reeves through 12/31/2017	
Reporting Period 01/01/2011	TEMIZED RECEIPTS	

ITEMIZED RECEIPT	Date	Amount of each receipt
urce: 🔲 Corporation 🔲 PAC 🔲 Individual 🗀 Loan	(Mo., Day, Year)	this period
Other (please specify)	11/03/2017	\$2,500.00
Il Name Alexandra Land & Development LLC		
PO Box 6917		
y, State, Zip Code Metairie, LA 70009-6917		
me of Employer (Required)	Aggregate Year-to-date	\$2,500.00
ccupation (Required)		Amount of each
Source: T Corporation	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/16/2017	\$500.00
Full Name Capitol Partners		
Mailing Address PO Box 4385		
City, State, Zip Code Brandon, MS 39047-4385		
Name of Employer (Required)	Aggregate Year-to-date	\$500.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/10/2017	\$35,000.00
Full Name Electric Cooperatives of Mississippi PAC		
Mailing Address PO Box 3300		
City, State, Zip Code Ridgeland, MS 39158-3300		
Name of Employer (Required)	Aggregate Year-to-date	\$35,000.00
Occupation (Required)  Source: Torporation PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt r) this period
Other (please specify)	11/05/2017	\$1,000.00
Full Name Sentry Care, Inc.	100020	
Mailing Address 106A Office Park Dr		
City, State, Zip Code Brandon, MS 39042-2404		
Name of Employer (Required)	Aggregate	\$1,000.0
Occupation (Required)	Year-to-da	e

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Name of Candidate or Committee Reporting Period 01/01/2017

Friends Of Tate Reeves

through

12/31/2017

ITEMIZED RECEIP	Date (Mo., Day, Year)	Amount of each receipt this period
Gource: Corporation  Other (please specify)	12/22/2017	\$500.00
Brenton Brasher	1212	
Mailing Address 468 Country Lane		
City, State, Zip Code Holcomb, MS 38940-9786		
Name of Employer (Required) Kengro	Aggregate	\$1,500.00
Occupation (Required) Owner/Farmer	Year-to-date	Amount of each receipt
Source: Corporation PAC Individual Loan	(Mo., Day, Year)	this period
Other (please specify)	10/05/2017	\$1,000.00
Full Name John Alexander Brunini		
Mailing Address 119 Rosedowne Bend		
City, State, Zip Code Madison, MS 39110-4710		
Name of Employer (Required) Butter Snow Omara Stevens & Cannada	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Attorney  PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt this period
Source: Corporation		\$2,500.00
Other (please specify)  Full Name Wade Creekmore Jr.	10/16/2017	42,000
Mailing Address 1018 Highland Parkway Suite 700		
City, State, Zip Code Ridgeland, MS 39157-2089		
Name of Employer (Required) Telapex Inc	Aggregate Year-to-da	\$2,500.00 te
Occupation (Required)  EXECUTIVE  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Y	Amount of each receipt
Other (please specify)	12/18/2017	\$1,000.00
Full Name Renasant Bank Employees Voluntary PAC	12/15/25	
Mailing Address PO Box 709		
City, State, Zip Code Tupelo, MS 38802-0709		
Name of Employer (Required)	Aggreg Year-to-	ate \$1,000.0
Occupation (Required)	Teat-to-	

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Name of Candidate or Committee Friends C	of Tate Reeves	<del></del> 7	
01/01/2017	through		
Reporting Period	155	T ()	

ITEMIZED RECEIP	Date (Mo., Day, Year)	Amount of each receipt this period
purce: 🗀 Corpolation	(Mo., Day, 1001)	
Other (please specify)	12/29/2017	\$10,000.00
ull Name Richard Wax		
ailing Address PO Box 60		
ty, State, Zip Code Amory, MS 38821-0060		
ame of Employer (Required) Wax Seed Company	Aggregate Year-to-date	\$10,000.00
Occupation (Required) Owner		Amount of each
Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan	Date (Mo., Day, Year)	receipt this period
* Other (please specify)	10/16/2017	\$1,000.00
Full Name GuidePoint LLC		
Mailing Address 1037 Lake Village Cir STE A		
City, State, Zip Code Brandon, MS 39047-6725		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Yea	Amount of each receipt this period \$500.00
Full Name Dolly Marascalco	10/16/2017	
Mailing Address 2585 Jackson Avenue Extension		
City, State, Zip Code Grenada, MS 38901-9331		
Name of Employer (Required) Sav-Mor Drug Store	Aggregate Year-to-dat	e
Occupation (Required)  Owner  Source: Corporation PAC Individual Loan  LLC	Date (Mo., Day, Yo	Amount of each recelpt ear) this period
Other (please specify)	10/16/2017	\$500.0
Full Name James Edward Williams LLC		
Mailing Address 58 County Road 758		
City, State, Zip Code Corinth, MS 38834-1143		
Name of Employer (Required)	Aggrega Year-to-d	
Occupation (Required)	Tear-to-o	

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dame of Candidate or Committee	Friends Of Tate Reeves	12/31/2017	
Panerting Period 01/01/2017		TC	

ITEMIZED RECEIPTS		ate	Amount of each receipt
Source: Corporation PAC El Individual Loan		ate ay, Year)	this period
Source:	11/08/2	2017	\$4,000.00
Full Name Marion L. Waters	1110011		
Mailing Address 5410 Overbrook Lane			
City, State, Zip Code Meridian, MS 39305	1		
Name of Employer (Required) Waters International Trucks	Ag	gregate ar-to-date	\$4,000.00
Occupation (Required)  Executive	Yea		Amount of each
PAC Individual Loan	(Mo.	Date , Day, Year)	receipt this period
Source:	09/1	4/2017	\$1,000.00
Full Name MMC Materials, Inc.	1		
Mailing Address PO Box 2569			
City, State, Zip Code Madison, MS 39130-2569			
Name of Employer (Required)		Aggregate Year-to-date	\$1,000.00
Occupation (Required)		Date	Amount of each receipt this period
Source: Corporation PAC Individual		Ao., Day, Year)	
Other (please specify)	0	4/10/2017	\$1,000.00
Full Name Scott Coopwood			
Mailing Address PO Box 117			
City, State, Zip Code Cleveland, MS 38732-0117			
Name of Employer (Required) Delta Business Journal		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Publisher & Owner  PAC Individual Loan		Date (Mo., Day, Yea	Amount of each receipt
Source: Li Corporation			\$500.00
Other (please specify)		10/30/2017	
Full Name Jeanne A Rea			
Mailing Address PO Box 9008			
City, State, Zip Code Columbus, MS 39705-0015  Name of Employer (Required) Southwest Health Systems		1	te \$500.00
		Aggregat Year-to-da	
Occupation (Required) Anethesiologist		•	

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Reeves				
through	12/31/2017			

Name of Candidate or Committee Reporting Period 01/01/2017

Friends Of Tate Re

Source: Corporation PAC Individual C Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	11/08/2017	\$5,000.00
Full Name John H. Trezevant		
Mailing Address 9062 Valley Crest Lane		
City, State, Zip Code Germantown, TN 38138-7828		
Name of Employer (Required) Trezevant Realty	Aggregate	\$5,000.00
Occupation (Required) President & CEO	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/12/2017	\$833.00
Full Name Baker Services		
Malling Address PO Box 6717		
City, State, Zip Code Jackson, MS 39282-6717		
Name of Employer (Required)	Aggregate Year-to-date	\$833.00
Occupation (Required)  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)	10/16/2017	\$500.00
Full Name The Octagon Group LLC		
Mailing Address 124 Devlin Springs Drive		
City, State, Zip Code Madison, MS 39110-6549		
Name of Employer (Required)	Aggregate Year-to-date	\$500.00
Occupation (Required)  Source:  Gorporation PAC Individual Loan	Date (Mo., Day, Ye	Amount of each receipt
Other (please specify)	11/16/2017	\$5,000.00
Full Name Michael Joe Cannon		
Mailing Address 4011 Southerland Drive		
City, State, Zip Code Oxford, MS 38655-3530		
Name of Employer (Required) Cannon Motors	Aggrega Year-to-d	te \$5,000.00
Occupation (Required) Owner	Year-to-u	,

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Name of Candidate or Committee	Friends Of Tate Reeves  through 12/31/2017
Reporting Period 01/01/2017	INDUST

ITEMIZED RECEIPT	Date	Amount of each receipt
ource: 🗂 Corporation 🔲 PAC 🔲 Individual 🔲 Loan	(Mo., Day, Year)	this period
Other (please specify)	11/22/2017	\$1,000.00
ull Name Mississippi Export Railroad Company	102223	
Mailing Address 4519 McInnis Ave		
City, State, Zip Code Moss Point, MS 39563-2815		
Name of Employer (Required)	Aggregate	\$1,000.00
Occupation (Required)	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	12/20/2017	\$3,500.00
Full Name Mississippi Medical PAC -State		
Mailing Address PO Box 2548		
City, State, Zip Code Ridgeland, MS 39158-2548		
Name of Employer (Required)	Aggregate	\$11,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Year-to-date  Date  (Mo., Day, Yea	Amount of each receipt this period
Other (please specify)	11/16/2017	\$5,000.00
Full Name Andrew W Callicutt	1770,201	
Malling Address 3883 Majestic Oaks Drive		
City, State, Zip Code Oxford, MS 38655-8153		
Name of Employer (Required) Oxford Farms LLC	Aggregate Year-to-dat	
Occupation (Required)  Executive  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Y	Amount of each receipt
Other (please specify)	11/02/2017	\$1,000.00
Full Name Mississippi Association of Nurse Practitioners PAC	11102	
Mailing Address 152 Watford Park Way Dr		
City, State, Zip Code Canton, MS 39046-7900		
Name of Employer (Required)	Aggreg	
Occupation (Required)	Year-to-t	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

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	Friends Of Tate Reeves	<del></del>
Name of Candidate or Committee	through12/31/2017	
Reporting Period		

ITEMIZED RECEIP	Date		nt of each ceipt
Source: 🔲 Corporation 🔲 PAC 🛅 Individual 🔲 Loan	(Mo., Day, Year)		period
Other (please specify)	11/16/2017		\$5,000.00
Full Name Don Newcomb			
Mailing Address 1108 S Lamar Boulevard			
City, State, Zip Code Oxford, MS 38655-4732			
Name of Employer (Required) Self	Aggregate Year-to-date		\$5,000.00
Occupation (Required) Dentist		Amo	unt of each
Source: 🗆 Corporation 🖺 PAC 🗀 Individual 🗀 Loan	Date (Mo., Day, Ye		receipt is period
Other (please specify)	10/10/2017		\$1,000.00
Full Name MS Pawnbrokers PAC			
Mailing Address 1425 University Blvd			
City, State, Zip Code Jackson, MS 39204-3130			
Name of Employer (Required)	Aggregat Year-to-da	e	\$1,000.00
Occupation (Required)  Source: Corporation PAC Individual Loan	Date (Mo., Day,	A	nount of each receipt this period
Other (please specify)	12/12/2017		\$500.00
Full Name Gifford W Ormes			
Malling Address PO Box 4079			
City, State, Zip Code Gulfport, MS 39502-4079			
Name of Employer (Required) Mississippi Power Company	Aggres Year-to	ate date	\$500.00
Occupation (Required)  Executive  Source:  Corporation PAC Individual Loan	Dat (Mo., Day	e	Amount of each receipt this period
Other (please specify)	04/07/20	17	\$1,000.00
Full Name Thomas G. Gresham			·
Mailing Address 105 E Gresham Street			
City, State, Zip Code Indianola, MS 38751-2422			
Name of Employer (Required) Double Quick Inc	Aggi	egate to-date	\$1,000.0
Occupation (Required)	1 ear-		

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Friends Of Tate Reeves	12/31/2017	

Name of Candidate or Committee

Name of Candidate of Committee  Period 01/01/2017 through				
ITEMIZED RECEIT	\ 1	Date Day, Year)	Amount of each receipt this period	
Source: Corporation			\$1,000.00	
Other (please specify)	04/12/	2017		•
Full Name James T. Thomas IV				-
Mailing Address 4064 Eastwood Drive				-
City, State, Zip Code Jackson, MS 39211-6443			24.000.00	٦
Name of Employer (Required) Thomas Partners	Ye	ggregate ear-to-date	\$1,000.00	_
Occupation (Required) Executive  Executive Individual Individual Loan	(Mc	Date o., Day, Year)	Amount of each receipt this period	
Source: Li Corporation			\$1,000.00	
Other (please specify)	11/	01/2017	+	
Full Name Janson Durr Boyles				
Mailing Address 215 Winged Foot Cir				
City, State, Zip Code Jackson, MS 39211-2530				
Name of Employer (Required) Boyles Moak		Aggregate Year-to-date	\$1,000.00	
Occupation (Required) Insurance Agent		Date Mo., Day, Yea	Amount of each receipt	
Source: LJ Corporation	=}		\$1,000.0	00
Other (please specify)		04/03/2017		
Full Name Roger L Hancock				
Mailing Address PO Box 207				
City, State, Zip Code Bentonia, MS 39040  Name of Employer (Required) WOSO Red Hancocks			te \$1,000.	0.00
(dame 4.4)		Aggregat Year-to-da	ate	_
Occupation (Required) Construction  Construction  Description  Construction  Description  Construction  Construction  Construction  Construction		Date (Mo., Day,	Amount of eac receipt Year) this period	
Source: Corporation LI PAC L		11/29/2017	£1.00	00.00
Full Name Caremark RX, Inc.		1112012011		
Mailing Address PO Box 287		-		
City, State, Zip Code Lincoln, RI 02895  Name of Employer (Required)		Aggre	gate \$1,0	0.000
Occupation (Required)		Year-to	-dare	

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	Friends Of Tate Reeves			
Name of Candidate or Committee	through	12/31/2017		

Name of Candidate 0. 01/01/2017 through			
Reporting Period 1701/2517 ITEMIZED RECEIPT	S		Amount of each
Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan		Date Day, Year)	receipt this period
Other (please specify)	04/08	5/2017	\$1,000.00
Full Name J. Paul Janoush	_		
Mailing Address PO Box 397			
City, State, Zip Code Rosedale, MS 38769-0397			
Name of Employer (Required) JANTRAN		Aggregate ear-to-date	\$1,000.00
Occupation (Required)  CFO  Individual Loan		Date o., Day, Year)	Amount of each receipt this period
Source: Corporation			\$1,000.00
Other (please specify)	04	/18/2017	\$1,000.00
Full Name James Robertson Jr.			
Mailing Address 101 Barberry Lane			
City, State, Zip Code Indianola, MS 38751-2505			
Name of Employer (Required) Self		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Farmer  PAC Individual Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC		09/14/2017	\$250.00
Full Name T.H. Kendali III		09/14/2017	
Mailing Address PO Box 96			
City, State, Zip Code Bolton, MS 39041-0096			
Name of Employer (Required) Gaddis Farms		Aggregate Year-to-date	\$250.00
Occupation (Required)  Farmer/Banker  PAC Individual Loan		Date (Mo., Day, Ye	Amount of each receipt
Source: Corporation  Other (please specify)		11/07/2017	\$1,000.00
Full Name Polks Meat Products Inc.		+	
Mailing Address PO Box 1190		-	
City, State, Zip Code Magee, MS 39111-1190			
Name of Employer (Required)		Aggrega Year-to-d	te \$1,000.0
Occupation (Required)			

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	Friends Of Tate Reeves	40/04/2017	
Name of Candidate or Committee	through	12/31/2017	
- Jing Period			

Reporting Period 01/01/2017 DECEIPTS			
Reporting Period 1701/2011  ITEMIZED RECEIPTS			Amount of each receipt
PAC Individual Loan	Date (Mo., Day, Year)		this period
Source: Corporation PAC  Other (please specify)	10/09/2017		\$1,000.00
Full Name Armin J Moeller Jr.	10/02		
Mailing Address 346 Saint Andrews Drive			
City, State, Zip Code Jackson, MS 39211-2521			
Name of Employer (Required) Balch & Bingham	Aggregate Year-to-date		\$1,000.00
Occupation (Required) Attorney	1 10	Date	Amount of each receipt
Source: Torporation PAC Individual Loan	(Mo., Day, Year)		this period
Source: Corporation  Other (please specify)	09/	25/2017	\$1,000.00
Full Name Western Resources, Inc.	+		
Mailing Address PO Box 246	-		
City, State, Zip Code Tylertown, MS 39667-0246	1		
Name of Employer (Required)	-	Aggregate Year-to-date	\$1,000.00
Occupation (Required)		Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation LIPAC LLC  Other (please specify)	}-	10/31/2017	\$500.00
Full Name JM Hughes Group LLC		10/01/2	
Mailing Address 147 Highland Circle			
City, State, Zip Code Jackson, MS 39211-6455			
Name of Employer (Required)		Aggregate Year-to-date	\$500.00
Occupation (Required)		Date (Mo., Day, Ye	Amount of each receipt
Source: Corporation LI PAC LLC  C Other (please specify)		12/06/2017	\$1,000.00
Full Name Pascagoula Bar Pilots Association, LLC		1	
Mailing Address Po Box 2156			
City, State, Zip Code Pascagoula, MS 39569-2156		+	
Name of Employer (Required)		Aggrega Year-to-d	te \$1,000.00
Occupation (Required)		100.00	· · · · · · · · · · · · · · · · · · ·

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aittaa	Friends Of Tate Reeves 12/31/2017
Name of Candidate or Committee	throughthrough
Reporting Period	

ITEMIZED RECEIPTS		Date	Amount of each receipt
Source: 🔲 Corporation 🔲 PAC 🛅 Individual 🔲 Loan	(Mo.,	Day, Year)	this period
Other (please specify)	10/03	/2017	\$5,000.00
Full Name Richard D. McRae Jr.	1		
Mailing Address 3850 Dogwood Drive	1		
City, State, Zip Code Jackson, MS 39211-6701	1		
Name of Employer (Required) McRae Investments, LLC	A	aggregate ear-to-date	\$5,000.00
Occupation (Required)  Investments  Individual Loan	+	Date	Amount of each receipt this period
Source: Corporation PAC Lindividual	(Mc	o., Day, Year)	
Other (please specify)	12/	113/2017	\$1,000.00
Full Name Roderick Mark Alexander Jr.			
Mailing Address 11019 Channelside Drive			
City, State, Zip Code Gulfport, MS 39503-6050			
Name of Employer (Required) Balch & Bingham		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Attorney  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Year	Amount of each receipt this period
Source: Corporation  Other (please specify)		07/28/2017	\$2,500.00
Full Name Mississippi AGC-PAC		0772072	
Mailing Address PO Box 12615			
City, State, Zip Code Jackson, MS 39236-2615			
Name of Employer (Required)		Aggregate Year-to-date	e
Occupation (Required)  Source: Corporation PAC Individual Loan		Date (Mo., Day, Ye	Amount of each receipt
Source: Corporation  Other (please specify)		10/13/2017	\$1,000.00
Full Name Diamond Grove Center For Children		10/10/2011	
Mailing Address 2311 Highway 15 S			
City, State, Zip Code Louisville, MS 39339-7071			
Name of Employer (Required)		Aggrega Year-to-0	te \$1,000.00
Occupation (Required)		1 ear-to-t	

	Page	Page 73 of 126
Name of Candidate or Committee	Friends Of Tate Reeves  through 12/31/2017	
Reporting Period 01/01/2017		

ITEMIZED RECEIPTS		Amount of each
PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Source:	11/13/2017	\$1,000.00
Full Name Mississippi Hospital Association PAC	1	
Mailing Address PO Box 1909		
City, State, Zip Code Madison, MS 39130-1909		
Name of Employer (Required)	Aggregate	\$1,000.00
Occupation (Required)	Year-to-date	Amount of each
Source:	Date (Mo., Day, Year)	receipt this period
Other (please specify)	11/13/2017	\$1,000.00
Full Name Centurytel Inc.		
Mailing Address PO Box 4065		
City, State, Zip Code Monroe, LA 71211-4065		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Ye	Amount of each receipt
Source: LI Corporation  LLC  Control of the corporation LLC	04/03/2017	\$1,000.00
Full Name Eureka A Partnership		
Mailing Address PO Box 87		
City, State, Zip Code Indianola, MS 38751-0087		
Name of Employer (Required)	Aggrega Year-to-d	ate
Occupation (Required)  Source:  Corporation	Date (Mo., Day,	Amount of each receipt Year) this period
Source: Corporation  Other (please specify)	09/20/2017	\$1,000.00
Full Name Check Into Cash of Mississippi, Inc.		
Mailing Address 201 Keith Street SW Suite 80		
City, State, Zip Code Cleveland, TN 37311-5867		
Name of Employer (Required)	Aggre Year-to	gate \$1,000.00
Occupation (Required)		

	Page	Page 74 of 126
Friends Of Tate Reeves	1/2017	
Name of Candidate 5, 01/01/2017 through	·DTC	

Reporting Period 101/01/2017 ITEMIZED RECEIPTS			
[] -10 F] individual [] Loan		Date Day, Year)	Amount of each receipt this period
Source: Corporation C PAC	04/10/		\$500.00
Full Name William P. Litton			
Mailing Address 550 CR 150			
City, State, Zip Code Greenwood, MS 38930			
Name of Employer (Required) Wade, Inc.	A	ggregate ar-to-date	\$500.00
Occupation (Required)  Presidnent  Pac Individual Loan	(Mo	Date ., Day, Year)	Amount of each receipt this period
Source:	10/	10/2017	\$25,000.00
Full Name Lenders Political Action Committee	_		
Mailing Address PO Box 24087	_		
City, State, Zip Code Jackson, MS 39225-4087			
Name of Employer (Required)		Aggregate Year-to-date	\$25,000.00
Occupation (Required)		Date Mo., Day, Year)	Amount of each receipt this period
Source: Corporation LI PAC  Other (please specify)		10/09/2017	\$1,000.00
Full Name Montgomery Enterprises Inc.			
Mailing Address PO Box 37			
City, State, Zip Code Fulton, MS 38843-0037			
Name of Employer (Required)		Aggregate Year-to-date	e
Occupation (Required)		Date (Mo., Day, Ye	Amount of each receipt
Source: Corporation PAC		10/16/2017	\$1,000.00
Full Name Mississippi Credit Union PAC		1	
Mailing Address 1400 Lakeover Rd Ste 200		+	
City, State, Zip Code Jackson, MS 39213-8000			
Name of Employer (Required)		Aggrega Year-to-c	ate \$1,000.00 date
Occupation (Required)			

Name of Candidate or Committee Friends Of Tate Reeves  Reporting Period 01/01/2017 through 12/31/2017  ITEMIZED RECEIPTS	Page Page 75 of	. ·
PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Source:	11/25/2017	\$500.00
Full Name Robert W. Wilkinson		
Mailing Address 963 Debonair Drive		
City, State, Zip Code Mobile, AL 36695-9539		
Name of Employer (Required) Huntington Ingalls Industries	Aggregate Year-to-date	\$500.00
Occupation (Required)  Executive    PAC   Individual   Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation C PAC C	09/26/2017	\$10,000.00
Full Name Marty Davidson		

Loan

☐ Loan

**Mailing Address** 

Source:

Full Name

**Mailing Address** 

Source:

Full Name

**Mailing Address** 

City, State, Zip Code

Occupation (Required)

Name of Employer (Required)

City, State, Zip Code

Occupation (Required)

Name of Employer (Required)

☐ Corporation

Other (please specify)

Jackie Edwards

1180 E. Broad St.

President

City, State, Zip Code

Name of Employer (Required)

Other (please specify)

Occupation (Required)

PO Box 3804

Owner

PO Box 31390

Meridian, MS 39303-3804

☐ PAC

Comprehensive Health Management Inc.

Tampa, FL 33631-3390

☐ PAC

West Point, MS 39773-3238

Southern Pipe & Co LLC

Individual

Individual

Clay County Growth Alliance

\$12,500.00

\$1,000.00

\$1,000.00

\$250.00

Amount of each

receipt

this period

Amount of each

receipt

this period

Aggregate Year-to-date

Date

(Mo., Day, Year)

Aggregate Year-to-date

Date

(Mo., Day, Year)

Aggregate Year-to-date

09/15/2017

08/22/2017

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****	Friends Of Tate Reeves	
Name of Candidate or Committee	throughthrough	
Penorting Period - 01017251	CIDTC	

ITEMIZED RECEIPTS		Date	Amount of each receipt
Source: Corporation PAC Individual Loan		Day, Year)	this period
Source: Corporation  Other (please specify)	11/14	/2017	\$5,000.00
Full Name Brent W. Koslo	<del></del>		
Mailing Address 3105 Plantation Circle East			
City, State, Zip Code Tupelo, MS 38804-9799	<del> </del>		
Name of Employer (Required) Furniture Industry	A	ggregate	\$5,000.00
Occupation (Required) Executive	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ear-to-date	Amount of each
Source: Corporation PAC Individual Loan	(M	Date o., Day, Year)	receipt this period
Other (please specify)	04	07/2017	\$1,000.00
Full Name Chatham H. Phillips	+		
Mailing Address 4024 Money Sunk Road			
City, State, Zip Code Yazoo City, MS 39194-8653			
Name of Employer (Required) Self		Aggregate Year-to-date	\$1,000.00
Occupation (Required) Farmer  D PAC D Individual D Loan		Date	Amount of each receipt r) this period
Source: Corporation		(Mo., Day, Yea	\$250.00
Other (please specify)		12/12/2017	\$250.00
Full Name Harry Dendy			
Mailing Address PO Box 122			
City, State, Zip Code Clinton, MS 39060-0122			
Name of Employer (Required) Capitol Ag Services Inc.		Aggregate Year-to-da	te
Occupation (Required)  Executive  Source:   Corporation PAC Individual Loan		Date (Mo., Day, Y	Amount of each receipt
Source:		09/26/2017	\$10,000.00
Full Name Robert E. Luke		09/20/20 11	
Mailing Address 1862 Hunters Run			
City, State, Zip Code Meridian, MS 39305-9335			
Name of Employer (Required)  LPK Architects		Aggreg Year-to-	pate \$11,000.00
Occupation (Required) Principal		rear-to-	

			Page	Page 77 of 126	_
Name of Candidate or Committee	Friends Of Tate Reeves	12/31/2017			
Reporting Period 01/01/2017		CEIPTS			

Reporting PeriodITEMIZED RECEIPTS	<del></del>		Amount of each
Source: Corporation PAC Individual Loan	(Mo.,	Date Day, Year)	receipt this period
Source: Corporation  Other (please specify)	10/16	3/2017	\$10,000.00
Full Name Terry W. Green	1		
Mailing Address PO Box 2788	1		
City, State, Zip Code Sugar Land, TX 77487-2788	-		
Name of Employer (Required) Island View Resort	-	Aggregate /ear-to-date	\$10,000.00
Occupation (Required)  Executive  PAC Individual Loan		Date lo., Day, Year)	Amount of each receipt this period
Source: Corporation C PAC  Other (please specify)		0/02/2017	\$1,000.00
Full Name W. Michael Russ	_		
Mailing Address 705 Welford Court			
City, State, Zip Code Madison, MS 39110-7583			
Name of Employer (Required) Butler Snow Omara Stevens & Cannada		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Attorney  Source:   Corporation PAC Individual Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Source:	=	04/17/2017	\$2,500.00
Full Name V K Chawla			
Mailing Address 902 Jane Lane			
City, State, Zip Code Greenwood, MS 38930-2510			
Name of Employer (Required) Delta Motels		Aggregate Year-to-date	\$2,500.00
Occupation (Required)  Investor  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Yea	Amount of each receipt this period
Source:		11/03/2017	\$15,000.00
Full Name Mississippi Independent Rx PAC		-	
Malling Address 4209 Lakeland Dr Ste 399		-	
City, State, Zip Code Flowood, MS 39232-9212			
Name of Employer (Required)		Aggregat Year-to-da	e \$15,000.00
Occupation (Required)			

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	Friends Of Tate Reeves		
Name of Candidate or Committee	through 12/31/2017		
Reporting Period 01/01/2017			

ITEMIZED RECEIPTS	l l	Amount of each
urce: 🖹 Corporation 🔲 PAC 🔲 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/09/2017	\$1,000.00
II Name Montgomery Properties Inc		
alling Address PO Box 37		
ty, State, Zip Code Fulton, MS 38843-0037		
ame of Employer (Required)	Aggregate Year-to-date	\$1,000.00
ccupation (Required)		Amount of each
Source: 🗂 Corporation 🔲 PAC 🔲 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	09/18/2017	\$1,000.00
Full Name American Pharmacy Cooperative, Inc.		
Mailing Address PO Box 728	,	
City, State, Zip Code Bessemer, AL 35021-0728		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)	10/02/2017	\$2,500.00
Full Name Rick Looser		
Mailing Address 1826 Highway 471		
City, State, Zip Code Brandon, MS 39047-7964		,
Name of Employer (Required) The Cirlot Agency	Aggregate Year-to-date	\$2,500.00
Occupation (Required)  Partner  Source: Corporation PAC Individual Loan	Date (Mo., Day, Ye	Amount of each receipt ar) this period
Other (please specify)	09/15/2017	\$1,000.0
Full Name Chevron Policy Govt & Public Affairs		
Malling Address PO Box 9034		
City, State, Zip Code Concord, CA 94524-1934		
Name of Employer (Required)	Aggrega Year-to-d	te \$1,000.
Occupation (Required)	1601 10	

		Page	Page 79 of 126
Name of Candidate or Committee	Friends Of Tate Reeves through 12/31/2017		
Reporting Period 01/01/2011	ITEMIZED RECEIPTS		, faceh

ITEMIZED RECEIPTS		Date	Amount of each receipt
DAC LINGIVIOUS	(Mo.,	Day, Year)	this period
Candidate Campaign Comm	04/11	/2017	\$500.00
Full Name Friends Of Lydia Chassaniol		_	
Mailing Address PO Box 211	-		
City, State, Zip Code Winona, MS 38967-0211	1		
Name of Employer (Required)	A	\ggregate ear-to-date	\$500.00
Occupation (Required)			Amount of each
Source: Corporation PAC Individual Loan	(M	Date o., Day, Year)	receipt this period
Other (please specify)	12/	107/2017	\$1,000.00
Full Name Land Holdings I, LLC			
Mailing Address 9380 Central Ave			
City, State, Zip Code Diberville, MS 39540-5302			
Name of Employer (Required)		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Source: Li Corporation  Other (please specify)			\$500.00
		09/22/2017	
Full Name The Boeing Company PAC			
Mailing Address 929 Long Bridge Dr			
City, State, Zip Code Arlington, VA 22202-4208		_	
Name of Employer (Required)		Aggregate Year-to-date	\$500.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Yea	Amount of each receipt this period
Source: Corporation  Other (please specify)		10/05/2017	\$1,000.00
Full Name Amy Walker		10/00/2011	
Mailing Address 112 Lineage Lane		-	
City, State, Zip Code Flowood, MS 39232-8105		-	
Name of Employer (Required) ERGON Asphalt & Emulsions, Inc.		Aggregat Year-to-da	e \$1,000.00
Occupation (Required) Executive		1007 30	

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a	Friends Of Tate Reeves	
Name of Candidate or Committee	through 12/3//2017	·
Reporting Period	DECEIDTS	

Reporting Period ITEMIZED RECEIPTS	1	Date Day, Year)	Amount of each receipt this period
Source: Corporation			\$1,000.00
Other (please specify)	10/1	1/2017	Ψ1,000.00
Full Name Colin Maloney			
Malling Address 705 Robert E Lee Drive			
City, State, Zip Code Tupelo, MS 38801-5537	_		
Name of Employer (Required)  Maloney Glass/Century Construction & Realty		Aggregate /ear-to-date	\$1,000.00
Occupation (Required)  Owner  PAC Individual Loan	(N	Date lo., Day, Year)	Amount of each receipt this period
Source: Corporation C PAC  Other (please specify)	<del>-</del>   1	1/16/2017	\$5,000.00
Full Name Johnny Morgan			
Malling Address PO Box 309			
City, State, Zip Code Oxford, MS 38655-0309			
Name of Employer (Required) Morgan White Group		Aggregate Year-to-date	\$9,000.00
Occupation (Required)  President  Source:  Corporation  PAC  Individual  Loan		Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)		10/09/2017	\$1,000.00
Full Name Kentray K Hairston	C		
Mailing Address 108 Seville Way			
City, State, Zip Code Madison, MS 39110-8170			
Name of Employer (Required) Butler Snow Omara Stevens & Cannada		Aggregate	e
Occupation (Required)  Attorney  PAC Individual Loan		Date (Mo., Day, Y	Amount of each receipt
Source: Corporation  Other (please specify)		10/16/2017	\$1,000.00
Full Name Clare Hester		1	
Mailing Address 200 N Congress Street Suite 500		-	
City, State, Zip Code Jackson, MS 39201-1917			
Name of Employer (Required) Capitol Resources		Aggreg Year-to-	ate \$1,000.00
Occupation (Required) Partner		Tour 15	

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Name of Candidate or Committee	Friends Of Tate Reeves	
Name of Calididate 01/01/2017	through	

Reporting Period 1701/2017 ITEMIZED RECEIPTS	1	Date , Day, Year)	1	únt of each receipt is period
Source: Corporation C PAC				\$500.00
Other (please specify)	09/1	4/2017		
Full Name Michael Wallace				
Mailing Address 318 Hillview Drive				
City, State, Zip Code Ridgeland, MS 39157-8606				1700.00
Name of Employer (Required) Wise, Carter, Child, & Carraway, P.A.		Aggregate Year-to-date	\ 	\$500.00
Occupation (Required)  Attorney		Date Mo., Day, Year)	A	nount of each receipt this period
Source: Corporation PAC  Other (please specify)		1/14/2017	1	\$5,000.00
Full Name Jason Voyles				
Mailing Address 177 Saint Andrews Drive				
City, State, Zip Code Jackson, MS 39211-2532			\	
Name of Employer (Required) Spectrum Capital		Aggregate Year-to-date		\$5,000.00
Occupation (Required) President		Date (Mo., Day, Yea		Amount of each receipt this period
Source: Corporation PAC  Other (please specify)		10/02/2017	_	\$500.00
Full Name Doug Dale		10/02/2		
Mailing Address 111 Katherine Pointe Dr.		-		
City, State, Zip Code Madison, MS 39110-7909		-		
Name of Employer (Required) Dale Partners Architects P.A.		Aggrega Year-to-d	te ate	\$500.00
Occupation (Required)  Owner  PAC   Individual   Loan		Date (Mo., Day,		Amount of each receipt this period
Source: Torporation PAC  Other (please specify)		09/11/2017	,	\$1,000.00
Full Name Howard Industries, Inc.		-		
Mailing Address PO Box 1588				-
City, State, Zip Code Laurel, MS 39441-1588				
Name of Employer (Required)		Aggre Year-te	gate o-date	\$1,000.0
Occupation (Required)				<del>-</del>

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Friends Of Tate Reeves	12/31/2017	
lame of Candidate or Committee through	12/3/12011	

ITEMIZED RECEIPT	<b>\</b>	Date , Day, Year)	rec	t of each ceipt period
Source: Corporation PAC  Other (please specify)	12/0	7/2017		\$500.00
Full Name Victor Walsh				
Mailing Address 4619 Main Street Suite A				
City, State, Zip Code Moss Point, MS 39563-3939				
Name of Employer (Required) Millette Administrators		Aggregate Year-to-date		\$500.00
Occupation (Required)  TPA  Source:  Corporation PAC Individual Loan		Date No., Day, Year)	1	ount of each receipt nis period
Source:	= 10	1/13/2017		\$1,000.00
Full Name Brenton Brasher				
Malling Address 468 Country Lane				
City, State, Zip Code Holcomb, MS 38940-9786				
Name of Employer (Required) Kengro		Aggregate Year-to-date		\$1,000.00
Occupation (Required) Owner/Farmer  Source:  Corporation PAC Individual Loan	·	Date (Mo., Day, Ye	A	mount of each receipt this period
Source:		09/12/2017		\$1,000.00
Full Name Robert E. Luke		00.12		
Mailing Address 1862 Hunters Run				
City, State, Zip Code Meridian, MS 39305-9335				
Name of Employer (Required) LPK Architects		Aggrega Year-to-d	te ate	\$1,000.00
Occupation (Required)  Principal  Principal  PAC Individual Loan		Date (Mo., Day,		Amount of each receipt this period
Source:		12/13/2017	7	\$1,000.00
Full Name Leo Manuel				
Mailing Address 2067 Mauvilla Cove				
City, State, Zip Code Biloxi, MS 39531-2433		•		

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Name of Candidate or Committee	Friends Of Tate Reeves	12/31/2017		
Reporting Period01/01/2017	through	- CEIDTC		

ITEMIZED RECEIPTS	Date (Mo., Day, Year	1	unt of each receipt nis period
Source: L1 Corporation  C2 Other (please specify)	10/16/2017		\$5,000.00
Full Name Committee For Clean Environment and Fair Taxation			
Mailing Address 3000B N State St			
City, State, Zip Code Jackson, MS 39216-4203			
Name of Employer (Required)	Aggregate Year-to-date	e	\$5,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Ye	1	mount of each receipt this period
Other (please specify)	10/16/2017		\$500.00
Full Name Hughes Spellings LLC  Mailing Address PO Box 30			<u>'</u>
Mailing Address PO Box 30  City, State, Zip Code Louisville, MS 39339-0030			
Name of Employer (Required)	Aggrega Year-to-0	ite late	\$500.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day,		Amount of each receipt this period
Source:	09/05/201	7	\$2,500.00
Full Name Michael G. Freeman Jr.			
Mailing Address 29 Monarch Boulevard			
City, State, ZIp Code Hattiesburg, MS 39402-7200			
Name of Employer (Required) ICE Contractors	Aggre Year-t	egate o-date	\$2,500.00
Occupation (Required)  President  Source:  Corporation  PAC  Individual  Loan		ate ay, Year)	Amount of each receipt this period
Source: Corporation  Other (please specify)	11/05/2	017	\$3,000.00
Full Name Brian Cain			
Mailing Address 16411 Robinson Road			
City, State, Zip Code Gulfport, MS 39503-4879			
Name of Employer (Required) Lakeview Management Inc.	Ag	gregate r-to-date	\$3,000.00

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Committee	Friends Of Tate Reeves		
Name of Candidate or Committee  Reporting Period01/01/2017			
Renorting Period	ーーヘビリカで		

ITEMIZED RECEIPTS	·	Date	Amount of each receipt
Source: Corporation PAC Individual Loan	(Mo.	, Day, Year)	this period
Source:	10/1	6/2017	\$500.00
Full Name James M Currie	1		
Mailing Address 27020 Road 221	+		
City, State, Zip Code Picayune, MS 39466-8515	+		
Name of Employer (Required) Woodland Cottage LLC		Aggregate	\$500.00
Occupation (Required) Executive		ear-to-date	Amount of each
Source: Corporation PAC Individual Loan	(N	Date lo., Day, Year)	receipt this period
Other (please specify)	04	4/13/2017	\$500.00
Full Name Billy Nowell			
Mailing Address 406 Norman Circle	-		
City, State, Zip Code Cleveland, MS 38732-8714			
Name of Employer (Required) Partnership Properties		Aggregate Year-to-date	\$500.00
Occupation (Required) Realtor  FI RAG		Date (Mo., Day, Yea	Amount of each receipt
Source: Corporation	=		\$1,000.00
Other (please specify)		11/03/2017	ψ1,000.00
Full Name Mississippi Chiropractors PAC			
Mailing Address 4294 Lakeland Dr Ste 100			
City, State, Zip Gode Flowood, MS 39232-9510			
Name of Employer (Required)		Aggregate Year-to-da	ate
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Y	Amount of each receipt Year) this period
Source:	<del></del> _	10/03/2017	\$10,000.0
Full Name Franc Lee		10/00(201)	
Mailing Address 402 Daniel Dr			
City, State, Zip Code Brandon, MS 39047-7396			
Name of Employer (Required) First Tower Corp.		Aggres Year-to-	gate \$10,000.
Occupation (Required) President and CEO			

•	Page	_
Name of Candidate or Committee	Friends Of Tate Reeves	
01/01/2017	through	
Reporting Period	- OFIDTC	

ITEMIZED RECEIPTS	1	Date	Amount o	ot
Source: Corporation PAC L Individual	(Mo.,	Day, Year)	this pe	
Other (please specify)	12/12	/2017		\$500.00
Full Name Moses H. Feagin				
Mailing Address 2019 Marisol Ct.	1			
City, State, Zip Code Biloxi, MS 39531-2412	1			
Name of Employer (Required) Mississippi Power Company	- A	Aggregate ear-to-date		\$500.00
Occupation (Required) Vice President	<del></del>		Amoun	t of each
Source: Corporation PAC Individual Loan	(M	Date o., Day, Year) 		eipt period
Other (please specify)	06	/12/2017	<u> </u>	\$5,000.00
Full Name Mississippi Dental PAC				
Mailing Address 439B Katherine Drive				
City, State, Zip Code Flowood, MS 39232-9781				
Name of Employer (Required)		Aggregate		\$5,000.00
Occupation (Required)		Year-to-date Date (Mo., Day, Yea	ł	unt of each receipt is period
Source: Corporation				\$5,000.00
Other (please specify)		11/16/2017		\$5,000.00
Full Name William B. Rayburn				
Malling Address 1214 Office Park Drive				
City, State, Zip Code Oxford, MS 38655-3597				
Name of Employer (Required) FNC, Inc		Aggregate Year-to-da	te	\$5,000.00
Occupation (Required)  CEO  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Y	At	nount of each receipt this period
Source:		10/16/2017		\$1,000.00
Full Name Sidney P. Allen Jr.		10/10/2017		
Mailing Address 200 Brae Burn Dr				
City, State, Zip Code Jackson, MS 39211-2504				
Name of Employer (Required)  Butler Snow Omara Stevens & Cannada		Aggreg	ate	\$1,000.0

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	Friends Of Tate Reeves		
Name of Candidate or Committee	through 12/31/2017		
Reporting Period			

ITEMIZED RECEIPTS	1	Amount of each receipt
ource: 🖹 Corporation 🔲 PAC 🔲 Individual 🔲 Loan	Date (Mo., Day, Year)	this period
Other (please specify)	10/02/2017	\$1,000.00
ull Name UnitedHealth Group, Inc.		
Mailing Address PO Box 1459		
City, State, Zip Code Minneapolis, MN 55440-1459		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)	Date	Amount of each receipt
Source: Corporation PAC Individual Loan	(Mo., Day, Year)	this period
Other (please specify)	06/21/2017	\$500.00
Full Name Norfolk Southern Corporation		
Mailing Address RSA Plaza Suite 192, 770 Washington Ave		
City, State, Zip Code Montgomery, AL 36104-3818		
Name of Employer (Required)	Aggregate Year-to-date	\$500.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt r) this period
Source:	-	\$10,000.00
Full Name Clay Holladay	09/11/2017	
Mailing Address 304 Timber Ridge Road		
City, State, Zip Code Meridian, MS 39305-1449		
Name of Employer (Required) WMLV Radio	Aggregate Year-to-da	te
Occupation (Required)  Owner  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Y	Amount of each receipt this period
Other (please specify)	04/04/2017	\$1,000.00
Full Name James H. Clayton		
Mailing Address 103 E Gresham Street		
City, State, Zip Code Indianola, MS 38751-2422		
Name of Employer (Required) Planters Bank	Aggreg Year-to-	ate \$1,000.0
Occupation (Required) Banker	, , ,	•

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Committee	Friends Of Tate Reeves	12/31/2017			
lame of Candidate or Committee	through	- TIDTC			

ITEMIZED RECEIPT	1	Date , Day, Year)	re	it of each ceipt period
Source: LI Corporation		5/2017		\$500.00
Full Name Floyd Sulser Jr.				
Mailing Address 105 Bridgeview Circle				
City, State, Zip Code Ridgeland, MS 39157-8617				
Name of Employer (Required) Southern Lumber Company		Aggregate Year-to-date		\$500.00
Occupation (Required)  President  Pource:  Corporation  PAC  Individual  Loan		Date No., Day, Year)	1	ount of each receipt his period
Source: Corporation  Other (please specify)		2/07/2017	<u> </u>	\$206.00
Full Name Frank Bordeaux				
Mailing Address 11633 Bluff Lane				
City, State, Zip Code Gulfport, MS 39503-6150  Name of Employer (Required) Stewart Sneed Hewes		Aggregate Year-to-date	+-	\$2,706.00
Occupation (Required) Insurance  Source: Corporation PAC Individual Loan		Date (Mo., Day, Yea	7	receipt this period \$1,000.00
Other (please specify)  Full Name Helena Chemical Company		10/09/2017		
Helena Chemical Company  Mailing Address 225 Schilling Blvd STE 300		<b></b>		
City, State, Zip Code Collierville, TN 38017-7177		<del> </del>	_	
Name of Employer (Required)		Aggregat Year-to-da	te ate	\$1,000.00
Occupation (Required)		Date (Mo., Day,		Amount of each receipt this period
Source: Corporation PAC  Other (please specify)		11/16/2017	,	\$5,000.00
Full Name Chan Patel		-		
Mailing Address 5009 Bluff Cv				
City, State, Zip Code Oxford, MS 38655-5978				\$5,000.0
City, State, Zip Code Oxford, MS 38655-5978		Aggre		

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	Friends Of Tate Reeves	
Name of Candidate or Committee	through12/31/2017	
Reporting Period	- DECEMBE	

ITEMIZED RECEIPT	Date	Amount of each receipt
Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan	(Mo., Day, Year)	this period
Source. LLC  ☐ Other (please specify)	10/12/2017	\$2,500.00
Full Name GOVEASE Auction		
Mailing Address 127 Bremen Way		
City, State, Zip Code Madison, MS 39110-6949		
Name of Employer (Required)	Aggregate	\$2,500.00
Occupation (Required)	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/13/2017	\$5,000.00
Full Name Optometry For Progress		
Mailing Address 141 Executive Drive Suite 5		
City, State, Zip Code Madison, MS 39110-8457		
Name of Employer (Required)	Aggregate	\$5,000.00
Occupation (Required)	Year-to-date  Date  (Mo., Day, Ye	Amount of each receipt
Source: Corporation	(Mo., Day, 10	
Other (please specify)	09/12/2017	\$1,000.00
Full Name John N. Palmer		
Mailing Address PO Box 3747		
City, State, Zip Code Jackson, MS 39207-3747		
Name of Employer (Required) GulfSouth Capital	Aggrega Year-to-d	ate
Occupation (Required)  Chairman  PAC Individual Loan	Date (Mo., Day,	Amount of each receipt
Source: Corporation  Other (please specify)	09/16/2017	\$200.00
Full Name George Simmerman	33/13/20	
Malling Address 11650 Jeff Hamilton Road		
City, State, Zip Code Mobile, AL 36695-8019		
Name of Employer (Required) Huntington Ingalls Industries	Aggre Year-to	gate \$200.00
Occupation (Required) Vice President and Chief Counsel	Year-to	)-uato

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	Friends Of Tate Reeves			
Name of Candidate or Committee	through 12/31/2017	·		
01/01/2017		•		

01/01/2017	•			4
Reporting Period O1/01/2017  ITEMIZED RECEIPTS		Date	Amo	unt of each receipt
PAC Individual Loan		Day, Year)		is period
Source: Corporation PAC  Other (please specify)		5/2017		\$1,000.00
Full Name Sage Advice, Inc.				
Mailing Address PO Box 1845	-			
City, State, Zip Code Madison, MS 39130-1845	<del> </del>			
Name of Employer (Required)	+-	Aggregate 'ear-to-date		\$1,000.00
Occupation (Required)	+		A	nount of each receipt
Downstation PAC Individual Loan	(M	Date lo., Day, Year) 		this period
Source:	10	)/16/2017	<u> </u>	\$10,000.00
Full Name J. R. Carter Sr.				
Mailing Address PO Box 1600	_			
City, State, Zip Code Gulfport, MS 39502-1600	-			
Name of Employer (Required) Island View Resort	$\dashv$	Aggregate Year-to-date		\$10,000.00
Occupation (Required)  Executive  DRAG Elindividual Loan		Date (Mo., Day, Yea	r)	Amount of each receipt this period
Source: Corporation C PAG	=			\$4,000.00
Other (please specify)		10/20/2017		
Full Name Thomas Friedkin				
Mailing Address 1375 Enclave Parkway		<u></u>		
City, State, Zip Code Houston, TX 77077-2026				
Name of Employer (Required) Gulf States Toyota, Inc.		Aggregat Year-to-da	e ite	\$4,000.00
Occupation (Required) Executive		Date (Mo., Day,		Amount of each receipt this period
Source: Corporation				\$250.00
Other (please specify)		04/11/2017		
Full Name William C. Carroll				
Mailing Address 455 Woodland Drive				
City, State, Zip Code Yazoo City, MS 39194-9708				
Name of Employer (Required) Livingston Ins. Agency		Aggre Year-to	gate -date	\$250.00
Occupation (Required) Insurance Agent		1		SS04-05
				5504-00

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	Friends Of Tate Reeves	
Name of Candidate or Committee	through12/31/2017	
Reporting Period	CEIDTC	

Reporting Period ITEMIZED RECEIP	Ì	Date ., Day, Year)	Amount of each receipt this period
Source: Corporation C PAC C		15/2017	\$250.00
Full Name James B. Randall III		15/2017	
Malling Address 106 Seymour Drive			
		Aggregate	\$250.00
Number	}	Year-to-date	
Occupation (Required)  President  President  PAC Individual Loan	(1	Date No., Day, Year)	Amount of each receipt this period
Source: Corporation  Other (please specify)	=-	0/16/2017	\$1,000.00
Full Name Wellington Associates, Inc.			
Mailing Address 7 River Bend Place			
City, State, Zip Code Flowood, MS 39232-7624			
Name of Employer (Required)		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source: Corporation PAC Individual Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Source:		11/08/2017	\$5,000.00
Full Name C. W. Chapman			
Mailing Address PO Box 550			
City, State, Zip Code Oxford, MS 38655-0550			
Name of Employer (Required) Cornerstone Capital Corporation		Aggregate Year-to-date	\$5,000.00
Occupation (Required)  Director, President  Source:  Corporation  PAC  Individual  Loan		Date (Mo., Day, Ye	Amount of each receipt
Source: Corporation  Other (please specify)		11/16/2017	\$5,000.00
Full Name Robert H. Dunlap		-	
Mailing Address 880 County Road 202			
City, State, Zip Code Abbeville, MS 38601-9797			
Name of Employer (Required) Dunlap & Kyle Co, Inc.		Aggrega Year-to-d	te \$5,000.00
Occupation (Required) Chairman		rear-to-d	

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	Friends Of Tate Reeves
Name of Candidate or Committee	12/31/2017 through
Reporting Period 01/01/2017	CIDTC

Reporting Period UT/01/2011  ITEMIZED RECEIP  Source: Corporation PAC Individual Loan	1	Date Day, Year)	Amount of each receipt this period
Source: Li Corporation  Other (please specify)	= 10/16	5/2017	\$1,000.00
Full Name Enterprise Holdings, Inc PAC			
Mailing Address 600 Corporate Park Drive			
City, State, Zip Code Saint Louis, MO 63105-4204			
Name of Employer (Required)	- T	Aggregate ear-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date o., Day, Year)	Amount of each receipt this period
Source: LI Corporation LLC  Other (please specify)	08	/31/2017	\$5,000.00
Full Name Denmiss LLC			
Mailing Address PO Box 320579			
City, State, Zip Code Flowood, MS 39232-0579  Name of Employer (Required)		Aggregate Year-to-date	\$5,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Cther (please specify)		10/11/2017	\$500.00
Full Name Mississippi Physical Therapy Association PAC			
Mailing Address 1055 N Fairfax St Ste 205			
City, State, Zip Code Alexandria, VA 22314-1541			
Name of Employer (Required)		Aggregate Year-to-date	\$500.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Ye	Amount of each receipt
Source: LI Corporation  LLC  Tother (please specify)		09/15/2017	\$5,000.00
Full Name Southeastern Timber Products, LLC		+	
Mailing Address PO Box 5327			
City, State, Zip Code Jackson, MS 39296-5327		-	
Name of Employer (Required)		Aggregat Year-to-d	\$5,000.00

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Name of Candidate or Committee  Reporting Period 01/01/2017	Friends Of Tate Reeves  through  TOPING		
	ITEMIZED RECEIPTS	Date (Mo., Day, Year)	Amount of each receipt this period

Reporting Period 01/01/2017 ITEMIZED RECEIPTS	(Mo., E	oate Day, Year)	re	nt of each eceipt s period
Source: Corporation	10/05/			\$1,000.00
Other (please specify)	10/03/			
Full Name Denbury Resources, Inc.	<del> </del>			
Malling Address 5320 Legacy Drive	<del> </del>		1	
City, State, Zip Code Plano, TX 75024-3127	A	ggregate	1	\$1,000.00
Name of Employer (Required)	Y	ear-to-date	An	nount of each
Occupation (Required)  PAC Individual Loan	(M	Date o., Day, Year	1	receipt this period
Source: Corporation	10	/19/2017	1	\$250.00
Other (please specify)				
Full Name Gary A. Blair				
Mailing Address 223 Deer Run Trail NE			1	
City, State, Zip Code Brookhaven, MS 39601-3672  Brookhaven, MS 39601-3672  Legacy Land and Financial Consulting		Aggregate	<del></del>	\$250.00
Name of any		Year-to-da	te	Amount of each
Occupation (Required) Sales		Date (Mo., Day, Y	rear)	receipt this period
Source: Corporation LLC  Other (please specify)		10/20/2017		\$1,000.00
Full Name CoreCivic of Tennessee LLC				
Malling Address 10 Burton Hills Blvd		T		
City, State, Zip Code Nashville, TN 37215-6105				
Name of Employer (Required)		Aggre Year-to	gate -date	\$1,000.00
Name of Employer (1997)  Occupation (Required)  DRAC Individual Loan			ite iy, Year)	Amount of each receipt this period
Source: Corporation PAC Individual				\$1,000.00
Other (please specify)		12/12/2		-
Full Name Anthony L. Wilson				-
Mailing Address 2992 West Beach Blvd				
City, State, Zip Code Gulfport, MS 39501-1907  Nemo of Employer (Required) Mississippi Power Company		Ag	gregate	\$1,000.
Mattie or and		Yea	r-to-date	
Occupation (Required) President & CEO				SS04-05

Friends Of Tate Reeves	
Name of Candidate or Committee	

Reporting Period ITEMIZED RECEIPTS  Source: Corporation PAC Individual Loan	1	Date , Day, Year)	Amount of each receipt this period
Source: LI Corporation LLC  Other (please specify)	01/0	3/2017	\$1,000.00
Full Name Tindell Investments and Properties LLC	-		
Malling Address 20 Mockingbird Lane	-		
City, State, Zip Code Gulfport, MS 39507-1629			
Name of Employer (Required)		Aggregate /ear-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date lo., Day, Year)	Amount of each receipt this period
Source: Corporation  Other (please specify)	04	4/18/2017	\$1,000.00
Full Name R. B. Flowers Jr.			
Mailing Address 732 Friars Point Road			
City, State, Zip Code Clarksdale, MS 38614-9750  Name of Employer (Required) Self		Aggregate	\$1,000.00
Occupation (Required)  Farmer  Source:  Corporation  PAC  Individual  Loan		Year-to-date  Date (Mo., Day, Year	Amount of each receipt this period
Source:	=	10/16/2017	\$2,500.00
Full Name Frank Bordeaux			
Mailing Address 11633 Bluff Lane			
City, State, Zip Code Gulfport, MS 39503-6150			
Name of Employer (Required) Stewart Sneed Hewes		Aggregate Year-to-date	e
Occupation (Required) Insurance  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Ye	Amount of each receipt
Source: Corporation  Other (please specify)		04/03/2017	\$500.00
Full Name Mike P. Sturdivant Jr.		0,,00.2	
Mailing Address PO Box 230		-	
City, State, Zip Code Glendora, MS 38928-0230		_	
Name of Employer (Required) Staplcotn		Aggrega Year-to-d	te \$500.0
Occupation (Required) Executive		1ear-10-0	

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ottno	Friends Of Tate Reeves	40/04/2017	
Name of Candidate or Committee	through	12/31/2017	
Penorting Period		DTC	

Reporting Period ITEMIZED RECEIPTS  Source: Corporation PAC Individual Loan	Date (Mo., Day,	ļ	mount of each receipt this period
Source: LI Corporation  LLC  Other (please specify)	10/16/2017	,	\$1,000.00
Full Name Tellus Energy, LLC			
Mailing Address 602 Crescent Place			
City, State, Zip Code Ridgeland, MS 39157-8676			
Name of Employer (Required)	Aggre Year-to	gate o-date	\$1,000.00
Occupation (Required)	Da	ite	Amount of each receipt
Source: 🔲 Corporation 🔲 PAC 🖺 Individual 🔲 Loan	(Mo., Da	ıy, Year)	this period
Other (please specify)	11/02/2	017	\$1,000.00
Full Name Alfred McNair Jr.			
Mailing Address 2953 Bienville Blvd #142			
City, State, Zip Code Ocean Springs, MS 39564-4305			
Name of Employer (Required) Digestive Health Center PA	Ag	gregate r-to-date	\$1,000.00
Occupation (Required)  Physician  Figure 1 Individual 1 Loan		Date	Amount of each receipt this period
Source: Corporation PAC Individual  Other (please specify)		Day, Year)	\$2,000.00
Full Name LKQ Corporation Employee Good Government Fund		3/2017	
Mailing Address 500 W Madison St Ste 2800			
City, State, Zip Code Chicago, IL 60661-2506			
Name of Employer (Required)		Aggregate 'ear-to-date	\$2,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date o., Day, Year)	Amount of each receipt this period
Source:	10	/05/2017	\$500.00
Full Name James Herring			
Mailing Address 232 E Semmes Street			
City, State, Zip Code Canton, MS 39046-4530			
Name of Employer (Required) Herring, Long, and Crews		Aggregate Year-to-date	\$500.00
Occupation (Required) Attorney		100. 50	

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	Friends Of Tate Reeves	
Name of Candidate or Committee	through12/31/2017	
Reporting Period	CTIDTC	

ITEMIZED RECEIPTS	_	Date	Amount of each receipt
Source: Corporation PAC LI Individual L. Louis	(Mo.	, Day, Year)	this period
Other (please specify)	09/2	6/2017	\$5,000.00
Full Name Tommy E Dulaney	1		
Mailing Address 5601 10th Ave	_		
City, State, Zip Code Meridian, MS 39305-1925			
Name of Employer (Required) Structural Steel Services, Inc.		Aggregate (ear-to-date	\$15,000.00
Occupation (Required) Executive			Amount of each
Source: 🗆 Corporation 🖺 PAC 🔲 Individual 🗀 Loan	Date (Mo., Day, Year)		receipt this period
Other (please specify)	11	1/08/2017	\$1,000.00
Full Name General Motors Company PAC			
Mailing Address 25 Massachusetts Ave NW Ste 400			
City, State, Zip Code Washington, DC 20001-1427			
Name of Employer (Required)		Aggregate	\$1,000.00
Occupation (Required)  Source: Toporation PAC Individual Loan		Year-to-date  Date (Mo., Day, Year	Amount of each receipt this period
Source: Corporation  Other (please specify)	=	09/20/2017	\$500.00
Full Name Pathway Management Inc.		09/20/2017	
Mailing Address 763 Avery Boulevard N			
City, State, Zip Code Ridgeland, MS 39157-5218			
Name of Employer (Required)		Aggregate Year-to-dat	e
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Yo	Amount of each receipt ear) this period
Other (please specify)		10/11/2017	\$1,000.00
Full Name Mississippi Concrete Industries Association PAC		-	
Mailing Address 6700 Old Canton Rd Ste K		-	
City, State, Zip Code Ridgeland, MS 39157-1253			
Name of Employer (Required)		Aggrega Year-to-0	te \$1,000.00
Occupation (Required)		Year-to-c	

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lame of Candidate or Committee	Friends Of Tate Reeves through12/31/2017	
Reporting Period01/01/2017		

Reporting Period ITEMIZED RECEIPTS  Source: Corporation PAC Individual Loan	1	Date Day, Year)	Amount of each receipt this period
Source: Corporation  Other (please specify)		0/2017	\$1,000.00
Full Name Olivia Host	_		
Malling Address 270 Hidden Oaks Drive			
City, State, Zip Code Ridgeland, MS 39157-7000			
Name of Employer (Required) BKD		Aggregate ′ear-to-date	\$1,000.00
Occupation (Required) CPA  Source: Corporation PAC Individual Loan	(M	Date lo., Day, Year)	Amount of each receipt this period
Other (please specify)	04	1/18/2017	\$250.00
Full Name Rodney E. Frothingham  Mailing Address 375 N Ruby Avenue			
City, State, Zip Code Ruleville, MS 38771-3515  Name of Employer (Required) North Sunflower Medical Center		Aggregate	\$250.00
Occupation (Required)  Physician  Source: Corporation PAC Individual Loan		Year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Source: Gorporation  Other (please specify)		04/18/2017	\$1,205.94
Full Name W. W. Gresham III			
Mailing Address PO Box 690			
City, State, Zip Code Indianola, MS 38751-0690			
Name of Employer (Required) Gresham Petroleum		Aggregate Year-to-date	\$2,205.94
Occupation (Required) Owner  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Yea	Amount of each receipt this period
Source:		08/20/2017	\$1,000.00
Full Name Ollie Dee Boykin Jr.			
Malling Address 3221 Ward Pineview Road		-	
City, State, Zip Code Lucedale, MS 39452-9523			
Name of Employer (Required) Horne		Aggregate Year-to-da	\$1,000.00

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lame of Candidate or Committee	Friends Of Tate Reeves through 12/31/2017		

ITEMIZED RECEIP	Date	Amount of each receipt
ource: 🖺 Corporation	(Mo., Day, Year)	this period
Other (please specify)	10/25/2017	\$1,000.00
ull Name Columbus Nissan, Inc.		
failing Address 100 Hwy 12 East		
Columbus, MS 39702-7828		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:   Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	08/08/2017	\$10,000.00
Full Name Joyce A. Wanek  Mailing Address 1205 Snell Isle Boulevard NE		
City, State, Zip Code St Petersburg, FL 33704		
Name of Employer (Required) N/A	Aggregate Year-to-date	\$10,000.00
Occupation (Required) Retired  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	12/21/2017	\$500.00
Full Name Garden Park Medical Center PAC		
Mailing Address 15200 Community Rd		
City, State, Zip Code Gulfport, MS 39503-3085		
Name of Employer (Required)	Aggregate Year-to-date	\$500.00
Occupation (Required)  Source: Gorporation PAC Individual Loan	Date (Mo., Day, Ye	Amount of each receipt ar) this period
Other (please specify)	04/18/2017	\$1,000.0
Full Name Dick Stevens		
Mailing Address PO Box 271		
City, State, Zip Code Isola, MS 38754-0271		
Name of Employer (Required) Consolidated Catfish Products	Aggrega Year-to-d	

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Name of Candidate or Committee 01/01/2017 Reporting Period

Friends Of Tate Reeves

through

12/31/2017

TEMIZED RECEIP TO THE Corporation □ PAC □ Individual □ Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/16/2017	\$1,000.00
II Name Roy Parker		
alling Address 2820 Narrow Gauge Road		
ty, State, Zip Code Bolton, MS 39041-9774		
ame of Employer (Required) Parker - McGill	Aggregate Year-to-date	\$1,000.00
ccupation (Required) Car Dealer		Amount of each
Source: 🛘 Corporation 🔲 PAC 💆 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	11/06/2017	\$3,000.00
Full Name G. Bennett Hubbard Jr.		
Mailing Address PO Box 414		
City, State, Zip Code Magee, MS 39111-0414		
Name of Employer (Required)  Advanced Health Care	Aggregate Year-to-date	\$3,000.00
Occupation (Required)  President  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/10/2017	\$1,000.00
Full Name John England		
Mailing Address 2034 Petit Bois Street S		
City, State, Zip Code Jackson, MS 39211-6709		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Attorney  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day, Ye	Amount of each receipt
Other (please specify)	10/17/2017	\$1,000.0
Full Name MS for Emergency Medical Services - PAC		
Mailing Address PO Box 1051		
City, State, Zip Code Oxford, MS 38655-1051		
		e \$1,000.

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Committee	Friends Of Tate Reeves 12/31/2017	
Name of Candidate or Committee Reporting Period01/01/2017	through	

Reporting Period O1/01/2017  ITEMIZED RECEIPTS  PAC Individual Loan		ate ay, Year)	Amount of each receipt this period
Source: Corporation PAC  Other (please specify)	08/01/2		\$3,000.00
Full Name Alben Norris Hopkins Sr.			
Malling Address 19208 Champion Circle			
City, State, Zip Code Gulfport, MS 39503-7706			
Name of Employer (Required) Hopkins Barvie & Hopkins	Ag	gregate r-to-date	\$3,000.00
Occupation (Required)  Attorney  PAC Individual Loan	<del></del>	Date , Day, Year)	Amount of each receipt this period
Source: LI Corporation  LLC  Other (please specify)	10/1	6/2017	\$1,000.00
Full Name McGraw Gotta Go LLC			
Mailing Address PO Box 267			
City, State, Zip Code Flora, MS 39071-0267			
Name of Employer (Required)		Aggregate /ear-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	-	Date No., Day, Year)	Amount of each receipt this period
Source: Corporation PAC LIC IN-KIND GYATHIC DISTAN	<del>-   1</del>	2/31/2017	\$975.00
Full Name Snapshot Publishing LLC			
Mailing Address P.O. Box 320925			
City, State, Zip Code Flowood, MS 39232-0925			
Name of Employer (Required)		Aggregate Year-to-date	\$975.00
Occupation (Required)		Date (Mo., Day, Ye	Amount of each receipt
Source: Corporation LI PAC  Other (please specify)		09/01/2017	\$1,000.00
Full Name Swisher International, Inc.		00/0 //20 12	
Mailing Address PO Box 2230			
City, State, Zip Code Jacksonville, FL 32203-2230			
Name of Employer (Required)		Aggrega Year-to-d	te \$1,000.00
Occupation (Required)		1601-000	

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Name of Candidate or Committee	Friends Of Tate Reeves		
Reporting Period 01/01/2017	through		<del> </del>

ITEMIZED RECEIP	<del></del>	Amount of each
ource: 🛘 Corporation 🖺 PAC 🔲 Individual 🔲 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	11/16/2017	\$20,000.00
Reynolds American Inc PAC		
ailing Address PO Box 718		
ty, State, Zip Code Winston Salem, NC 27102-0718		
ame of Employer (Required)	Aggregate	\$20,000.00
ccupation (Required)	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	09/18/2017	\$1,000.00
Full Name Gouras & Associates, LLC		
Mailing Address PO Box 1465		
City, State, Zip Code Ridgeland, MS 39158-1465		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)		Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/10/2017	\$1,000.00
Full Name Express Scripts, Inc.		
Malling Address 1 Express Way		
City, State, Zip Code Saint Louis, MO 63121-1824		
Name of Employer (Required)  Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt this period
Other (please specify)	04/06/2017	\$1,000.00
Full Name John F Phillips III	0-110012011	
Mailing Address 4042 Highway 16 W		
City, State, Zip Code Yazoo City, MS 39194-9243		
Name of Employer (Required) Self	Aggregate	\$1,000.00
Occupation (Required) Farmer	Year-to-date	ψ1,000101

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Name of Candidate or Committee	Friends Of Tate Reeves 12/31/2017	-
Reporting Period 010112011	DECEIPTS	

ITEMIZED RECEIPTS  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation  Other (please specify)	11/02/2017	\$5,000.00
Full Name Johnny L. Crane Jr.	11/02/2011	
Mailing Address PO Box 428		
City, State, Zip Code Fulton, MS 38843-0428		
Name of Employer (Required) F.L. Crane and Sons Construction	Aggregate	\$5,000.00
Occupation (Required) President	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Source: Other (please specify)	05/11/2017	\$500.00
Full Name James E. Turner III		
Mailing Address 407 Norman Circle		
City, State, Zip Code Cleveland, MS 38732-9722		
Name of Employer (Required) Sanders	Aggregate Year-to-date	\$500.00
Occupation (Required) Executive	Date (Mo., Day, Ye	Amount of each receipt
Source: Corporation		\$1,000.00
Other (please specify)  Full Name  James H Heidelberg	09/28/2017	
Mailing Address 1300 Driftwood Street		
City State, Zip Code Passagoula, MS 39567-7592		
Name of Employer (Required) Heidelberg Steinberger Colmer & Burrow, P.A.	Aggrega Year-to-d	ate
Occupation (Required)  Attorney  Source:  Corporation  PAC  Individual  Loan	Date (Mo., Day,	Amount of each receipt
Source. LLC LLC	12/07/2017	\$2,500.00
Full Name Instate Partners, LLC		
Mailing Address 909 Poydras Street Suite 2230		
City, State, Zip Code New Orleans, LA 70112-4003		
Name of Employer (Required)	Aggre Year-to	gate \$2,500.00 o-date
Occupation (Required)		

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Friends Of Tate Reeves  12/31/2017		
Name of Candidate or Committee		

Reporting Period 01/01/2017  ITEMIZED RECEIPTS		Ame	ount of each
Source: Corporation PAC Individual Loan	(Mo., Day, Year)	t	his period
Source: Corporation  Other (please specify)	10/10/2017		\$5,000.00
Full Name Drew T St. John II			
Mailing Address 104 Stonebridge Cove			
City, State, Zip Code MADISON, MS 39110			
Name of Employer (Required) New South Access & Environmental	Aggregate Year-to-date		\$5,000.00
Occupation (Required) CEO  PAC   Individual   Loan	Date (Mo., Day, Yea	1	mount of each receipt this period
Source: Corporation C PAC LLC  Other (please specify)	09/15/2017		\$1,000.00
Full Name Fast Break Strategies, LLC			
Mailing Address 2238 E Manor Drive			
City, State, Zip Code Jackson, MS 39211-6151			
Name of Employer (Required)	Aggregate Year-to-da	e te	\$1,000.00
Occupation (Required)	Date (Mo., Day,		Amount of each receipt this period
Source: Corporation CLC  Tother (please specify)	10/03/2017		\$15,000.00
Full Name Tower Loan of Mississippi LLC			
Mailing Address PO Box 320001			
City, State, Zip Code Flowood, MS 39232-0001			
Name of Employer (Required)	Aggres Year-to	ate date	\$15,000.00
Occupation (Required)  Source: Corporation PAC Individual Coan	Dat (Mo., Da		Amount of each receipt this period
Source: Corporation  Other (please specify)	10/16/20	<del></del> 17	\$500.00
Full Name Gerard R. Gibert			
Mailing Address PO Box 1020			
City, State, Zip Code Ridgeland, MS 39158-1020			
Name of Employer (Required) Venture Technologies	Agg	regate -to-date	\$500.00
Occupation (Required) CEO	1 ear		

Name of Candidate or Committee Friends Of Tate Reeves 12/31/2017 through 12/31/2017		Page Page 10	03 of 126	
Reporting Period 01/01/2017	EMIZED REC	EIPTS		
	Individual D Loan		Date	Amount of each receipt

ITEMIZED RECEIP	TS	
Source: Toorporation ☐ PAC ☐ Individual ☐ Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	06/26/2017	\$1,000.00
Full Name Anheuser Busch Companies	00/20/2011	
Malling Address 1 Busch Place		
City, State, Zip Code Saint Louis, MO 63118-1849		
Name of Employer (Required)	Aggregate	\$1,000.00
Occupation (Required)	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)  Full Name  Mississippi Medical PAC -State	04/13/2017	\$2,500.00
Mailing Address PO Box 2548		
City, State, Zip Code Ridgeland, MS 39158-2548		
Name of Employer (Required)	Aggregate Year-to-date	\$2,500.00
Occupation (Required)		Amount of each
Source: Corporation D PAC Individual D Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	12/12/2017	\$500.00
Full Name R Allen Reaves Jr.		
Mailing Address 5611 Via Ponte		
City, State, Zip Code Ocean Springs, MS 39564-6102		
Name of Employer (Required)  Mississippi Power Company	Aggregate Year-to-date	\$500.00
Occupation (Required)  Vice President  Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/02/2017	\$5,000.00
Full Name Barbaree Heaster		
Mailing Address 1 John Anderson Dr.		
City, State, Zip Code Ormond Beach, FL 32176-5768		
Name of Employer (Required) Rosenbaum Properties	Aggregate	\$5,000.00
Occupation (Required) Real Estate	Year-to-date	

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a vittaa	Friends Of Tate Reeves	
lame of Candidate or Committee	through12/31/2017	
Reporting Period	- OFIDTO	

Reporting Period ITEMIZED RECEIP	ΓS	
□ vetten □ PAC □ Individual □ Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Gource: Corporation  Other (please specify)	10/25/2017	\$500.00
Full Name Scott Hambleton	10/25/2017	
Mailing Address 137 Hampton Place		
City, State, Zip Code Madison, MS 39110-4546		
Name of Employer (Required)  American Society Of Addiction Medicine Inc	Aggregate	\$500.00
Occupation (Required) Physician	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/16/2017	\$2,500.00
Full Name Mississippi Bankers Association PAC		
Mailing Address PO Box 1091		
City, State, Zip Code Jackson, MS 39215-1091		
Name of Employer (Required)	Aggregate Year-to-date	\$2,500.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	04/06/2017	\$1,000.00
Full Name William H. Allen		
Mailing Address PO Box 2302		
City, State, Zip Code Tunica, MS 38676-2302		
Name of Employer (Required) A & J Planting Company	Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Executive  Source: Corporation PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt this period
Other (please specify)	10/04/2017	\$1,000.0
Full Name Wood Heating & Cooling LLC		
Mailing Address PO Box 5681		
City, State, Zip Code Pearl, MS 39288-5681		
Name of Employer (Required)	Aggregat Year-to-da	e \$1,000.
Occupation (Required)	Year-to-ua	

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Friends Of Tate Reeves		
Name of Candidate or Committee throughthrough		
Reporting Period ————————————————————————————————————		

Reporting Period ITEMIZED RECEIPTS		Date Day, Year)	re	it of each ceipt period
Source: Torporation PAC  Other (please specify)	10/13/2017		\$1,000.00	
Full Name Parkway Development, Inc.	-			
Mailing Address 385B Highland Parkway Suite 502	1			
City, State, Zip Code Ridgeland, MS 39157-6061	1			
Name of Employer (Required)	A	ggregate ear-to-date		\$1,000.00
Occupation (Required)	-	Date o., Day, Year)	1	ount of each receipt his period
Source: Corporation PAC  Other (please specify)		28/2017		\$4,000.00
Full Name Regions Financial Corporation PAC	-			
Mailing Address 1015 15th St NW Suite 920				
City, State, Zip Code Washington, DC 20005-2623				
Name of Employer (Required)		Aggregate Year-to-date	1	\$4,000.00
Occupation (Required)		Date (Mo., Day, Year	1	mount of each receipt this period
Source: Corporation C PAC  Other (please specify)		10/16/2017		\$2,500.00
Full Name Candice Lozano				
Mailing Address 5N530 Chambellan Lane				
City, State, Zip Code Wayne, IL 60184-2109				
Name of Employer (Required) B&B Gaming		Aggregate Year-to-dat	te	\$2,500.00
Occupation (Required)  Gov Relations  PAC Individual Loan		Date (Mo., Day, Y		Amount of each receipt this period
Source: Corporation Li PAC Li manual de la composition della composition de la composition della composition de la composition della composition de la composition della composition de la composition della composition della composition della compos		09/24/2017		\$500.00
Full Name Andrew Kellum		09/2-4/20		
Mailing Address 139 Chickasaw Trail		-		
City, State, Zip Code Saltillo, MS 38866-9784		-		
Name of Employer (Required) Hematoglogy Ongology Assoicates		Aggreg Year-to-	ate date	\$500.00
Occupation (Required) Physician (Oncologist)				ce04-05

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Name of Candidate or Committee Reporting Period01/01/2017	Friends Of Tate Reeves through	12/31/2017	
Vehorma,			

ITEMIZED RECEIP	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)  Full Name  Denbury Resources PAC	10/04/2017	\$4,000.00
Mailing Address 5320 Legacy Drive		
City, State, Zip Code Plano, TX 75024-3127		
lame of Employer (Required)	Aggregate	\$4,000.00
Occupation (Required)	Year-to-date	Amount of each
Source: 🗆 Corporation 🗀 PAC 🖺 Individual 🗀 Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/04/2017	\$1,000.00
Full Name Meade W Mitchell		
Mailing Address 4148 Dogwood Drive		
City, State, Zip Code Jackson, MS 39211-6520		
Name of Employer (Required)  Butter Snow Omara Stevens & Cannada  Occupation (Required)  Attorney	Aggregate Year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	11/07/2017	\$500.00
Full Name Richard Todd Little		
Mailing Address 37 Marais Ridge		
City, State, Zip Code Hattiesburg, MS 39402-7954		
Name of Employer (Required)  Malt Industries Inc  Occupation (Required)  Executive	Aggregate Year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year	Amount of each receipt ) this period
Other (please specify)	10/04/2017	\$250.00
Full Name Catherine Barnes	10/04/2011	
Mailing Address 173 Glenway Drive		
City, State, Zip Code Jackson, MS 39216-4102		
Name of Employer (Required)	Aggregate	\$250.0
Occupation (Required) Retired	Year-to-date	

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Name of Candidate or Committee	Friends Of Tate Reeves through12/31/2017	
Reporting Period	ITEMIZED RECEIPTS	Amount of each

### receipt Date ☐ Loan ☐ Individual this period (Mo., Day, Year) PAC Corporation Source: \$500.00 Other (please specify) 10/05/2017 Mississippi Society of Anesthesiologists Full Name Mailing Address PO Box 13405 Jackson, MS 39236-3405 City, State, Zip Code Name of Employer (Required) Aggregate \$500.00 Year-to-date Occupation (Required) Amount of each receipt Date ☐ Loan Individual (Mo., Day, Year) this period ☐ PAC □ Corporation Source: \$1,000.00 Other (please specify) 04/11/2017 James C Hays **Full Name** 4342 N Honeysuckle Lane **Mailing Address** Jackson, MS 39211-6131 City, State, Zip Code Name of Employer (Required) \$1,000.00 Aggregate Retired Year-to-date Amount of each Occupation (Required) Cardiologist receipt Date ☐ Loan Individual this period (Mo., Day, Year) ☐ PAC ☐ Corporation Source: \$1,000.00 Other (please specify) 08/21/2017 Monica Sethi Harrigill **Full Name Mailing Address** 106 Gabriel Place Madison, MS 39110-8532 City, State, Zip Code Name of Employer (Required) Jackie's International \$1,000.00 Aggregate Year-to-date Amount of each Occupation (Required) President receipt Date ☐ Loan 🖺 Individual this period (Mo., Day, Year) ☐ PAC ☐ Corporation Source: \$3,000.00 Other (please specify) 11/06/2017 Avonna Cain Full Name 2352 N Country Club Lane **Mailing Address** Biloxi, MS 39532-3200 City, State, Zip Code Conner Cain Enterprise Name of Employer (Required) Aggregate \$3,000.00 Year-to-date Occupation (Required) Owner

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Name of Candidate or Committee	Friends Of Tate Reeves	/2017
Name of Candidate 0.01/01/2017	through	

Reporting Period 01/01/2017 ITEMIZED RECEIP	rs	
File vertice PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Source:	12/06/2017	\$750.00
Full Name Koch Industries, Inc.	12/06/20	
Malling Address 4111 E 37th Street N		
City, State, Zip Code Wichita, KS 67220-3203		
Name of Employer (Required)	Aggregate Year-to-date	\$750.00
Occupation (Required)	Date	Amount of each receipt
Source: Torporation PAC Individual Loan	(Mo., Day, Year)	
Other (please specify)	09/22/2017	\$5,000.00
Full Name Waters International Trucks		
Malling Address PO Box 4157		
City, State, Zip Code Meridian, MS 39304-4157		
Name of Employer (Required)	Aggregate Year-to-date	\$5,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Ye	Amount of each receipt
Other (please specify)	08/15/2017	\$2,500.00
Full Name Brandon G Payne		
Mailing Address PO Box 6213		
City, State, Zip Code Gulfport, MS 39506-6213		
Name of Employer (Required) The Payne Group	Aggregat Year-to-da	ate
Occupation (Required)  Owner  Source:  Corporation PAC Individual Loan	Date (Mo., Day,	Amount of each receipt
Source:	10/13/2017	\$2,500.00
Full Name MASCA PAC		
Mailing Address 408 W Parkway Pl		
City, State, Zip Code Ridgeland, MS 39157-6010		
Name of Employer (Required)	Aggre- Year-to	gate \$2,500.0
Occupation (Required)	Teat-to	

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Name of Candidate or Committee Friends Of Tate Reeves  Reporting Period 01/01/2017 through 12/31/2017			
ITEMIZED RECEIPTS  Source: Corporation PAC Individual Loan		Date Day, Year)	Amount of each receipt this period
Other (please specify)	09/20	0/2017	\$1,000.00
Full Name Regional Care LLC			
Mailing Address 763 Avery Blvd. N.			
City, State, Zip Code Ridgeland, MS 39157-5218	1		
Name of Employer (Required)		Aggregate ear-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	+	Date o., Day, Year)	Amount of each receipt this period
Other (please specify)	10	/12/2017	\$1,000.00
Full Name Financial Service Centers of MS PAC	+		
Mailing Address PO Box 37			
City, State, Zip Code Fulton, MS 38843-0037	+		
Name of Employer (Required)		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source: Corporation PAC Individual Loan	1	Date Mo., Day, Year)	Amount of each receipt this period
Other (please specify)		10/12/2017	\$1,000.00
Full Name Rehabilitation Centers, LLC Pontotoc	_		
Mailing Address 1814 Highway 15 North			
City, State, Zip Code Pontotoc, MS 38863-6962	$\dashv$		
Name of Employer (Required)		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Source:  Corporation PAC Individual Loan		Date (Mo., Day, Year	Amount of each receipt this period
Source:		10/16/2017	\$1,000.00

Full Name

Mailing Address

City, State, Zip Code

Occupation (Required)

Name of Employer (Required)

William Ware

271 Highland Place Drive

Owner

Jackson, MS 39211-5910

Mid State Construction

\$1,000.00

Aggregate

Year-to-date

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lame of Candidate	or Committee	Friends Of Tate Reeves				
	01/01/2017	through	12/31/2017			

Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Comcast Corporation & NBCUniversal PAC	12/14/2017	\$5,000.00
Mailing Address 1 Comcast Ctr 1701 JFK Boulevard		
City, State, Zip Code Philadelphia, PA 19103-2838		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Weyerhaeuser NR Company	11/01/2017	\$1,000.00
Mailing Address 220 Occidental Ave S		
City, State, Zip Code Seattle, WA 98104-3120		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Friends Of MSMS	11/07/2017	\$500.00
Mailing Address 1202 S 34th Ave		
City, State, Zip Code Hattiesburg, MS 39402-3060		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
Source: ** Corporation	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Parkwood BHS	10/06/2017	\$1,000.00
Mailing Address 8135 Goodman Road		
City, State, Zip Code Olive Branch, MS 38654-2103		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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Name of Candidate or Committee	Friends Of Tate Reeves through 12/31/2017	
Reporting Period	TENNIZED DECEIPTS	

ITEMIZED RECEIF	Date (Mo., Day, Year)	Amount of each receipt this period
ource:	04/10/2017	\$1,000.00
ull Name Barry Bridgforth	04/10/2017	
failing Address 16164 Hwy 432		
Pickens, MS 39146-3133		
ame of Employer (Required) Henry, Barbour, DeCell & Bridgforth Ltd	Aggregate	\$1,000.00
Occupation (Required) Attorney	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	08/30/2017	\$1,000.00
Full Name Mississippi Manufactured Housing Association PAC		
Mailing Address PO Box 320369		
City, State, Zip Code Jackson, MS 39232-0369		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)		Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	09/26/2017	\$2,500.00
Full Name AT&T Mississippi Political Action Committee		
Mailing Address 111 E Capitol St Ste 6030		
City, State, Zip Code Jackson, MS 39201-2108		
Name of Employer (Required)	Aggregate Year-to-date	\$2,500.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Yea	Amount of each receipt r) this period
Source:		\$4,000.00
Full Name Johnny Morgan	11/16/2017	
Mailing Address PO Box 309		
City, State, Zip Code Oxford, MS 38655-0309		
Name of Employer (Required) Morgan White Group	Aggregate	\$4,000.0
Occupation (Required) President	Year-to-dat	

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Name of Candidate or Committee Friends Of Tate Reeves  12/31/2017		
01/01/2017 (illough		
ITEMIZED RECEIPTS		
Figure PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Source:	<u> </u>	\$1,000.00
Full Name Steele Farms	04/17/2017	Ψ1,000.00
Malling Address 40 Riverside Road	-	
City, State, Zip Code Hollandale, MS 38748-9743	<u> </u>	
Name of Employer (Required)	Armrogate	*** 000.00
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: Corporation PAC Individual C Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	04/07/2017	\$1,000.00
Full Name John Dean Jr.	04/07/2011	
Mailing Address PO Box 272	_	
City, State, Zip Code Leland, MS 38756-0272		
Name of Employer (Required) Self	Aggregate	\$1,000.00
Occupation (Required) Realtor	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/24/2017	\$1,000.00
Full Name Gulf States Toyota, Inc.		
Mailing Address 1375 Enclave Parkway		
City, State, Zip Code Houston, TX 77077-2026		
Name of Employer (Required)	Aggregate	\$1,000.00
Occupation (Required)	Year-to-date	Amount of each
Source: ☼ Corporation ☐ PAC ☐ Individual ☐ Loan	Date (Mo., Day, Year	receipt
Other (please specify)	40/16/2017	\$1,000.00

Brentwood Behavioral Healthcare Of MS

Jackson, MS 39232-8839

3531 Lakeland Drive

Full Name

**Mailing Address** 

City, State, Zip Code

Occupation (Required)

Name of Employer (Required)

\$1,000.00

10/16/2017

Aggregate

Year-to-date

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Name of Candidate or Committee 01/01/2017 Reporting Period

Friends Of Tate Reeves

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12/31/2017

ITEMIZED RECEIP	10	
Source: 🗆 Corporation 🖺 PAC 🔲 Individual 🗀 Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	11/13/2017	\$1,000.00
Independent Insurance Agents of Mississippi PAC		
Mailing Address 124 Riverview Dr		
Flowood, MS 39232-8908		
lame of Employer (Required)	Aggregate	\$1,000.00
Occupation (Required)	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/16/2017	\$1,000.00
Tellus Operating Group LLC		ť
Mailing Address 602 Crescent Place Suite 100		
City, State, Zip Code Ridgeland, MS 39157-8676		
Name of Employer (Required)  Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	12/30/2017	\$5,000.00
Full Name Roger L Hancock		
Mailing Address PO Box 207		
City, State, Zip Code Bentonia, MS 39040		
Name of Employer (Required) WOSO Red Hancocks  Occupation (Required) Construction	Aggregate Year-to-date	\$6,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	09/22/2017	\$1,000.00
Full Name Cornerstone Government Affairs Inc.		
Mailing Address 300 Independence Ave SE		
City, State, Zip Code Washington, DC 20003-1021		
Name of Employer (Required)	Aggregate	\$1,000.00
Occupation (Required)	Year-to-date	\$1,000.00

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Name of Candidate or Committee
Reporting Period 01/01/2017

Friends Of Tate Reeves

\_\_ through \_\_\_\_ 12/31/2017

Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marty Davidson	07/19/2017	\$2,500.00
Mailing Address PO Box 3804		
City, State, Zip Code Meridian, MS 39303-3804		
Name of Employer (Required) Southern Pipe & Co LLC		-
Occupation (Required) Owner	Aggregate Year-to-date	\$2,500.00
Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thad Varner	10/02/2017	\$1,000.00
Mailing Address 2460 Meadowbrook Road		
City, State, Zip Code Jackson, MS 39211-6553		
Name of Employer (Required)  Butler Snow Omara Stevens & Cannada		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Gharles E. Ross	10/04/2017	\$500.00
Malling Address PO Box 651		
City, State, Zip Code Jackson, MS 39205-0651		
Name of Employer (Required) Wise Carter Child & Caraway, P.A.		•
Occupation (Required) Attorney	Aggregate Year-to-date	\$500.00
Source: ** Corporation	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Franks, Franks, Jerrell & Wilemon, P.A. CPAs	10/11/2017	\$250.00
Mailing Address PO Box 355		
City, State, Zip Code Fulton, MS 38843-0355		
City, State, Zip Code Fulton, MS 38843-0355  Name of Employer (Required)		

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*****	Friends Of Tate Reeves 12/31/2017
Name of Candidate or Committee  Only 1/2017  Only 1/2017	through

Reporting Period 01/01/2017 ITEMIZED RECEIPTS	D (Mo., D	ate ay, Year)	rec	of each eipt period
Source: Corporation C PAC	09/21/2			\$250.00
Other (please specify)	00.12			
Full Name Victor Mavar	<del> </del>			
Mailing Address PO Box 1910	<del> </del>			
City, State, Zip Code Biloxi, MS 39533-1910		ggregate		\$250.00
Name of Employer (Required) N/A	Ye	ar-to-date	Amo	ount of each
Occupation (Required) Retired	(Mc	Date ., Day, Year)	}	receipt his period
Source: Corporation	10/	16/2017	]	\$1,000.00
Other (please specify)				
Full Name Scott E Andress			1	
Mailing Address 758 Arlington Street			1	
City, State, Zip Code Jackson, MS 39202-1616		Aggregate		\$1,000.00
Name of Employer (Required) Balch & Bingham		Year-to-date		Amount of each
Occupation (Required)  Attorney  PAC Individual Loan		Date (Mo., Day, Ye	1	receipt this period
Source:    Corporation	=	08/30/2017		\$500.00
Other (please specify)		00,00121		
Full Name Patrick Gough		<b></b>		
Mailing Address 434 Laurel Court				
City, State, Zip Code Madison, MS 39110-7095		Aggrega	ate	\$500.00
Name of Employer (Required) Horne LLP	Year-t		iate	Amount of each
Occupation (Required) CPA-Partner		Date (Mo., Day, Year)		receipt this period
Source: Corporation		10/16/201		\$1,000.00
Other (please specify)		10/16/20		
Full Name Mississippi Bail Agents Association				
Mailing Address 413 S President Street Suite 111				
City, State, Zip Code Jackson, MS 39201-5006  Name of Employer (Required)		Agg	regate	\$1,000.
		Year-	to-date	
Occupation (Required)				SS04-05

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Name of Candidate or Committee Friends Of Tate Reeves  Reporting Period 01/01/2017 through 12/31/2017  ITEMIZED RECEIPTS			Amount o	of each
Loan Loan	Da (Mo., Da	te y, Year)	rece this pe	ipt eriod 
Source: Corporation LLC  Other (please specify)  LLC  Frower & Hewes PLLC	09/14/29	017		\$1,000.00
Mailing Address PO Box 119	<del></del>			
City, State, Zip Code Jackson, MS 39205-0119  Name of Employer (Required)	Aç Yes	igregate ar-to-date		\$1,000.00 unt of each
Occupation (Required)	(Mo	Date ., Day, Year)		receipt is period
Source: Corporation PAC		15/2017	<del></del>	\$10,000.00
Full Name Mississippi Independent Rx PAC				
Mailing Address 4209 Lakeland Dr Ste 399  City, State, Zip Code Flowood, MS 39232-9212		Aggregate	-	\$25,000.00
Name of Employer (Required)  Occupation (Required)		Year-to-date		Amount of each receipt this period
Source: Corporation PAC Individual		(Mo., Day, Y		\$10,000.00
Other (please specify)  Full Name Abdul Lala				
Mailing Address 2212 Causeyville Road  City, State, Zip Code Meridian, MS 39301-7401				
City, State, Zip Code Meridian, MS 39301-7401  Name of Employer (Required) Lala Enterprises		Aggrey Year-to	gate -date	\$10,000.00
Occupation (Required) Owner		Da (Mo., Da	te <sub>ly, Ye</sub> ar)	receipt this period
Source: Corporation PAC Individual Coan		09/14/2		\$5,000.0

Other (please specify)

Raytheon PAC

1100 Wilson Blvd Ste 1500

Arlington, VA 22209-3900

Full Name

Mailing Address

City, State, Zip Code

Name of Employer (Required)

Occupation (Required)

\$5,00

Aggregate Year-to-date

		Page	Page 117 0	f 126
videto or Committee	Friends Of Tate Reeves through 12/31/2017			-
Name of Candidate or Committee  Reporting Period	ITEMIZED RECEIPTS	L	pate	Amor
	[ 1 can	۔ ۱	··· Vear)	th

#### Amount of each receipt this period (Mo., Day, Year) ☐ Loan Individual ☐ PAC \$2,500.00 ☐ Corporation LLC Source: 12/15/2017 Other (please specify) Whitwell Holdings LLC **Full Name** PO Box 2547 Mailing Address Oxford, MS 38655-4900 City, State, Zip Code \$2,500.00 Aggregate Name of Employer (Required) Year-to-date Amount of each receipt Occupation (Required) Date this period (Mo., Day, Year) ☐ Loan Individual ☐ PAC \$1,000.00 Corporation 06/15/2017 Source: Other (please specify) Merck Sharp & Dohme Corporation · Full Name 304 Mossy Oak Court Malling Address Antioch, TN 37013-7313 City, State, Zip Code \$1,000.00 Aggregate Name of Employer (Required) Year-to-date Amount of each receipt Occupation (Required) Date this period (Mo., Day, Year) ☐ Loan Individual ☐ PAC Source: Corporation \$500.00 08/26/2017 Other (please specify) Ted Edwards **Full Name** 3 Legare Court Mailing Address Clinton, MS 39056-9324 City, State, Zip Code \$500.00 Haddox Reid Burkes & Calhoun PLLC Aggregate Name of Employer (Required) Year-to-date Amount of each CPA - Member in Charge of Tax Services receipt Occupation (Required) Date this period (Mo., Day, Year) ☐ Loan Individual ☐ PAC \$500. ☐ Corporation Source: 11/25/2017 Other (please specify) George Simmerman Full Name 11650 Jeff Hamilton Road Mailing Address Mobile, AL 36695-8019 City, State, Zip Code \$70 Aggregate Huntington Ingalls Industries Name of Employer (Required) Year-to-date Vice President and Chief Counsel Occupation (Required) SS04-05

Name of Candidate or Committee Friends Of Tate Reeves  Reporting Period 01/01/2017  ITEMIZED RECEIPTS	Page 118 of	126 Amount of each
	Date (Mo., Day, Year)	receipt this period \$1,000.00
Other (please specify)	09/21/2017	Ψ1,000
Mailing Address 55 Corporate Dr		
City, State, Zip Code Bridgewater, NJ 08807-1265  Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC Individual	09/21/2017	\$500.00
Other (please specify)		

☐ Loan

☐ Loan

Carey Johnston D. M. D.

1064 Stokes Road

Dentist

Canton, MS 39046-8407

☐ PAC

Jackson, MS 39211-6203

☐ PAC

4619 Main Street Suite A

Moss Point, MS 39563-3939

Endodontic Associates PLLC

Individual

Butler Snow Omara Stevens & Cannada

☐ Individual

Full Name

Mailing Address

Source:

**Full Name** 

Mailing Address

Source:

**Full Name** 

Malling Address

City, State, Zip Code

Name of Employer (Required)

Occupation (Required)

City, State, Zip Code

Name of Employer (Required)

Occupation (Required)

City, State, Zip Code

Name of Employer (Required)

Corporation

Other (please specify)

Corporation
 Corp

Other (please specify)

Arthur D. Spratlin, Jr.

2480 Sandridge Dr

Attorney

Millette Administrators, Inc.

Occupation (Required)

\$1,00

\$500.00

\$1,000.00

\$1,000.00

\$1,000.0

Amount of each receipt

this period

Amount of each receipt

this period

Aggregate

Year-to-date

pate

(Mo., Day, Year)

Aggregate

Year-to-date

Date

(Mo., Day, Year)

Aggregate

Year-to-date

09/22/2017

10/02/2017

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	Friends Of Tate Reeves	
Name of Candidate or Committee  On/01/2017  Deporting Period	through	

Reporting Period 01/01/2017 ITEMIZED RECEIPTS		Date Day, Year	1	ount of receip	ot
Source: Corporation PAC LIP	1	09/21/2017		\$1,000.00	
Other (please specify)	09/21		1		
Full Name Adams & Reese LLP			-		
Mailing Address 1018 Highland Colony Pkwy STE 800					
City, State, Zip Code Ridgeland, MS 39157-2057		Aggregate			\$1,000.00
Name of Employer (Required)		Year-to-da		Amour	nt of each
Occupation (Required)  PAC Individual Loan	1)	Date Mo., Day, Y	1	re	ceipt period
Source: LLC  Other (please specify)	1	0/13/2017	-		\$1,000.00
Full Name Rehabilitation Centers LLC					
Mailing Address P.O. Box 1130  City, State, Zip Code Magee, MS 39111-1130					
City, State, Zip Code Magee, MS 39111-1130  Name of Employer (Required)		Aggre Year-to	gate		\$1,000.00
Occupation (Required)		Di	ite iy, Year)	l	receipt this period
Source: Corporation LLC  Other (please specify)		04/18/2	017	-	\$250.00
Full Name Viking Range LLC				+-	
Mailing Address 111 Front Street				+-	
City, State, Zip Code Greenwood, MS 38930-4442		A	gregate	+	\$250.00
Name of Employer (Required)  Occupation (Required)  El RAC					Amount of each receipt this period
Source: Corporation			05/2017	-	\$2,500.0
Other (please specify)			05/2011		
Full Name Mississippi Physicians PAC					
Mailing Address 404 W Parkway Pl					
City, State, Zip Code Ridgeland, MS 39157-6010  Name of Employer (Required)			Aggrega Year-to-	ate late	\$2,50
Occupation (Required)					SS04-05

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Name of Candidate or Committee	Friends Of Tate Reeves through 12/31/2017			<i>.</i> 
Reporting Period 01/01/2017	ITEMIZED RECEIPTS	<del></del>		Amount o
			ate av, Year)	recei this pe

Reporting Period	1	Date Day, Year)	T*	nt of each eceipt s period
Source: Corporation PAC  Other (please specify)	10/03	3/2017		\$1,000.00
Full Name Nucor Steel Recyclers of Mississippi PAC	1			
Mailing Address 3630 Fourth Street	1			
City, State, Zip Code Flowood, MS 39232-2000	1			
Name of Employer (Required)	+	Aggregate /ear-to-date		\$1,000.00
Occupation (Required)  Source:   Corporation PAC Individual Loan		Date lo., Day, Year)	1	nount of each receipt this period
Source: LI Corporation:  LP  The Other (please specify)	1:	2/14/2017		\$1,000.00
Full Name Plains Marketing LP	-			
Mailing Address PO Box 4648				
City, State, Zip Code Houston, TX 77210-4648		<del>.</del>		
Name of Employer (Required)		Aggregate Year-to-date	1	\$1,000.00
Occupation (Required)  Source: Torporation PAC Individual Loan		Date (Mo., Day, Ye	ar)	Amount of each receipt this period
Source: Corporation  Other (please specify)		10/16/2017		\$1,000.00
Full Name Southern Air Conditioning Supply, Inc.				
Mailing Address PO Box 97478				
City, State, Zip Code Pearl, MS 39288-7478				
Name of Employer (Required)		Aggrega Year-to-d	te ate	\$1,000.00
Occupation (Required)		Date (Mo., Day,		Amount of each receipt this period
Source: LI Corporation		10/24/201	<del></del> 7	\$2,500.00
Other (please specify)  Full Name Cable PAC MCTA		10/2 //2		
Mailing Address PO Box 55867				
City, State, Zip Code Jackson, MS 39296-5867				
Name of Employer (Required)		Aggr-	egate o-date	\$2,500.0
Occupation (Required)		1001		0004.05

		Page	Page 121 of 126
itten	Friends Of Tate Reeves		
Name of Candidate or Committee	through		
Reporting Period	DECEIDTS		

Reporting Period 01/01/2017  ITEMIZED RECEIPTS  Individual   Loan	D	ate	Amount of each receipt this period
Source: Torporation PAC Lindividual		ay, Year)	\$23,569.76
Other (please specify)	12/31/2	2017	Ψ20 01
Full Name Interest Earnings	<u> </u>		
Mailing Address 1667 Lelia Drive			
City, State, Zip Code Jackson, MS 39216-4818	T		
Name of Employer (Required)	Ag	ggregate ar-to-date	\$23,569.76
Occupation (Required)	100		Amount of each receipt
I ndividual Loan	(Mo	Date ., Day, Year)	this period
Source: LI Corporation		18/2017	\$250.00
Other (please specify)	- 041	18/2011	
Full Name Merlin S. Richardson			
Mailing Address 12 Greer Street			
City, State, Zip Code Anguilla, MS 38721-9518			\$250.00
Name of Employer (Required) Anguilla		Aggregate Year-to-date	
Occupation (Required)  Mayor  PAC Individual Loan		Date Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC  Other (please specify)		10/02/2017	\$1,000.00
Full Name Donald Clark			
Mailing Address PO Box 6010			
City, State, Zip Code Ridgeland, MS 39158-6010			
Name of Employer (Required) Butter Snow O'mara Stevens & Cannada		Aggregate Year-to-date	\$1,000.00
Occupation (Required)  Attorney  PAC Individual Loan		Date (Mo., Day, Ye	Amount of each receipt ar) this period
Source: LI Corporation  LLC  Other (please specify)		09/11/2017	\$5,000.00
Full Name Market Max LLC			
Mailing Address PO Box 229			
City, State, Zip Code Tylertown, MS 39667-0229	<u> </u>		
Name of Employer (Required)		Aggrega Year-to-d	te \$5,000.00 ate
Occupation (Required)			0004.05

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	Friends Of Tate Reeves	
Name of Candidate or Committee Reporting Period	through	
Keboluna , a	DECEIPTS	

Reporting Period   TEMIZED RECEIPT	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	12/15/2017	\$1,000.00
Full Name Caesars Enterprise Services LLC		
Mailing Address One Harrah's Court		
City, State, Zip Code Las Vegas, NV 89119-4377		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00  Amount of each
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt
Source:	08/23/2017	\$1,000.00
Full Name Pfizer PAC		
Mailing Address 235 E 42nd St		
City, State, Zip Code New York, NY 10017-5703		
Name of Employer (Required)	Aggregate Year-to-date	\$1,000.00
Occupation (Required)	Date (Mo., Day, Ye	Amount of each receipt this period
Source: Corporation PAC	09/22/2017	\$500.00
Full Name Johnson & Johnson		
Mailing Address 1350 I St. NW STE 1210		
City, State, Zip Code Washington, DC 20005-3305		
Name of Employer (Required)	Aggrega Year-to-d	ate
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day,	
Source: Corporation  Other (please specify)	12/31/201	7 \$250.00
Full Name Haden Hughes		
Malling Address 48 Avery Circle		
City, State, Zip Code Jackson, MS 39211-2403		
Name of Employer (Required) Mathison Insurance Partners	Aggre	gate \$250.0

		Page	Page 123 of 126
Name of Candidate or Committee	Friends Of Tate Reeves	2/31/2017	
Reporting Period01/01/2017			

ITEMIZED RECEIP IS	Date (Mo., Day, Year)	Amount of each receipt this period
ource: Corporation  Other (please specify)	09/21/2017	\$500.00
ull Name Kathleen G. Henry		
lailing Address 321 Avalon Way		
ity, State, Zip Code Brandon, MS 39047-7635		
ame of Employer (Required) N/A	Aggregate	\$500.00
Occupation (Required) Retired	Year-to-date	Amount of each
Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)	10/16/2017	\$250.00
Full Name Edward Moak		
Mailing Address 520 Burnham Road		
City, State, Zip Code Brandon, MS 39042-2010		
Name of Employer (Required) Stuart C. Irby Company	Aggregate	\$250.00
Occupation (Required) Sales VP	Year-to-date	Amount of each
Source: Torporation PAC Individual Loan	Date (Mo., Day, Year	receipt this period
Other (please specify)	10/16/2017	\$750.00
Full Name Blake Enterprises		
Mailing Address 2 North Second St.		
City, State, Zip Code Memphis, TN 38103-2602		
Name of Employer (Required)	Aggregate Year-to-date	\$750.00
Occupation (Required)  Source:  Corporation PAC Individual Loan	Date (Mo., Day, Ye	Amount of each receipt ar) this period
Other (please specify)	11/07/2017	\$5,000.0
Full Name Gary Blossman		
Mailing Address 714 Girod St. PH2		
City, State, Zip Code New Orleans, LA 70130-3518		
Name of Employer (Required) First Bank & Trust	Aggregat Year-to-da	se \$5,000.
Occupation (Required) President	Tear-to-de	

		Page Page 124 of 126
Name of Candidate or Committee  Reporting Period 01/01/2017	Friends Of Tate Reeves through12/3	31/2017
Reporting : Comment		IDTC

ITEMIZED RECEIP	Date	Amount of each receipt
ource: 🗆 Corporation 🗀 PAC 🛅 Individual 🚨 Loan	(Mo., Day, Year)	this period
☐ Other (please specify)  uil Name  R. Barry Cannada	10/02/2017	\$1,000.00
N. Dairy Communication		
OZI THEHMOTTO		
ty, State, Zip Code Jackson, MS 39202-1740		· .
ame of Employer (Required) Butler Snow Omara Stevens & Cannada	Aggregate	\$1,000.00
ccupation (Required) Attorney	Year-to-date	Amount of each
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)  Jones Walker LLP	10/10/2017	\$2,500.00
Mailing Address PO Box 427		
City, State, Zip Code Jackson, MS 39205-0427		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	11/07/2017	\$1,000.00
Full Name John A. Polk	11/0/12011	<u> </u>
Mailing Address 53 Tidewater Road		
City, State, Zip Code Hattiesburg, MS 39402-9778		
Name of Employer (Required) Polks Meat Products Inc.	Aggregate	
Occupation (Required) Owner	Year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/12/2017	\$4,000.00
Full Name Wal-Mart Stores, Inc. PAC for Responsible Government	10/12/2011	
Mailing Address 702 SW 8th St		
City, State, Zlp Code Bentonville, AR 72716-6209		
Name of Employer (Required)	Aggregate	#4.000.0
	Year-to-date	\$4,000.0

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Name of Candidate Reporting Period	or Committee 01/01/2017	Friends Of Tate Reeves through	12/31/2017		

ITEMIZED RECEIPT	S	
ource: Torporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)  Full Name  American Cash Advance	10/11/2017	\$750.00
Mailing Address PO Box 849		
City, State, Zip Code Larose, LA 70373-0849		
lame of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$750.00
Source: Torporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name  Mississippi Association Of Health Plans	10/13/2017	\$1,000.00
Mailing Address PO Box 1885		
City, State, Zip Code Jackson, MS 39215-1885		
Name of Employer (Required)  Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	12/13/2017	\$1,000.00
Full Name Russell G. Newman		
Malling Address 801 Country Place Drive		
City, State, Zip Code Pearl, MS 39208-6621		
Name of Employer (Required)  MS Bonding Company  Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	10/05/2017	\$1,000.00
Full Name Samuel W Keyes Jr.		
Mailing Address 202 Valley Road		
City, State, Zip Code Ridgeland, MS 39157-9105		
Name of Employer (Required)  Butler Snow Omara Stevens & Cannada  Occupation (Required)  Attorney	Aggregate Year-to-date	\$1,000.00

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Friends Of Tate Reeves		
Name of Candidate or Committee	12/31/2017	
Reporting Period 01/01/2017 through		
ITEMIZED REC	CEIPTS	
□ Date □ Individual □ Loan	Date	Amount of each receipt
Source: Corporation LI PAC LI Individual	(Mo., Day, Year)	this period
Other (please specify)		
	10/12/2017	\$5,000.00
Full Name Watkins & Eager PLLC		
Mailing Address P.O. Box 650		
City, State, Zip Code Jackson, MS 39205-0650		
Name of Employer (Required)		
	Aggregate	\$5,000,00
Occupation (Required)	Year-to-date	Amount of each
Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan	Date (Mo., Day, Year)	receipt this period
Other (please specify)		+=00.00
Full Name World Class Athletic Surfaces	04/13/2017	\$500.00
Mailing Address PO Box 152		
City, State, Zip Code Leland, MS 38756-0152		
Name of Employer (Required)		
	Aggregate Year-to-date	\$500.00
Occupation (Required)	1 ear-to-date	Amount of each
☐ Corporation ☐ PAC ☐ Individual ☐ Loan	Date	receipt
Source: Li Corporation Li C	(Mo., Day, Year)	this period
Other (please specify)	09/20/2017	\$500.00
Full Name The Ramey Agency, LLC	G8/20/2011	

3100 North State Street, STE 300 STE 300

Jackson, MS 39216-4013

Mailing Address

City, State, Zip Code

Occupation (Required)

Name of Employer (Required)

\$500.00

Aggregate

Year-to-date

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riands Of Tate Reeves		

Name of Candidate or Committee Reporting Period \_\_

01/01/2017

\_ through

12/31/2017

	ITEMIZED DISBURS	Date	Aggregate Total Running Amount of each disbursment this period
ıli Name	D2 Tech Solutions, LLC	(Mo., Day, Year)	\$166.28
lailing Address	328 Kingsbridge Road	03/20/2017	*
City, State, Zip Code	Madison, MS 39110-8487	Aggregate	**************************************
Purpose of Disburseme	nt (Optional)	Aggregate Year-to-date	\$665.12
Data Storage		Date	Amount of each disbursment this period
Full Name	Chuck McCarty	(Mo., Day, Year)	
Malling Address	101 Bordeaux St.	05/12/2017	\$1,500.00
City, State, Zip Code	Indianola, MS 38751-2906	Ammonato	÷4 500.00
Purpose of Disbursem	ent (Optional)	Aggregate Year-to-date	\$1,500.00
Catering for event		Date	Amount of each
Full Name	Construction Services Inc.	(Mo., Day, Year)	disbursment this period
Mailing Address	PO Box 5737	11/06/2017	\$4,000.00
City, State, Zip Code	Meridian, MS 39302-5737		
Purpose of Disbursen	nent (Optional)	Aggregate Year-to-date	\$4,000.00
Refund, over corpo	orate limit	Date	Amount of each
Full Name	InCare Technologies, Inc	(Mo., Day, Year)	disbursment this period
Mailing Address	600 Lakeshore Parkway	09/04/2017	\$187.65
City, State, Zip Code	Birmingham, AL 35209-6361		
Purpose of Disburse	ment (Optional)	Aggregate Year-to-date	\$2,753.25
Data Storage		Date	Amount of each
Full Name	InCare Technologies, Inc	(Mo., Day, Year)	disbursment this period
Mailing Address	600 Lakeshore Parkway	04/21/2017	\$166.28
City, State, Zip Code	e Birmingham, AL 35209-6361	Aggregate	2406.28
Purpose of Disburs	ement (Optional)	Aggregate Year-to-date	\$166.28
Data Storage		Date	Amount of each
Full Name	Trustmark National Bank Credit Card Center	(Mo., Day, Year)	
		02/17/2017	\$74.62
Mailing Address	PO Box 114		i e
Mailing Address  City, State, Zip Cod		Aggregate	\$2,023.94

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Friends Of Tate Reeves

01/01/2017 Reporting Period

through

12/31/2017

ull Name		Date (Mo., Day, Year)	Amount of each disbursment this period
alling Address	People Lease	02/28/2017	\$5,531.59
	689 Towne Center Boulevard Suite B		
ity, State, Zip Cod	Ridgeland, Ivis 39137-4900	Aggregate	\$11,081.18
urpose of Disbur Payroll	sement (Optional)	Year-to-date	Amount of each
uil Name	InCare Technologies, Inc	Date (Mo., Day, Year)	disbursment this period
Mailing Address	600 Lakeshore Parkway	10/10/2017	\$192.87
City, State, Zip Co	ode Birmingham, AL 35209-6361		
	rsement (Optional)	Aggregate Year-to-date	\$3,022.36
Data Storage Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	08/14/2017	\$74.62
City, State, Zip C	ode Jackson, MS 39205-0114		
Purpose of Disb	ursement (Optional)	Aggregate Year-to-date	\$4,857.66
Credit Card P	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address		07/20/2017	\$74.62
City, State, Zip	Code Jackson, MS 39205-0114		
Purpose of Disl Credit Card I	oursement (Optional) Payment	Aggregate Year-to-date	\$4,317.79 Amount of each
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	disbursment this period
Mailing Addres	PO Box 114	10/13/2017	\$556.75
City, State, Zip	Code Jackson, MS 39205-0114	Aggregate	
Purpose of Dis	sbursement (Optional)	Year-to-date	\$9,214.09 Amount of each
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	it to mand this period
Mailing Addre		11/18/2017	\$74.62
City, State, Zi	p Code Jackson, MS 39205-0114		
45	isbursement (Optional)	Aggregate Year-to-date	\$9,363.33

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Friends Of Tate Reeves

12/31/2017

01/01/2017 Reporting Period .

# ITEMIZED DISBURSEMENTS

\_ through

ull Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursment this period
lailing Address	689 Towne Center Boulevard Suite B	01/31/2017	\$5,549.59
city, State, ZIp Code	Ridgeland, MS 39157-4900		
Purpose of Disbursem Payroll	ent (Optional)	Aggregate Year-to-date	\$5,549.59
ull Name	Kristin C McDevitt	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	130 Eagles Nest Circle	08/04/2017	\$30.91
City, State, Zip Code	Madison, MS 39110-6029		
Purpose of Disburser Expense reimburs	nent (Optional)	Aggregate Year-to-date	\$30.91
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	01/01/2017	\$1,376.97
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disburse Credit Card Paym		Aggregate Year-to-date	\$1,376.97
Full Name	i360, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	29374 Network Place	11/18/2017	\$150.00
City, State, Zip Code	Chicago, IL 60673-1293		
Purpose of Disburs Data Storage	ement (Optional)	Aggregate Year-to-date	\$1,728.90
Full Name	Stephens Printing, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	642 Hwy 469 S	09/29/2017	\$4,207.63
City, State, Zip Coo	Florence, MS 39073-9064		
Purpose of Disburs Printing	sement (Optional)	Aggregate Year-to-date	\$10,100.16
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	01/19/2017	\$423.11
City, State, Zip Co	de Jackson, MS 39205-0114		
Purnose of Disbu	sement (Optional)	Aggregate Year-to-date	\$1,874.70

Friends Of Tate Reeves	Page Page 4 of 16			
through _	12/31/2017		<del> </del>	

#### ITEMIZED DISBURSEMENTS

Name of Candidate or Committee

Reporting Period \_

01/01/2017

ull Name		Date	Amount of each disbursment this period
	D2 Tech Solutions, LLC	(Mo., Day, Year)	<u> </u>
failing Address	328 Kingsbridge Road	02/22/2017	\$166.28
City, State, Zip Code	Madison, MS 39110-8487		
Purpose of Disburseme Data Storage	ent (Optional)	Aggregate Year-to-date	\$498.84
Full Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	689 Towne Center Boulevard Suite B	04/28/2017	\$5,447.59
City, State, Zip Code	Ridgeland, MS 39157-4900		
Purpose of Disbursem	ent (Optional)	Aggregate Year-to-date	\$22,033.96
Full Name	i360, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	29374 Network Place	01/01/2017	\$150.00
City, State, Zip Code	Chicago, IL 60673-1293		
Purpose of Disbursem Data Storage	ent (Optional)	Aggregate Year-to-date	\$150.00
Full Name	Stephens Printing, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	642 Hwy 469 S	05/12/2017	\$2,221.64
City, State, Zip Code	Florence, MS 39073-9064		
Purpose of Disburser Printing expenses		Aggregate Year-to-date	\$5,892.53
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	01/01/2017	\$74.62
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disburse Credit Card Paym		Aggregate Year-to-date	\$1,451.59
Full Name	D2 Tech Solutions, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	328 Kingsbridge Road	01/21/2017	\$166.28
City, State, Zip Code	Madison, MS 39110-8487		
Purpose of Disburse Data Storage	ment (Optional)	Aggregate Year-to-date	\$332.5

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Friends Of Tate Reeves

Name of Candidate or Committee

Reporting Period

01/01/2017

\_ through

12/31/2017

uli Name		Date	Aggregate Total Running Amount of each disbursment this period
	InCare Technologies, Inc	(Mo., Day, Year)	
lailing Address	600 Lakeshore Parkway	06/15/2017	\$187.65 
ity, State, Zip Code	Birmingham, AL 35209-6361		· ·
urpose of Disburseme Data Storage	ent (Optional)	Aggregate Year-to-date	\$1,395.82
uil Name	Jeff Colyer for Governor	Date (Mo., Day, Year)	Amount of each disbursment this period
failing Address	PO Box 3708	10/05/2017	\$2,000.00
City, State, Zip Gode	Topeka, KS 66604-7708		
Purpose of Disbursem Campaign Contribu		Aggregate Year-to-date	\$2,000.00
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	05/16/2017	\$74.62
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disbursen Credit Card Payme		Aggregate Year-to-date	\$3,542.22
Full Name	Aristotle International, Inc.	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	200 Pennsylvania Ave. SE	01/26/2017	\$8,400.00
City, State, Zip Code	Washington, DC 20003		
Purpose of Disburser Campaign Softwar		Aggregate Year-to-date	\$8,400.00
Full Name	MFRW	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	c/o Helen Carney PO Box 2634	09/04/2017	\$250.00
City, State, Zip Code	Madison, MS 39130-2634		
Purpose of Disburse Event Sponsorshi		Aggregate Year-to-date	\$350.00
Fuli Name	InCare Technologies, Inc	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	600 Lakeshore Parkway	07/13/2017	\$113.15
City, State, Zip Code	Birmingham, AL 35209-6361		
Purpose of Disburse Monthly domain		Aggregate Year-to-date	\$2,335.95

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through	12/31/2017		

# Reporting Period 01/01/2017 through 12/31/2017 ITFMIZED DISBURSEMENTS

Name of Candidate or Committee

ull Name	i360, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
failing Address	29374 Network Place	06/05/2017	\$78.90
City, State, Zip Code	Chicago, IL 60673-1293		
Purpose of Disburseme Data Storage	ent (Optional)	Aggregate Year-to-date	\$828.90
Full Name	InCare Technologies, Inc	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	600 Lakeshore Parkway	05/12/2017	\$97.00
City, State, Zip Code	Birmingham, AL 35209-6361		
Purpose of Disbursem Data Storage	ent (Optional)	Aggregate Year-to-date	\$263.28
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	02/17/2017	\$1,146.77
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disburser Credit Card Payme		Aggregate Year-to-date	\$3,170.71
Full Name	U.S. Postal Service	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	401 E. South Street	07/10/2017	\$98.00
City, State, Zip Code	Jackson, MS 39201-5211		
Purpose of Disburse Postage Stamps	ment (Optional)	Aggregate Year-to-date	\$264.00
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	07/20/2017	\$465.25
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disburse Credit Card Payr		Aggregate Year-to-date	\$4,783.04
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	09/18/2017	\$1,892.26
City, State, Zip Cod			
Purpose of Disburs Credit Card Pay		Aggregate Year-to-date	\$8,582.72

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Friends Of Tate Reeves				
	12/31/2017			

Year-to-date

Date

(Mo., Day, Year)

09/04/2017

Name of Candidate or Committee

Reporting Period

Data Storage

Mailing Address

Data Storage

InCare Technologies, Inc

600 Lakeshore Parkway

Full Name

01/01/2017

through

	ITEMIZED DISBUR	SEMENTS	Aggregate Total Running
Full Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursment this period
Malling Address	689 Towne Center Boulevard Suite B	03/31/2017	\$5,505.19
City, State, Zlp Code	Ridgeland, MS 39157-4900		
Purpose of Disburseme Payroll	ent (Optional)	Aggregate Year-to-date	\$16,586.37
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	06/15/2017	\$404.47
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disbursement (Optional)  Credit Card Payment		Aggregate Year-to-date	\$4,168.55
Full Name	InCare Technologies, Inc	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	600 Lakeshore Parkway	06/15/2017	\$600.00
City, State, Zip Code	Birmingham, AL 35209-6361		
Purpose of Disbursen Office Software	nent (Optional)	Aggregate Year-to-date	\$1,995.82
Full Name	i360, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	29374 Network Place	10/13/2017	\$150.00
City, State, Zip Code	Chicago, IL 60673-1293		
Purpose of Disburser	ment (Optional)	Aggregate Year-to-date	\$1,578.90

City, State, Zip Code	Birmingham, AL 35209-6361		
Purpose of Disburseme		Aggregate Year-to-date	\$2,829.49
IT Services Full Name	i360, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	29374 Network Place	04/27/2017	\$150.00
City, State, Zlp Code	Chicago, IL 60673-1293		
Purpose of Disbursem		Aggregate Year-to-date	\$750.00

Amount of each

disbursment this period

\$76.24

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Reporting Period

01/01/2017

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uli Name	InCare Technologies, Inc	Date (Mo., Day, Year)	Amount of each disbursment this period
falling Address	600 Lakeshore Parkway	11/02/2017	\$192.87
City, State, Zip Code	Birmingham, AL 35209-6361		
Purpose of Disburseme	nt (Optional)	Aggregate Year-to-date	\$3,291.47
Data Storage Full Name	MFRW	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	c/o Helen Carney PO Box 2634	08/03/2017	\$100.00
City, State, Zip Code	Madison, MS 39130-2634		
Purpose of Disbursem		Aggregate Year-to-date	\$100.00
Event registration for Full Name	David Clanton	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 463	07/20/2017	\$443.00
City, State, Zip Code	Meadville, MS 39653-0463		
Purpose of Disburser Expense Reimburs	nent (Optional)	Aggregate Year-to-date	\$443.00
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	05/16/2017	\$221.86
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disburse Credit Card Paym	ment (Optional)	Aggregate Year-to-date	\$3,764.08
Full Name	Haddox Reid Eubank Betts, PLLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Drawer 22507	11/25/2017	\$994.89
City, State, Zip Code	Jackson, MS 39225-2507		
Purpose of Disburs Accounting Servi		Aggregate Year-to-date	\$994.89
Full Name	Waters International Trucks	Date (Mo., Day, Year)	Amount of each disbursment this period
Malling Address	PO Box 4157	11/06/2017	\$4,000.00
City, State, Zip Cod	le Meridian, MS 39304-4157		
Purpose of Disburs	sement (Optional)	Aggregate Year-to-date	\$4,000.00

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Name of Candidate or Committee Reporting Period \_

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uli Name	:000 H C	Date (Mo., Day, Year)	Amount of each disbursment this period
	i360, LLC	(Mos, bay, roar)	
lailing Address	29374 Network Place	08/15/2017	\$150.00
ity, State, Zip Code	Chicago, IL 60673-1293		
Purpose of Disburseme Data Storage	nt (Optional)	Aggregate Year-to-date	\$1,278.90
-ull Name		Date	Amount of each disbursment this period
un (tanto	Trustmark National Bank Credit Card Center	(Mo., Day, Year)	
Mailing Address	PO Box 114	04/19/2017	\$74.62
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disburseme Credit Card Paymer		Aggregate Year-to-date	\$3,319.95
Full Name		Date	Amount of each
, un Hallio	InCare Technologies, Inc	(Mo., Day, Year)	disbursment this period
Mailing Address	600 Lakeshore Parkway	07/10/2017	\$226.98
City, State, Zip Code	Birmingham, AL 35209-6361		
Purpose of Disbursem Monthly Data Stora		Aggregate Year-to-date	\$2,222.80
Full Name	InCare Technologies, Inc	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	600 Lakeshore Parkway	10/27/2017	\$76.24
City, State, Zip Code	Birmingham, AL 35209-6361		
Purpose of Disbursen		Aggregate Year-to-date	\$3,098.60
Data Storage		Date	Amount of each
Full Name	People Lease	(Mo., Day, Year)	disbursment this period
Mailing Address	689 Towne Center Boulevard Suite B	11/30/2017	\$5,447.59
City, State, Zlp Code	Ridgeland, MS 39157-4900		
Purpose of Disburser	nent (Optional)	Aggregate	\$60,167.09
Payroll		Year-to-date Date	Amount of each
Full Name	People Lease	(Mo., Day, Year)	disbursment this period
Mailing Address	689 Towne Center Boulevard Suite B	10/31/2017	\$5,447.59
City, State, Zip Code	Ridgeland, MS 39157-4900		
Purpose of Disburse		Aggregate Year-to-date	\$54,719.5

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Reporting Period 01/01/2017 through 12/31/2017

ull Name		Date	Amount of each disbursment this period
	Trustmark National Bank Credit Card Center	(Mo., Day, Year)	dispursment uns penod
failing Address	PO Box 114	01/19/2017	\$74.62
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disburseme Credit Card Paymer		Aggregate Year-to-date	\$1,949.32
Full Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursment this period
Malling Address	689 Towne Center Boulevard Suite B	05/31/2017	\$5,447.59
City, State, Zip Code	Ridgeland, MS 39157-4900		
Purpose of Disbursem Payroll	ent (Optional)	Aggregate Year-to-date	\$27,481.55
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	09/18/2017	\$74.62
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disbursem Credit Card Payme		Aggregate Year-to-date	\$8,657.34
Full Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	689 Towne Center Boulevard Suite B	07/31/2017	\$5,447.59
City, State, Zip Code	Ridgeland, MS 39157-4900		
Purpose of Disbursen Payroll	nent (Optional)	Aggregate Year-to-date	\$38,376.73
Full Name	i360, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	29374 Network Place	07/27/2017	\$150.00
City, State, Zip Code	Chicago, IL 60673-1293		
Purpose of Disburser Data Storage	nent (Optional)	Aggregate Year-to-date	\$1,128.90
Full Name	i360, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	29374 Network Place	09/18/2017	\$150.00
City, State, Zip Code	Chicago, IL 60673-1293		
Purpose of Disburser Data Storage	nent (Optional)	Aggregate Year-to-date	\$1,428.90

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Name of Candidate or Committee Reporting Period

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Full Name	InCare Technologies, Inc	Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursment this period
Mailing Address	600 Lakeshore Parkway	08/01/2017	\$42.00
City, State, Zip Code	Birmingham, AL 35209-6361		
Purpose of Disbursem Service maintenance		Aggregate Year-to-date	\$2,377.95
uli Name	Internal Revenue Service	Date (Mo., Day, Year)	Amount of each disbursment this period
failing Address	Department of the Treasury Internal Revenue Service Cε	09/01/2017	\$2,051.00
City, State, Zip Code	Ogden, UT 84201-0001		
Purpose of Disbursem Taxes paid on inter		Aggregate Year-to-date	\$2,051.00
ull Name	On Message, Inc.	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	2130 Priest Bridge Drive Suite 11	02/17/2017	\$35,284.59
City, State, Zip Code	Crofton, MD 21114-2457		
Purpose of Disbursem Consulting	nent (Optional)	Aggregate Year-to-date	\$35,284.59
ull Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	689 Towne Center Boulevard Suite B	06/30/2017	\$5,447.59
City, State, Zip Code	Ridgeland, MS 39157-4900		
Purpose of Disbursen Payroll	nent (Optional)	Aggregate Year-to-date	\$32,929.14
Full Name	Stephens Printing, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Wailing Address	642 Hwy 469 S	01/01/2017	\$3,670.89
City, State, Zip Code	Florence, MS 39073-9064		
Purpose of Disbursen Printing Services	nent (Optional)	Aggregate Year-to-date	\$3,670.89
Full Name	Jackson County Republican Women	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 2512	09/28/2017	\$250.00
City, State, Zip Code	Pascagoula, MS 39569-2512		
	nent (Optional)	Aggregate	

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Name of Candidate or Committee Reporting Period

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12/31/2017

full Name		Date	Aggregate Total Running Amount of each
uli Name	Trustmark National Bank Credit Card Center	(Mo., Day, Year)	disbursment this period
Mailing Address	PO Box 114	10/13/2017	\$74.62
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disbursem Credit Card Payme	• •	Aggregate Year-to-date	\$9,288.71
Full Name	American Media & Advocacy Group	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	815 Slaters Lane	03/05/2017	\$465.17
City, State, Zip Code	Alexandria, VA 22314-1219		
Purpose of Disbursem Website Hosting Fe		Aggregate Year-to-date	\$465.17
Full Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	689 Towne Center Boulevard Suite B	12/29/2017	\$5,447.59
City, State, Zip Code	Ridgeland, MS 39157-4900		
Purpose of Disbursen Payroll	nent (Optional)	Aggregate Year-to-date	\$65,614.68
Full Name	i360, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	29374 Network Place	01/19/2017	\$150.00
City, State, Zip Code	Chicago, IL 60673-1293		1
Purpose of Disburser Data Storage	nent (Optional)	Aggregate Year-to-date	\$300.00
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	04/19/2017	\$147.65
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disburser Credit Card Payme		Aggregate Year-to-date	\$3,467.60
Full Name	American Media & Advocacy Group	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	815 Slaters Lane	06/22/2017	\$709.55
City, State, Zlp Code	Alexandria, VA 22314-1219		
Purpose of Disburser Website Hosting a		Aggregate Year-to-date	\$1,174.72

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Full Name	i360, LLC	Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursment this period
Mailing Address	29374 Network Place	06/19/2017	\$150.00
City, State, Zip Code	Chicago, IL 60673-1293		
Purpose of Disburser Data Storage	nent (Optional)	Aggregate Year-to-date	\$978.90
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	06/15/2017	\$74.62
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disburser Credit Card Payme		Aggregate Year-to-date	\$4,243.17
Full Name	U.S. Postal Service	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	401 E. South Street	02/08/2017	\$166.00
City, State, Zip Code	Jackson, MS 39201-5211		
Purpose of Disburser PO Box Rental Fe		Aggregate Year-to-date	\$166.00
Fuli Name	i360, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	29374 Network Place	03/28/2017	\$150.00
City, State, Zip Code	Chicago, IL 60673-1293		
Purpose of Disburser Data Storage	nent (Optional)	Aggregate Year-to-date	\$600.00
Full Name	Rankin County Republican Women	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	504 Spring Lake Drive	09/20/2017	\$400.00
City, State, Zip Code	Pearl, MS 39208-6669		
Purpose of Disburser Event Sponsorship		Aggregate Year-to-date	\$400.00
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	08/14/2017	\$1,832.80
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disburser Credit Card Payme		Aggregate Year-to-date	\$6,690.46

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Name of Candidate or Committee Reporting Period

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12/31/2017

		D-4	Aggregate Total Running Amount of each
Full Name	InCare Technologies, Inc	Date (Mo., Day, Year)	disbursment this period
Mailing Address	600 Lakeshore Parkway	06/07/2017	\$944.89
City, State, Zip Code	Birmingham, AL 35209-6361		
Purpose of Disburse	ment (Optional)	Aggregate	41,000,17
Office equipment		Year-to-date	\$1,208.17
Full Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	689 Towne Center Boulevard Suite B	09/29/2017	\$5,447.59
City, State, Zip Code	Ridgeland, MS 39157-4900		
Purpose of Disburse Payroll	ment (Optional)	Aggregate Year-to-date	\$49,271.91
Full Name	InCare Technologies, Inc	Date (Mo., Day, Year)	Amount of each disbursment this period
Malling Address	600 Lakeshore Parkway	12/06/2017	\$192.87
City, State, Zip Code	Birmingham, AL 35209-6361		
Purpose of Disburse Data Storage	ment (Optional)	Aggregate Year-to-date	\$3,484.34
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	PO Box 114	03/20/2017	\$74.62
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disburse Credit Card Paym		Aggregate Year-to-date	\$3,245.33
Full Name	Stephens Printing, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Malling Address	642 Hwy 469 S	12/18/2017	\$6,388.28
City, State, Zip Code	Florence, MS 39073-9064		
Purpose of Disburse Printing Expenses	• • •	Aggregate Year-to-date	\$16,488.44
Full Name	Kristin C McDevitt	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	130 Eagles Nest Circle	10/20/2017	\$448.85
City, State, Zip Code	Madison, MS 39110-6029		
Purpose of Disburse Expense reimburs		Aggregate Year-to-date	\$479.76

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Reporting Period

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12/31/2017

Full Name		Date	Aggregate Total Runnin  Amount of each
	Trustmark National Bank Credit Card Center	(Mo., Day, Year)	disbursment this period
Mailing Address	PO Box 114	11/18/2017	\$6,114.56
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disburser	• • •	Aggregate	\$15,477.89
Credit Card Payme	ent	Year-to-date	
Full Name	D2 Tech Solutions, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	328 Kingsbridge Road	01/01/2017	\$166.28
City, State, Zip Code	Madison, MS 39110-8487		
Purpose of Disburser Data Storage	nent (Optional)	Aggregate Year-to-date	\$166.28
Full Name	Bravo! Italian Restaurant	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	4500 I 55 N	10/16/2017	\$6,281.67
City, State, Zip Code	Jackson, MS 39211-5930		
Purpose of Disbursen Event Expenses	nent (Optional)	Aggregate Year-to-date	\$6,281.67
Full Name	Dixie National Sale of Junior Champions	Date (Mo., Day, Year)	Amount of each disbursment this period
Malling Address	PO Box 9815	01/23/2017	\$1,000.00
City, State, Zip Code	Mississippi State, MS 39762-9815		
Purpose of Disbursen Advertising	nent (Optional)	Aggregate Year-to-date	\$1,000.00
Full Name	i360, LLC	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	29374 Network Place	02/24/2017	\$150.00
City, State, Zip Code	Chicago, IL 60673-1293		
Purpose of Disbursen Data Storage	nent (Optional)	Aggregate Year-to-date	\$450.00
Full Name	InCare Technologies, Inc	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	600 Lakeshore Parkway	08/14/2017	\$187.65
City, State, Zip Code	Birmingham, AL 35209-6361		
Purpose of Disbursen Data Storage	ent (Optional)	Aggregate Year-to-date	\$2,565.60

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			Aggregate Total Running
Full Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursment this period
Mailing Address	689 Towne Center Boulevard Suite B	08/31/2017	\$5,447.59
City, State, Zip Code	Ridgeland, MS 39157-4900		
Purpose of Disbursem Payroll	ent (Optional)	Aggregate Year-to-date	\$43,824.32