



REPORT OF RECEIPTS AND DISBURSEMENTS

Delbert Hosemann
SECRETARY OF STATE

RECEIVED

OCT 25 2019

Campaign Finance
MS Secretary of State

Name of Candidate Addie Lee Green
 Address P.O. Box 449 City/Zip BOTTON, MS
 Telephone (Work) 601-622-26 (Home) _____ (Fax) _____
 Contact Name Addie Green Email Address Addiegreen2652@gmail.com
 Office Sought Treasurer Political Party (if any) Democrat

☐ Check here if above is different from previous report

TYPE OF REPORT

____ May 10, 2019 Periodic Report (January 1, 2019 through April 30, 2019) Mandatory
 ____ June 10, 2019 Periodic Report (May 1, 2019 through May 31, 2019) Mandatory
 ____ July 10, 2019 Periodic Report (June 1, 2019 through June 30, 2019) Mandatory
 ____ July 30, 2019 Primary Pre-Election Report (July 1, 2019 through July 27, 2019) Mandatory
 ____ August 20, 2019 Primary Pre-Runoff Report (July 28, 2019 through August 17, 2019) Runoff Candidates Only
 ✓ ____ October 10, 2019 Periodic Report (July 1, 2019 through September 30, 2019) Mandatory
 ____ October 29, 2019 Pre-Election Report (October 1, 2019 through October 26, 2019) Mandatory
 ____ November 19, 2019 Pre-Runoff Report (October 27, 2019 through November 16, 2019) Runoff Candidates Only
 ____ January 10, 2020 Periodic Report (October 1, 2019 through December 31, 2019) Mandatory
 ____ Termination Report (Committee will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation and zero cash on hand balance) Required to terminate reporting obligations

IMPORTANT

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

Separate record keeping and reporting is required for candidates and officeholders for any campaign contributions held prior to Jan. 1, 2018, disbursements made therefrom and contributions earned thereon in the form of interest or dividends.

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

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

JAN. 1, 2019 CASH ON HAND BALANCE				\$
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS ¹	\$	\$	\$	\$
TOTAL AMT OF DISBURSEMENTS	\$	\$	\$	\$
CASH ON HAND BALANCE			July 30, 2019	\$ 515.50

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

JAN. 1, 2019 CASH ON HAND BALANCE				\$ 515.50
	Itemized (+)	Non-Itemized (=)	This Period Loan	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$ 200.00	\$ 975.00	\$ 1680	\$ 2,855.00
TOTAL AMT OF DISBURSEMENTS	\$ 1,935	\$ —	\$ —	\$ 1,935.25
CASH ON HAND BALANCE				\$ 685.75

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


Signature of Candidate

10/20/19
Date

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

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

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

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

Name of Candidate or Committee

Adrian Lee Yeam

Reporting period

July & August

through

October 20, 19

ITEMIZED DISBURSEMENTS

A. Full name		Date	Amount of each
<u>Adrian Lee Yeam</u>		(Mo., Day, Year)	disbursement this period
Mailing Address			
<u>2125 TV Rd</u>		<u>9/19/19</u>	\$ <u>295.00</u>
City, State, Zip Code			
<u>Jackson MS 39204</u>		<u>10/14/19</u>	\$ <u>297.00</u>
Purpose of Disbursement (Optional)		Aggregate	
<u>Printing</u>		Year-to-date	\$ <u>592.00</u>
B. Full name		Date	Amount of each
<u>Adrian Lee Yeam</u>		(Mo., Day, Year)	disbursement this period
Mailing Address			
<u>2125 TV Rd</u>		<u>10/15/19</u>	\$ <u>297.00</u>
City, State, Zip Code			
<u>Jackson MS 39204</u>		<u>10/15/19</u>	\$ <u>297.00</u>
Purpose of Disbursement (Optional)		Aggregate	
<u>Printing</u>		Year-to-date	\$ <u>819.00</u>
C. Full name		Date	Amount of each
<u>Adrian Lee Yeam</u>		(Mo., Day, Year)	disbursement this period
Mailing Address			
<u>Post</u>		<u>10/15/19</u>	\$ <u>0.00</u>
City, State, Zip Code			
<u>Jackson MS 39204</u>		<u>10/15/19</u>	\$ <u>0.00</u>
Purpose of Disbursement (Optional)		Aggregate	
<u>Printing</u>		Year-to-date	\$ <u>819.00</u>
D. Full name		Date	Amount of each
<u>Spencer D</u>		(Mo., Day, Year)	disbursement this period
Mailing Address			
<u>4125 W Northside Dr</u>		<u>9/10/19</u>	\$ <u>770.00</u>
City, State, Zip Code			
<u>Jackson, MS 39209</u>		<u>10/15/19</u>	\$ <u>390.00</u>
Purpose of Disbursement (Optional)		Aggregate	
<u>Printing</u>		Year-to-date	\$ <u>1160.00</u>
E. Full name		Date	Amount of each
<u>B. N. Lemphale</u>		(Mo., Day, Year)	disbursement this period
Mailing Address			
<u>1010 South State St</u>		<u>9/13/19</u>	\$ <u>63.85</u>
City, State, Zip Code			
<u>Jackson, MS 39201</u>		<u>10/17/19</u>	\$ <u>163.65</u>
Purpose of Disbursement (Optional)		Aggregate	
<u>Printing</u>		Year-to-date	\$ <u>227.50</u>
F. Full name		Date	Amount of each
<u>Stackon State TV</u>		(Mo., Day, Year)	disbursement this period
Mailing Address			
<u>Jackson, MS</u>		<u>10/19/19</u>	\$ <u>240.00</u>
City, State, Zip Code			
<u>Jackson, MS</u>		<u>10/19/19</u>	\$ <u>240.00</u>
Purpose of Disbursement (Optional)		Aggregate	
<u>Printing</u>		Year-to-date	\$ <u>240.00</u>

Name of Candidate or Committee Addie Green
Reporting period 9/20 through 10/20/19

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ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐

Other (please specify) _____

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
<u>Independent Mississippi Fund</u>	<u>9/13/19</u>	\$ <u>200.00</u>
<u>Mailing Address</u> <u>2000 14th St NW</u>		
<u>P.O. Box 13594</u>		
<u>City, State, Zip Code</u> <u>Washington DC 20056-3594</u>		
<u>Name of Employer (Required)</u>		
<u>Occupation (Required)</u>		

B. Source: ☐ Corporation ☐ PAC ☐ Individual ☒ Loan ☐

Other (please specify) _____

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
<u>Addie Green</u>	<u>9/18/19</u>	\$ <u>840.00</u>
<u>Mailing Address</u> <u>P.O. Box 449</u>	<u>10/12/19</u>	\$ <u>240.00</u>
<u>City, State, Zip Code</u> <u>Bolton MS 39041</u>		
<u>Name of Employer (Required)</u>		
<u>Occupation (Required)</u>		

C. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐

Other (please specify) _____

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
<u>Mailing Address</u>		
<u>City, State, Zip Code</u>		
<u>Name of Employer (Required)</u>		
<u>Occupation (Required)</u>		

D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐

Other (please specify) _____

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
<u>Mailing Address</u>		
<u>City, State, Zip Code</u>		
<u>Name of Employer (Required)</u>		
<u>Occupation (Required)</u>		