Candidate

REPORT OF RECEIPTS AND DISBURSEMENTS

2020 Annual Report



Campaign Finance

Name of Candidate Brandon Presley	Secretary of State
Address 182 Verona Ave City/State/Zip Nettleton, MS 3	8858
Tclephone (Work) 800-637-7722 (Home) 662-401-3985 (Fax)	N/A
Contact Name Brandon Presley Email Address brandon@brand	onpresley.com
Office Sought Public Service Commissioner, Northern District	
Check here if above information is different from previous report	
TYPE OF REPORT	
Friday, January 29, 2021 (January 1, 2020 through December 31, 2020)	Annual Report
Termination Report (Candidate will no longer accept contributions, make campaign expenditur has no outstanding campaign debt obligation and zero cash on hand balan	es, Required to terminate reporting obligations
IMPORTANT	Deputs and I have at Cl. 1
(1) Annual Reports are mandatory for all candidates who did not run for office in 2020 filing 2020 Periodic Termination Report prior to December 31, 2020, even if no contributions or expenditures have occurre submit a report indicating "0" (zero) for total amount of reported contributions and expenditures during	d. In such case, the candidate shall
(2) Reginning on Jan. 1, 2018, candidates and officeholders may not "personally use" campaign contribution Ann., sets forth those "personal use" expenditures which are specifically prohibited from campaign contributions which are not defined as "personal use" and therefore permissible from campaign contracepted and held prior to Jan. 1, 2018 ARE NOT subject to the "personal use" restrictions of Section 2 Beginning on Jan. 1, 2018, campaign contributions accepted and accumulated therefrom ARE subject is Section 2-15-821, Miss. Code Ann. Separate record keeping and reporting is required for candidates a contributions held prior to Jan. 1, 2018, disbursements made therefrom and contributions carned there dividends.	tributions and those flutions. Campaign contributions 23-15-821, Miss. Code Ann. o the "personal use" restrictions of ad officeholders for any campaign
(3) Until a Candidate files a Termination Report, all campaign finance disclosure reports must be filed in a schedule set forth by Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).	ecordance with the applicable
(4) The receiving office must be in actual receipt of the required report by 5:00 p.m. on the deadline. If the legal holiday, the office must be in actual receipt of the required report by 5:00 p.m. on the first workin may be faxed or emailed. Candidates who have previous ran for Statewide, State District or Legislative State's Office. County or County District Office candidates file with the County Circuit Clerk's Office. Municipal Clerk's Office.	g day <i>hefore</i> the deadline. Reports Office file with the Secretary of
REPORTED CONTRIBUTIONS AND DISBURSEMENTS FROM CAMPAIGN ACCUMULATED PRIOR TO JANUARY 1, 2018	CONTRIBUTIONS
JAN.1, 2020 CASH ON HAND BALANCE	\$
Itemized (+) Non-Itemized (=)	Calendar Year-to-Date

TOTAL AMT OF CONTRIBUTIONS1

TOTAL AMT OF DISBURSEMENTS

DEC. 31, 2020 CASH ON HAND BALANCE

\$0

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, 2020 CASH ON HAND BA				Co	lendar Year-to-Date
第 18 18 18 18 18 18 18 18 18 18 18 18 18	Itemized (+)	N	on-Itemized (=)	Ca	And the second s
TOTAL AMT OF CONTRIBUTIONS	\$ 53,750.00	\$	2,115.00	\$	55,865.00
TOTAL AMT OF DISBURSEMENTS	\$ 46,689.50	\$	1,710.55	\$	48,400.05

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

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

Penaltics: 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	Brandon Presley		
Reporting period_	1/1/20	through _	12/31/20	

A. Source: OCorporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) LLC Full name	2 / 19 / 20	\$ 1,000.00
Southern Renewable Energy Association Mailing Address		\$
5120 Chessie Circle	_/-/-	
City, State, Zip Code Haltom City, TX 76137		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 1,000.00
B. Source: Corporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) Full name Deviney Construction	12 / 16 / 20	\$ 1,000.00
Mailing Address P.O. Box 6717	_/_/_	\$
City, State, Zip Code Jackson, MS 39282		\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate yearto-date	\$ 1,000.00
C. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Baker Services	12 / 16 / 20	\$ 1,000.00
Mailing Address P.O. Box 6717	_'_'_	\$
City, State, Zip Code Jackson, MS 39282		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 1,000.00
D. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Deviney Brothers, inc.	12 / 16 / 20	s 1,000.00
Mailing Address P.O. Box 6717	_/_/_	\$
City, State, Zip Code Jackson, MS 39282		\$
Name of Employer (Required)	//	s
Occupation (Required)	Aggregate year-to-date	\$ 1,000.00

	LILIU	
A. Source: OCorporation PAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name EDP Renew. N.A. LLC PAC	2 / 24 / 20	\$ 1,000.00
Mailing Address 808 Travis Street, Suite 700		\$
City, State, Zip Code Houston, TX 77002		\$
Name of Employer (Required)		s
Occupation (Required)	Aggregate year-to-date	\$ 1,000.00
B. Source: Ocorporation OPAC OIndividual OLoan Other (please specify) Association	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Solar Energy Industries Association	2 / 12 / 20	\$ 1,000.00
Mailing Address 1425 K St NW Ste 1000	_'_'_	S
City, State, Zip Code Washington, DC 20005		5
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 1,000.00
C. Source: Ocorporation OPAC OIndividual OLoan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Vivint Solar Developer, LLC	2 / 13 / 20	\$ 1,000.00
Mailing Address 1800 W. Ashton Blvd		\$
City, State, Zip Code Lehi, UT 84043		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 1,000,00
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Apex Clean Energy, inc PAC	2 / 12 / 20	\$ 1,000.00
Mailing Address 310 4th Street NE, Suite 200		\$
City, State, Zip Code Charlottesville, VA 22902		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year—to-date	\$ 1,000.00

Name of Candidate or Committee Brandon Presley

Reporting period 1/1/20 through 12/31/20

A. Source: OCorporation OPAC Individual OLoan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) Full name Kevin Smith	9 / 10 / 20	\$ 250.00
Malling Address 45 Mount Tiburon Road		\$
City, State, Zip Code Tiburon, CA 94920		\$
Name of Employer (Required) Lightsource BP		\$
Occupation (Required) CEO	Aggregate year-to-date	\$ 250.00
B. Source: OCorporation OPAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Jigar Shaw	9 / 30 / 20	\$ 250.00
Mailing Address 222 East 39th Street		S
City, State, Zip Code New York, NY 10016		\$
Name of Employer (Required) Generate Capital	_'_'_	\$
Occupation (Required) Executive	Aggregate year–to-date	\$ 250.00
C. Source: Ocorporation PAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Mississippi Realtors Political Action Committee	9 / 30 / 20	\$ 1000.00
Mailing Address P.O. Box 321000	l='-'-	\$
City, State, Zip Code Flowood, MS, 39232	//_	S
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$ 1000.00
D. Source: OCorporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(aco, say, remy	this period
	''	\$
Mulling Address	_/_/_	\$
City, State, Zip Code		8
Name of Employer (Required)	_'_'_	\$
Occupation (Required)	Aggregate year-to-date	\$

Name of Candidate or Committee

Brandon Presley

Reporting period ____1/1/20

_ through _

12/31/20

A. Source: Corporation OPAC Olindividual OLoan		T. American Street
A. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Ycar)	Amount of each receipt this period
Full name Jackson Excavating	12 / 16 / 20	\$ 1,000.00
Mailing Address 1059 Deviney Dr.	_/_/_	S
City, State, Zip Code Raymond, MS 39154		\$
Name of Employer (Required)		s
Occupation (Required)	Aggregate vear-to-date	\$ 1,000.00
B. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Deviney Equipment	12 / 16 / 20	\$ 1,000.00
Mailing Address P.O. Box 7179	_'_'_	\$
City, State, Zip Code Jackson, MS 39282	_'_'_	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 1,000.00
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Christopher Λ. Bagley or Melissa A. Bagley	12 / 12 / 20	\$ 500.00
Mailing Address 2611 Camellia Cove		\$
City, State, Zip Code Tupelo, MS 38801	//	\$
Name of Employer (Required) BancorpSouth		S
Occupation (Required) President & COO	Aggregate year-to-date	\$ 500.00
D. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Farmers & Merchants Bank	12 / 21 / 20	\$ 1,000.00
Mailing Address PO Box 278	_'_'_	S
City, State, Zip Code Baldwyn, MS 38824		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 1,000.00

1/1/20 Reporting period

through _

12/31/20

. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) Hassell H. Franklin	12 / 18 / 20	\$ 1,000.00
Mailing Address		\$
203 Susan Drive City, State, Zip Code Houston, MS 38851		\$
Name of Employer (Required) Franklin Corp.		\$
Occupation (Required) Chairman & CEO	Aggregate year-to-date	\$ 1,000.00
B. Source: OCorporation OPAC Individual OLosn	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) Full name Robert E. Kelly	12 / 23 / 20	\$ 2,500.00
Mailing Address PO Box 101687		\$
City, State, Zip Code Birmingham, AL 35210		S
Name of Employer (Required) Kelly Road Builders	_1_1_	\$
Occupation (Required) Founder	Aggregate year-to-date	\$ 2,500.00
C. Source: Ocorporation OPAC Individual OLoan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) Full name Bill Morgan	12 / 29 /20	\$ 1,000.00
Mailing Address PO Box 419		\$
City, State, Zip Code Booneville, MS 38829		\$
Name of Employer (Required) Morgan Van Lines		\$
Occupation (Required) Owner	Aggregate yearto-date	\$ 1,000.00
D. Source: OCorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Richard Krauze	9 / 11 / 20	\$ 250,0
Mailing Address 6301 Winona	,II	s
City, State, Zip Code Saint Louis, MO 63109		\$
Name of Employer (Required) Gateway Clean Energy		\$
Occupation (Required) Business Development	Aggregate year-to-date	\$ 250.00

Reporting period ____1/1/20

through_

12/31/20

TEMIZED RECEI	PTS	
A. Source: Corporation PAC Oludividual OLoan Other (please specify)	Date (Mo., Dny, Year)	Amount of each receipt this period
Full name Mississippi Associated Builders & Contractors PAC	10 /19 / 20	\$ 2,500.00
Mailing Address P.O. Box 16522		\$
City, State, Zip Code Jackson, MS 39236		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 2,500.00
B. Source: Corporation PAC OIndividual CLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Mississippi Chapter - Sierra Club	10 / 2 / 20	\$ 10,000.00
Malling Address 1606 Pinevale St.		\$
City, State, Zip Code Jackson, MS 39211	_'_'_	\$
Name of Employer (Required)	_'_'_	\$
Occupation (Required)	Aggregate year-to-date	\$ 10,000.00
C. Source: Ocorporation OPAC OIndividual OLoan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Pine Gate Renewables, LLC	9 /14 /20	\$ 1,000.00
Mailing Address 130 Roberts Street		\$
City, State, Zip Code Asheville, NC 28801		\$
Name of Employer (Required)		S
Occupation (Required)	Aggregate year-to-date	\$ 1,000.00
D. Source: OCorporation OPAC OIndividual OLoan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name SunChase Power LLC	10 / 5 / 20	\$ 1,000.00
Mailing Address 4300 Speedway, #4617		\$
City, State, Zip Code Austin, TX 78765		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate yeur-to-date	\$ 1,000.00

1/1/20 Reporting period ___

through _

12/31/20

	II ID	
A. Source: OCorporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) LLP	(Mu, Day, 1 car)	this period
Full name Michael Best & Friedrich LLP	2/10/20	\$ 10,000.00
Mailing Address 100 East Wisconsin Avenue		\$
City, State, Zip Code Milwaukee, WI 53202	_/_/_	\$
Name of Employer (Required)		S
Occupation (Required)	Aggregate year-to-date	\$ 10,000.00
B. Source: Corporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	2 (12 (20	\$ 1,000.00
Calpine Corporation	2 / 12 / 20	
Mailing Address 717 Texas Avenue		\$
City, State, Zip Code Houston, TX 77002		S
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year—to-date	\$ 1,000.00
C. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name NRG Energy Inc	2 /11 / 20	\$ 1,000.00
Mailing Address 804 Carnegie Center	_'_/_	S
City, State, Zip Code Princeton, NJ 08540		\$
Name of Employer (Required)		S
Occupation (Required)	Aggregate year-to-date	\$ 1,000.00
D. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name North American Coal PAC	$\frac{2}{2} \frac{12}{2} \frac{20}{2}$	\$ 1,000.00
Mailing Address 5430 Legacy Dr., BLDG 1, STE 300		\$
City, State, Zip Code Plano, TX 75024		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 1,000.00

1/1/20 Reporting period

through _

12/31/20

	TIL TO	
A. Source: Ocorporation OPAC OIndividual OLoan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) LLC	(NO., Day, x car)	this period
Southern Current LLC	9/10/20	\$ 2,500.00
Mailing Address 1519 King Street EXT		\$
City, State, Zip Code Charleston, SC 29405		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 2,500.00
B. Source: OCorporation OPAC OIndividual OLoan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Cypress Creek Renewables, LLC	9 / 24 / 20	\$ 1,000.00
Mailing Address 3402 Pico Blvd		\$
City, State, Zip Code Santa Monica, CA 90405	_'_'	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate yearto-date	\$ 1,000.00
C. Source: Ocorporation OPAC OIndividual OLoan Other (please specify) Association	Date (Mo., Day, Year)	Amount of each receipt this period
Full name American Wind Energy Association	2 / 27 / 20	\$ 1,000.00
Mailing Address 1501 M Street, NW 15th Floor		\$
City, State, Zip Code Washington, DC 20005	_'_'_	\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year–to-date	\$ 1,000.00
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name William L. Crews	6 / 4 / 20	\$ 500.00
Malling Address 518 N 11th St.		\$
City, State, Zip Code Oxford, MS 38655		\$
Name of Employer (Required) University of Mississippi		\$
Occupation (Required) Education Development Officer	Aggregate year–to-date	\$ 500.00

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Reporting period__

1/1/20

_through _

12/31/20

TIEMIZED RECEI	112	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Pull name Deborah Lewis dba RNA Engineering	2 / 10 / 20	\$ 1000.00
Mailing Address 262 Wolf Creek Pass		\$
City, State, Zip Code Wimberley, TX78676		S
Name of Employer (Required) RNA Engineering		S
Occupation (Required) Owner	Aggregate yearto-date	\$ 1000.00
B. Source: OCorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Denise A. Bode	2 / 13 / 20	\$ 500.00
Mailing Address 28389 Catalpa Point Road		\$
City, State, Zip Code Easton, MD 21601	_'_'_	S
Name of Employer (Required) Michael Best Strategies LLC		\$
Occupation (Required) Partner	Aggregate year-to-date	\$ 500.00
C. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Sunrun Incorporated	10 / 22 / 20	\$ 1000.00
Malling Address 775 Fiero Ln. Ste 200		\$
City, State, Zip Code San Luis Obispo, CA 93401	_'_'_	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 1000.00
D. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Sunpower Corporation Systems	10 / 20 / 20	\$ 1000.00
Mailing Address 1414 Harbor Way South		\$
City, State, Zip Code Richmond, CA 94904		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 1000.00

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Reporting period ______1/1/20

through <u>12/31/20</u>

ITEMIZED DISBURSEMENTS

A. Full name Tucker Marcum	Date (Mo., Day, Year)	Amount of each disbursement this period
Malling Address 2117 Cason Lane	1/1/20	\$ 2500.00
City, State, Zip Code Murfreesboro, TN 37128	1 / 17 / 20	\$ 332.00
Purpose of Disbursement (Optional) Contract	Aggregate Year-to-date	\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	1/22/20	\$ 366.90
City, State, Zip Code	2 / 1 / 20	\$ 2714.62
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	3 / 2 / 20	\$ 2500.00
City, State, Zip Code	4 / 2 / 20	\$ 2500.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	S
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Malling Address	5 / 4 / 20	\$ 2500.00
City, State, Zip Code	6/2/20	\$ 2500.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	7 / 10 / 20	\$ 2650
City, State, Zip Code	8 , 2 , 20	\$ 2550
Purpose of Disbursement (Optional)	Aggregate Yeur-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Malling Address	8 / 31 / 20	s 2500
City, State, Zip Code	10 / 8 / 20	\$ 2715.00
Purpose of Disbursement (Optional)	Aggregate Yeur-to-date	\$

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Name of Candidate or	Committee _	Brandon Presley	<u> </u>		
Reporting period	1/1/20		through	12/31/20	

ITEMIZED DISBURSEMENTS

A. Full name Tucker Marcum	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2117 Cason Lane	11 / 3 / 20	\$ 2500.00
City, State, Zip Code Murfreesboro, TN 37128	12 / 8 / 20	\$ 2500.00
Purpose of Disbursement (Optional) Contract	Aggregate Year-to-date	\$ 31328.52
3. Full name Brandon Presley	Dute (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 182 Verona Ave	10 / 6 / 20	S 308.19
City, State, Zip Code Nettleton, MS 38858	_1_1_	\$
Purpose of Disbursement (Optional) Expense Reimbursement	Aggregate Year-to-date	\$ 308.19
C. Full name Nettleton School District	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Drawer 409	11/2/20	\$ 550.00
City, State, Zip Code Nettleton, MS 38858	_/_/_	\$
Purpose of Disbursement (Optional) Sponsorship	Aggregate Yenr-to-date	\$ 550.00
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		\$
City, State, Zip Code	_'_'_	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		S
City, State, Zip Code		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		S
City, State, Zip Code		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

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Name of Candidate or Com	mittee	Brandon Presley		
The	11.00		4lessonseels	12/21/20

Reporting period 1/1/20 through 12/31/20 ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2		
Facebook	Date (Mo., Day, Year)	Amount of each disbursement this period
Malling Address 1601 Willow Road	5 / 4 / 20	\$ 160.00
Oity, State, Zip Code Menlo Park, CA 94205	5/5/20	\$ 75.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	S
3. Full pame	Date (Mo., Day, Year)	Amount of each dishursement this period
Mailing Address	5 / 6 / 20	\$ 75.00
City, State, Zip Code	5 / 7 / 20	\$ 125.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	5 / 29 / 20	\$ 175.00
City, State, Zip Code	6,2,20	\$ 123.06
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 733.06
D. Full name Daily Journal	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1242 S. Green St.	12 / 1 / 20	\$ 233.86
City, State, Zip Code Tupelo, MS 38804		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 233.86
E. Full name Allmond Printing	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 603 W. Commerce St.	12 / 4 / 20	\$ 240.75
City, State, Zip Code Aberdeen, MS 39730	12 / 4 / 20	\$ 763.98
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 1004.73
F. Full name American Airlines	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1 Skyview Drive	2 / 3 / 20	\$ 529.60
City, State, Zip Code		S
Fort Worth, TX 76155 Purpose of Disbursement (Optional) Travel for campaign staff	Aggregate Year-to-date	\$ 529.60

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*		***		_

Reporting period ______1/1/20 _____through ___12/31/20 ______
ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to	January 1, 2018 or On or After J.	
A. Full name Abby Clayton	Date (Mo., Day, Year)	Amount of each disbursement this period
Malling Address 118 Autumn Hills	2/2/20	\$ 469.00
City, State, Zip Code Tupelo, MS 38802		S
Purpose of Disbursement (Optional) Website Management	Aggregate Year-to-date	\$ 469.00
B. Full name Chism Strategies	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2906 N. State St. STE 106	6/2/20	\$ 500.00
City, State, Zip Code Jackson, MS 39216		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 500.00
C. Full name YETI	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 163686	7 / 27 / 20	\$ 1707.21
City, State, Zip Code Austin, TX 78716		\$
Purpose of Disbursement (Optional) Printed Items For Supporters	Aggregate Year-to-date	\$ 1707.21
D. Full name Huffman and Rejebian	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 1180	9 / 30 / 20	\$ 7000.00
City, State, Zip Code Jackson, MS 39215	12/8/20	\$ 700.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 7700.00
F. Full name MS Peanut Supply and Equipment	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 44155 Hwy 45S	12 / 8 / 20	\$ 500.00
City, State, Zip Code Aberdeen, MS 39730		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 500.00
Full name Haute Catering	Date (Mo., Day, Year)	Amount of each disbursement this period
PO Box 77896	2 / 13 / 20	\$ \$1125.13
City, State, Zip Code Washington, DC 20013		\$
urpose of Disbursement (Optional). Event Catering	Aggregate Year-to-date	\$ \$1125.13