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SECRETARY OF STATE

By Mississippi Secretary of State at 3:52 pm, Jan 31, 2025

REPORT OF RECEIPTS AND DISBURSEMENTS 2024 Annual Report

Candidate

Name of Candidate J. Tate Reeves		DATESTAMP
Address PO Box 24355	City/State/Zip_Jackson MS 392	225
Telephone (Work)(Home)	(Fax)	
Contact Name Terry Reeves	Email Address	
Office Sought		
Check here if above information is different from previous rep	ort	
TYPE	OF REPORT	
* Friday, January 31, 2025 (January 1, 2024 through Dec	ember 31, 2024)	Annual Report
Termination Report (Candidate will no longer accept contact has no outstanding campaign debt		Required to terminate reporting obligations

IMPORTANT

- (1) Annual Reports are mandatory for all candidates who did not run for office in 2022 filing 2022 Periodic Reports and have not filed a Termination Report prior to December 31, 2022, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and expenditures during the reporting period.
- (2) Annual Reports are mandatory for 2022 judicial candidates who did not file a Termination report by January 10, 2023, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and expenditures during the reporting period.
- (3) Beginning on Jan. 1, 2018, candidates and officeholders may not "personally use" campaign contributions. Section 23-15-821, Miss. Code Ann., sets forth those "personal use" expenditures which are specifically prohibited from campaign contributions and those disbursements which are not defined as "personal use" and therefore permissible from campaign contributions. Campaign contributions accepted and held prior to Jan. 1, 2018 ARE NOT subject to the "personal use" restrictions of Section 23-15-821, Miss. Code Ann. Beginning on Jan. 1, 2018, campaign contributions accepted and accumulated therefrom ARE subject to the "personal use" restrictions of Section 2-15-821, Miss. Code Ann. Separate record keeping and reporting is required for candidates and officeholders for any campaign contributions held prior to Jan. 1, 2018, disbursements made therefrom and contributions earned thereon in the form of interest or dividends.
- (4) Until a Candidate files a Termination Report, all campaign finance disclosure reports must be filed in accordance with the applicable schedule set forth by Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (5) The receiving office must be in actual receipt of the required report by 5:00 p.m. on the deadline. If the deadline falls on a weekend or legal holiday, the office must be in actual receipt of the required report by 5:00 p.m. on the first working day before the deadline. Reports may be faxed or emailed. Candidates who have previous ran for Statewide, State District or Legislative Office file with the Secretary of State's Office. County or County District Office candidates file with the County Circuit Clerk's Office. Municipal candidates file with the Municipal Clerk's Office.

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

JAN. 1, 2024 CASH ON HAND BA	. 1, 2024 CASH ON HAND BALANCE		
	Itemized (+)	Non-Itemized (=)	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS ¹	\$	\$	\$
TOTAL AMT OF DISBURSEMENTS	\$	\$	\$
DEC. 31, 2024 CASH ON HAND I	BALANCE		\$

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

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

JAN. 1, 2024 CASH ON HAND BALANCE		\$1,992,063.45	
NO NEW CONTRIBUTIONS ACCOUNTED	Itemized (+)	Non-Itemized (=)	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$	\$	\$39,569.28
TOTAL AMT OF DISBURSEMENTS	\$84,511.59	\$55	\$84,566.59
DEC. 31, 2024 CASH ON HAND I	BALANCE		\$1,947,066.14

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

Signature of Candidate

Date

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

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

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Name of	Candidate	or Committee	. J Tate	Reeves

Reporting period January 1, 2024 through December 31, 2024

ITEMIZED	CONTR	PIRI	ITIONS	4
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TIENTIZED CONTINUE.		
A. Source: Corporation PAC Individual Loan * Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name Interest Earnings	//	this period \$
Mailing Address 1667 Lelia Drive	//	\$
Jackson, MS 39216	//	\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year–to-date	\$39,569.28
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	//	\$
Mailing Address	//	\$
City, State, Zip Code	//	\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year–to-date	\$
C. Source: OCorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	//	\$
Mailing Address	//_	\$
City, State, Zip Code	//	\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year–to-date	\$
D. Source: OCorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	//	\$
Mailing Address	//	\$
City, State, Zip Code	//	\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year–to-date	\$

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Name of Candidate or Committee J. Tate Reeves

Reporting period January 1, 2024

through December 31 2024

ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018			
A. Full name BMSS	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 1020 Highland Colony Pkwy	5 /13 / 24	\$ 1,696.50	
City, State, Zip Code 39157	//	\$	
Purpose of Disbursement (Optional) Accounting Services	Aggregate Year-to-date	\$ 1,696.50	
B. Full name Internal Revenue Service	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address Department of the Treasury	4_/10_/24	\$ 10,681.00	
City, State, Zip Code Department of the Treasury	//	\$	
Purpose of Disbursement (Optional) Taxes paid on interest earned	Aggregate Year-to-date	\$ 10,681.00	
C. Full name Mississippi Republican Party	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address PO Box 60	2 /29 /24	\$ 25,000	
City, State, Zip Code Jackson MS 39205	//	\$	
Purpose of Disbursement (Optional) Contribution	Aggregate Year-to-date	\$ 25,000	
D. Full name Tate for Governor	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address PO Box 24355	4 /9 24	\$ 12,500	
City, State, Zip Code Jackson MS 39225	//	\$	
Purpose of Disbursement (Optional) Contribution	Aggregate Year-to-date	\$ 12,500	
E. Full name Mississippi Rush United	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 112CopperRidge	6 /13 /24	\$ 1,000	
City, State, Zip Code Brandon MS 39042		\$	
Purpose of Disbursement (Optional) Sponsorship	Aggregate Year-to-date	\$ 1,000	
Noble Catering and Events	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 400 E Wisconsin Ave	7 /2 /24	\$ 8,537.51	
City, State, Zip Code Milwaukee WI 53202	//	\$	
Purpose of Disbursement (Optional) Event Expenses	Aggregate Year-to-date	\$ 8,537.51	

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Name of Candidate or Committee J. Tate Reeves

Reporting period January 1 2024

through December 31 2024

ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018			
A. Full name Ritual Floral	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 3865 S Austin St.	1 /1 /24	\$ 2,131.03	
City, State, Zip Code Milwaukee WI 53207	//	\$	
Purpose of Disbursement (Optional) Event expenses	Aggregate Year-to-date	\$ 2,131.03	
B. Full name Northern Lights Event Venue	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 106 W Seeboth St.	7_,1,24	\$ 4,053	
City, State, Zip Code Milwaukee WI 53204	//	\$	
Purpose of Disbursement (Optional) Event Expenses	Aggregate Year-to-date	\$ 4,053	
C. Full name Northern Lights Event Venue	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 106 W Seeboth St.	7 /1 /24	\$ 1,440	
City, State, Zip Code Milwaukee WI 53204	//	\$	
Purpose of Disbursement (Optional) Event Expenses	Aggregate Year-to-date	\$ 5,493	
Mississippi Rush United	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 112 Copper Ridge	<u>7 /12 / 24</u>	\$ 1,500	
City, State, Zip Code Brandon MS 39042	//	\$	
Purpose of Disbursement (Optional) Sponsorship/Advertising	Aggregate Year-to-date	\$ 2,500	
E. Full name Kimpton Journeyman Hotel	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 310 E Chicago St.	<u>7_,15_,24</u>	\$ 4,156.40	
City, State, Zip Code Milwaukee WI 53202	//	\$	
Purpose of Disbursement (Optional) Travel expenses	Aggregate Year-to-date	\$ 4,156.40	
F. Full name Archer Hotel	Date (Mo., Day, Year)	Amount of each disbursement this period	
Mailing Address 1600 King St.	<u>12 / 23 / 24</u>	\$ 1,632.66	
City, State, Zip Code Alexandria VA 22314	//	\$	
Purpose of Disbursement (Optional) Travel Expense	Aggregate Year-to-date	\$ 4,897.98	

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Name of Candidate or Committee J. Tate Reeves

Reporting period Vanuary 1 2024

through December 31 2024

ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018 A. Full name Date (Mo., Day, Year) disbursement this per Mailing Address PO Box 24355 City, State, Zip Code Jackson MS 39225 Purpose of Disbursement (Optional) Reimbursement, expenses from Southern Automotive Conference Parantee (Mo., Day, Year) Amount of each disbursement this per Mailing Address 1,646.22 Amount of each Mo., Day, Year) Amount of each disbursement this per Mailing Amount of each disbursement
Tate Reeves Mailing Address PO Box 24355 City, State, Zip Code Jackson MS 39225 Purpose of Disbursement (Optional) Reimbursement, expenses from Southern Automotive Conference B. Full name Amount of each disbursement this pe Amount of each disbursement this pe Amount of each disbursement this pe Aggregate Year-to-date Aggregate Year-to-date Amount of each disbursement this pe Aggregate Year-to-date Amount of each disbursement this pe
PO Box 24355 City, State, Zip Code Jackson MS 39225 Purpose of Disbursement (Optional) Reimbursement, expenses from Southern Automotive Conference B. Full name Po Box 24355 -/_/ \$ Aggregate Year-to-date 1,646.22 Amount of each
Jackson MS 39225 Purpose of Disbursement (Optional) Reimbursement, expenses from Southern Automotive Conference B. Full name Aggregate Year-to-date 1,646.22 Amount of each
Reimbursement, expenses from Southern Automotive Conference B. Full name Amount of each Amount of each
1 Date Amount of each
Mailing Address 235 W Beacon St. 10 / 2 / 24 \$ 2,000.00
City, State, Zip Code Philadelphia MS 39350 —'—' S
Purpose of Disbursement (Optional) Contribution Aggregate Year-to-date \$ 2,000.00
C. Full name Committee to Elect Jenifer Branning Date (Mo., Day, Year) Amount of each disbursement this per
Mailing Address 235 W Beacon St. 11 /15 /24 \$ 3,000.00
City, State, Zip Code Philadelphia MS 39350 —'—'— \$
Purpose of Disbursement (Optional) Contribution Aggregate Year-to-date \$ 5,000.00
D. Full name BMSS Date Amount of each (Mo., Day, Year) disbursement this per
Mailing Address 1020 Highland Colony Parkway STE 600 12 / 13 / 24 \$ 273.00
City, State, Zip Code Ridgeland MS 39157 —'—' S
Purpose of Disbursement (Optional) ACCOUNTING Services Aggregate Year-to-date \$ 1,969.50
E. Full name Archer Hotel Date (Mo., Day, Year) Mount of each disbursement this per
Mailing Address 1600 King Street 12 /23 /24
City, State, Zip Code Alexandria, VA 22314 \$''
Purpose of Disbursement (Optional) Travel expense Aggregate Year-to-date 1,632.66
F. Full name Archer Hotel Date (Mo., Day, Year) Mount of each disbursement this per
Mailing Address 1600 King Street 12 /23 /24 \$ 1,632.66
City, State, Zip Code Alexandria, VA 22314 S -/_/_
Purpose of Disbursement (Optional) Travel expense Aggregate Year-to-date \$ 3,265.32