

Candidate's Committee  
REPORT OF RECEIPTS AND DISBURSEMENTS  
2023 Election

**RECEIVED**

By Secretary of State Elections Division at 4:11 pm, Jun 09, 2023

Name of Candidate Tate for GovernorAddress PO Box 24355City/Zip Jackson 39225

Telephone (Work) \_\_\_\_\_

(Fax) \_\_\_\_\_

Treasurer Kristin McDewitt

Email Address \_\_\_\_\_

Office Sought Governor

Party Affiliation \_\_\_\_\_



Check here if above information is different from previous report

**TYPE OF REPORT**May 10, 2023 Periodic Report (January 1, 2023, through April 30, 2023) ..... **Mandatory**\* June 9, 2023 Periodic Report (May 1, 2023, through May 31, 2023) ..... **Mandatory**July 10, 2023 Periodic Report (June 1, 2023, through June 30, 2023) ..... **Mandatory**August 1, 2023 Primary Pre-Election Report (July 1, 2023, through July 29, 2023) ..... **Mandatory**August 22, 2023 Primary Pre-Runoff Report (July 30, 2023, through August 19, 2023) ..... **Runoff Candidates Only**October 10, 2023 Periodic Report (July 1, 2023, through September 30, 2023) ..... **Mandatory**October 31, 2023 Pre-Election Report (October 1, 2023, through October 29, 2023) ..... **Mandatory**November 21, 2023 Pre-Runoff Report (October 30, 2023, through November 19, 2023) ..... **Runoff Candidates Only**January 10, 2024 Periodic Report (October 1, 2023, through December 31, 2023) ..... **Mandatory**Termination Report (Committee will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation and a zero cash on hand balance)**Required to terminate reporting obligations****IMPORTANT**

- (1) All candidates for office, and their political committees if organized as such, 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 committee 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, all campaign finance disclosure 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" 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.
- (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.

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

**JAN. 1, 2023 CASH ON HAND BALANCE**

	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
<b>TOTAL AMT OF CONTRIBUTIONS<sup>1</sup></b>				
<b>TOTAL AMT OF DISBURSEMENTS</b>				
<b>CASH ON HAND BALANCE</b>				

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

**JAN. 1, 2023 CASH ON HAND BALANCE** \$5,899,590.03

	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
<b>TOTAL AMT OF CONTRIBUTIONS</b>	\$661,447.50	\$6,525.00	\$667,972.50	\$2,407,281.19
<b>TOTAL AMT OF DISBURSEMENTS</b>	\$278,071.86	\$595.39	\$278,667.25	\$835,039.54
<b>CASH ON HAND BALANCE</b>				\$7,471,831.68

*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 Director or Treasurer

6/9/2023  
Date

**Penalties:** Failure to timely submit required reports in accordance with the applicable statute(s) may result in the imposition of a civil penalty of \$50 per day for ten (10) days and/or prosecution pursuant to Miss. Code Ann. §§ 23-15-811 and 813 (1972).

Political Committees supporting or opposing Statewide, State District or Legislative Candidates file this form 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.

Political Committees supporting or opposing county and/or county district candidates file this form with the Circuit Clerk's Office.

<sup>1</sup> 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 Tate for Governor  
 Reporting Period 05/01/2023 through 05/31/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>R.B. Dossett Jr.</u>	<u>05/09/2023</u>	<u>\$1,000.00</u>
Mailing Address <u>2540 Lakeshire Drive</u>		
City, State, Zip Code <u>Tupelo, MS 38804-6977</u>		
Name of Employer (Required) <u>Dossett Big 4 Buick GMC</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	<u>\$1,000.00</u>

  

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Griffis Motors Inc.</u>	<u>05/22/2023</u>	<u>\$1,000.00</u>
Mailing Address <u>PO Box 269</u>		
City, State, Zip Code <u>Philadelphia, MS 39350-0269</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	<u>\$1,000.00</u>

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Daniel Dare</u>	<u>05/13/2023</u>	<u>\$250.00</u>
Mailing Address <u>1 Hunter Hill Road</u>		
City, State, Zip Code <u>Vicksburg, MS 39183-8791</u>		
Name of Employer (Required) <u>Merit Health</u>		
Occupation (Required) <u>Physician</u>	Aggregate Year-to-date	<u>\$250.00</u>

  

Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Mississippi Manufactured Housing Association PAC</u>	<u>05/18/2023</u>	<u>\$1,000.00</u>
Mailing Address <u>P.O. Box 320369</u>		
City, State, Zip Code <u>Flowood, MS 39232</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	<u>\$1,000.00</u>

Name of Candidate or Committee Tate for Governor  
 Reporting Period 05/01/2023 through 05/31/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carlos A. Latorre	05/31/2023	\$250.00
Mailing Address 101 CHERRYBARK LN		
City, State, Zip Code Vicksburg, MS 39180-1820		
Name of Employer (Required) VA		
Occupation (Required) Physician	Aggregate Year-to-date	\$250.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Ceranti Nissan	05/16/2023	\$1,000.00
Mailing Address 3130 Hwy 82 East		
City, State, Zip Code Greenville, MS 38703-8232		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Plum Creek Properties, LLC	05/09/2023	\$5,000.00
Mailing Address 540 County Road 103		
City, State, Zip Code Walnut, MS 38683-8952		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gray-Daniels Auto Family	05/04/2023	\$1,000.00
Mailing Address 6060 I-55 North Frontage Road		
City, State, Zip Code Jackson, MS 39211		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carl Robert Montgomery	05/10/2023	\$1,000.00
Mailing Address PO Box 1039		
City, State, Zip Code Canton, MS 39046-1039		
Name of Employer (Required) Self		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brice Wiggins	05/22/2023	\$1,000.00
Mailing Address 1201 Farnsworth Ave		
City, State, Zip Code Pascagoula, MS 39567-1255		
Name of Employer (Required) Wiggins Law, PLLC		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles W. Gunn	05/16/2023	\$250.00
Mailing Address 25 Spring Dr.		
City, State, Zip Code Maumelle, AR 72113-6384		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kenneth Windham	05/12/2023	\$250.00
Mailing Address 94 Grandview Circle		
City, State, Zip Code Brandon, MS 39047-7398		
Name of Employer (Required) iHeart Media		
Occupation (Required) Market President	Aggregate Year-to-date	\$250.00

Name of Candidate or Committee

Tate for Governor

Reporting Period 05/01/2023

through 05/31/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Judy Frascogna	05/16/2023	\$1,000.00
Mailing Address 2122 Brackenshire Circle		
City, State, Zip Code Jackson, MS 39211-5836		
Name of Employer (Required) N/A		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name T. Martin Williams	05/17/2023	\$1,000.00
Mailing Address 13 Northwood Ave		
City, State, Zip Code Jackson, TN 38301-4450		
Name of Employer (Required) Coca-Cola Bottling Co. Consolidated		
Occupation (Required) Executive	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Curtis	05/16/2023	\$500.00
Mailing Address 130 Oakridge Trail		
City, State, Zip Code Flowood, MS 39232-8687		
Name of Employer (Required) ProTel		
Occupation (Required) Executive	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mike Whatley	05/16/2023	\$1,000.00
Mailing Address 11 Moreton Place		
City, State, Zip Code Brookhaven, MS 39601-9257		
Name of Employer (Required) Mike Whatley Honda		
Occupation (Required) President	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Tate for Governor  
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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Ellen Short</u>	<u>05/03/2023</u>	<u>\$5.00</u>
Mailing Address <u>2366 Quail Creek Road</u>		
City, State, Zip Code <u>Tupelo, MS 38801-7250</u>		
Name of Employer (Required) <u>TRI, Inc.</u>		
Occupation (Required) <u>Realtor</u>	Aggregate Year-to-date	<u>\$205.00</u>

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Ellen Short</u>	<u>05/03/2023</u>	<u>\$100.00</u>
Mailing Address <u>2366 Quail Creek Road</u>		
City, State, Zip Code <u>Tupelo, MS 38801-7250</u>		
Name of Employer (Required) <u>TRI, Inc.</u>		
Occupation (Required) <u>Realtor</u>	Aggregate Year-to-date	<u>\$205.00</u>

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Matthew B. Wesson</u>	<u>05/09/2023</u>	<u>\$1,000.00</u>
Mailing Address <u>2445 GREENWICH PARK CIR</u>		
City, State, Zip Code <u>Tupelo, MS 38804-5045</u>		
Name of Employer (Required) <u>Wesson Ophthalmologist Association, PLLC</u>		
Occupation (Required) <u>Ophthalmologist</u>	Aggregate Year-to-date	<u>\$1,000.00</u>

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Michael Vanveckhoven</u>	<u>05/04/2023</u>	<u>\$1,000.00</u>
Mailing Address <u>4525 9th Ave.</u>		
City, State, Zip Code <u>Meridian, MS 39305-2815</u>		
Name of Employer (Required) <u>New South Ford Nissan</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	<u>\$1,000.00</u>

Name of Candidate or Committee Tate for Governor  
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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>MASCA PAC</u>	05/03/2023	\$1,000.00
Mailing Address <u>2550 Flowood Dr Ste 101</u>		
City, State, Zip Code <u>Flowood, MS 39232-9304</u>		
Name of Employer (Required) _____		
Occupation (Required) _____	Aggregate Year-to-date	\$1,000.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Reuben H. Stone</u>	05/03/2023	\$1,000.00
Mailing Address <u>450 Greenwood Lane</u>		
City, State, Zip Code <u>Ridgeland, MS 39157-4000</u>		
Name of Employer (Required) <u>Jackson Heart</u>		
Occupation (Required) <u>Cardiologist</u>	Aggregate Year-to-date	\$1,000.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Randall Long</u>	05/05/2023	\$1,000.00
Mailing Address <u>3201 N Madison Street</u>		
City, State, Zip Code <u>Corinth, MS 38834-2023</u>		
Name of Employer (Required) <u>Long Wholesale</u>		
Occupation (Required) <u>Executive</u>	Aggregate Year-to-date	\$1,000.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Adam Watkins</u>	05/30/2023	\$1,000.00
Mailing Address <u>413 Indian Springs Road</u>		
City, State, Zip Code <u>Petal, MS 39465-9630</u>		
Name of Employer (Required) <u>The All Star Team</u>		
Occupation (Required) <u>Real Estate</u>	Aggregate Year-to-date	\$1,000.00



Name of Candidate or Committee Tate for Governor  
 Reporting Period 05/01/2023 through 05/31/2023

## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>F.L. Crane &amp; Sons, Inc.</u>	<u>05/17/2023</u>	<u>\$1,000.00</u>
Mailing Address <u>PO Box 428</u>		
City, State, Zip Code <u>Fulton, MS 38843-0428</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	<u>\$1,000.00</u>

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Geoffrey Yoste</u>	<u>05/10/2023</u>	<u>\$250.00</u>
Mailing Address <u>201 Cullen</u>		
City, State, Zip Code <u>Oxford, MS 38655-2203</u>		
Name of Employer (Required) <u>Yoste Strategic Partners, LLC</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	<u>\$250.00</u>

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>C &amp; S Construction, LLC</u>	<u>05/08/2023</u>	<u>\$1,000.00</u>
Mailing Address <u>1879 North Coley Road</u>		
City, State, Zip Code <u>Tupelo, MS 38801-6931</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	<u>\$1,000.00</u>

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Sowell Place LLC</u>	<u>05/03/2023</u>	<u>\$5,000.00</u>
Mailing Address <u>605 Crescent Blvd STE 200</u>		
City, State, Zip Code <u>Ridgeland, MS 39157-8659</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	<u>\$5,000.00</u>

Name of Candidate or Committee

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through 05/31/2023

## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Phil Moore Buick GMC	05/16/2023	\$1,000.00
Mailing Address 5728 I-55 North		
City, State, Zip Code Jackson, MS 39211-2638		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Yerger	05/23/2023	\$500.00
Mailing Address 6 Laurel Cv		
City, State, Zip Code Jackson, MS 39211-6472		
Name of Employer (Required) Homemaker		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name H.L. Williams Jr.	05/13/2023	\$1,000.00
Mailing Address PO Box 239		
City, State, Zip Code Corinth, MS 38835-0239		
Name of Employer (Required) Coca-Cola Bottling		
Occupation (Required) Executive	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mack Grubbs	05/22/2023	\$1,000.00
Mailing Address 6507 Hwy 98 W		
City, State, Zip Code Hattiesburg, MS 39402		
Name of Employer (Required) Mack Grubbs Ford, Inc.		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee

Tate for Governor

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through 05/31/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Howard Chip Miskelly	05/01/2023	\$500.00
Mailing Address 118 Upper Wind Rush Dr.		
City, State, Zip Code Flowood, MS 39232-8961		
Name of Employer (Required) Self		
Occupation (Required) Furniture Industry	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name R. Price Johnson	05/10/2023	\$2,500.00
Mailing Address PO Box 608		
City, State, Zip Code Oxford, MS 38655-0608		
Name of Employer (Required) Strata Management		
Occupation (Required) Executive	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Fortress Law, LLC	05/04/2023	\$5,000.00
Mailing Address 648 Dogwood Dr.		
City, State, Zip Code Yazoo City, MS 39194-8205		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Simpson III	05/03/2023	\$1,000.00
Mailing Address 298 Quail Rd		
City, State, Zip Code Canton, MS 39046-9634		
Name of Employer (Required) Simpson Law Firm		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee

Tate for Governor

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through 05/31/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stephen Henry Hutton	05/01/2023	\$1,000.00
Mailing Address 2471 Mt Moriah		
City, State, Zip Code Memphis, TN 38115-1507		
Name of Employer (Required) Chuck Hutton Chev		
Occupation (Required) Executive	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ken Sims	05/01/2023	\$250.00
Mailing Address 1013 Legacy Cr.		
City, State, Zip Code Brandon, MS 39042-5501		
Name of Employer (Required) Community Bank		
Occupation (Required) Banker	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kelle Barfield	05/13/2023	\$1,000.00
Mailing Address 1970 Mount Alban Rd		
City, State, Zip Code Vicksburg, MS 39180-1057		
Name of Employer (Required) Bookstore Owner		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mossy of Picayune	05/12/2023	\$1,000.00
Mailing Address 241 Frontage Road		
City, State, Zip Code Picayune, MS 39466-7587		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00



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Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Empower PAC	05/31/2023	\$2,500.00
Mailing Address 1000 Northpark Dr		
City, State, Zip Code Ridgeland, MS 39157-5299		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$3,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gary Nichols	05/05/2023	\$250.00
Mailing Address 618 Pine Grove Road		
City, State, Zip Code Magee, MS 39111-8776		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Arthur D. Spratlin, Jr.	05/01/2023	\$1,000.00
Mailing Address 2480 Sandridge Dr		
City, State, Zip Code Jackson, MS 39211-6203		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name G. Edward Tucker Jr.	05/16/2023	\$250.00
Mailing Address 1214 MARTIN DR		
City, State, Zip Code Brandon, MS 39047-6449		
Name of Employer (Required) G. Edward Tucker, CPA		
Occupation (Required) CPA	Aggregate Year-to-date	\$250.00

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## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Woolwine Ford-Lincoln, Inc	05/31/2023	\$1,000.00
Mailing Address PO Drawer 1509		
City, State, Zip Code Collins, MS 39428-1509		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Rounsaville	05/04/2023	\$250.00
Mailing Address 206 Culpepper Boulevard		
City, State, Zip Code Madison, MS 39110-7359		
Name of Employer (Required) Waggoner Engineering, Inc.		
Occupation (Required) VP	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLP	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jones Walker, LLP	05/26/2023	\$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: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name CRH Americas, Inc PAC	05/01/2023	\$10,000.00
Mailing Address 11714 Wilson Parke Ave Ste 155		
City, State, Zip Code Austin, TX 78726-4061		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$10,000.00

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Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi Health Care Association PAC, LLC	05/12/2023	\$50,000.00
Mailing Address 303 Brame Rd		
City, State, Zip Code Ridgeland, MS 39157-9423		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$50,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Columbus Hyundai, LLC	05/10/2023	\$1,000.00
Mailing Address P.O. Box 2568		
City, State, Zip Code Columbus, MS 39704-2568		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James H. Heidelberg	05/21/2023	\$1,000.00
Mailing Address 1300 Driftwood Street		
City, State, Zip Code Pascagoula, MS 39567-7592		
Name of Employer (Required) Heidelberg Steinberger		
Occupation (Required) Attorney	Aggregate Year-to-date	\$3,750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Maron	05/24/2023	\$2,505.00
Mailing Address 213 Kingsbridge Road		
City, State, Zip Code Madison, MS 39110-8486		
Name of Employer (Required) Adams & Reese LLP		
Occupation (Required) Attorney	Aggregate Year-to-date	\$2,505.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harry J. Blevins	05/18/2023	\$1,000.00
Mailing Address 3007 Northwood Ave		
City, State, Zip Code Pascagoula, MS 39567-7535		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Timothy B. Smith	05/15/2023	\$5,000.00
Mailing Address 4704 N Harper Rd.		
City, State, Zip Code Corinth, MS 38834-7070		
Name of Employer (Required) Aevectus Healthcare Solutions		
Occupation (Required) Founder	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kerk Mehrle	05/03/2023	\$1,000.00
Mailing Address 2668 Lake Circle		
City, State, Zip Code Jackson, MS 39211-6761		
Name of Employer (Required) MS Sports Medicine		
Occupation (Required) Surgeon	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Arbor View D'Iberville LLC	05/05/2023	\$5,000.00
Mailing Address 10480 Automall Pkway		
City, State, Zip Code Diberville, MS 39540-3769		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Knox W. Ross Jr.	05/10/2023	\$250.00
Mailing Address PO Box 369		
City, State, Zip Code Pelahatchie, MS 39145-0369		
Name of Employer (Required) Ross & Betts		
Occupation (Required) CPA	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Huff	05/01/2023	\$300.00
Mailing Address 7517 Forrest Drive		
City, State, Zip Code Meridian, MS 39305-9513		
Name of Employer (Required) Community Bank		
Occupation (Required) Banker	Aggregate Year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bill Yoder	05/15/2023	\$1,000.00
Mailing Address 809 Franklin St.		
City, State, Zip Code Corinth, MS 38834-4848		
Name of Employer (Required) Trustmark Bank		
Occupation (Required) Community President	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kenneth W. Williams	05/11/2023	\$1,000.00
Mailing Address PO Box 239		
City, State, Zip Code Corinth, MS 38835-0239		
Name of Employer (Required) Corinth Coca-Cola		
Occupation (Required) Executive	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David McRae	05/04/2023	\$1,000.00
Mailing Address 445 Greenwood Lane		
City, State, Zip Code Ridgeland, MS 39157-4043		
Name of Employer (Required) State of MS		
Occupation (Required) Treasurer	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name VBC, LLC	05/08/2023	\$1,000.00
Mailing Address 1879 North Coley Road		
City, State, Zip Code Tupelo, MS 38801-6931		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Luke Montgomery	05/08/2023	\$1,500.00
Mailing Address PO Box 37		
City, State, Zip Code Fulton, MS 38843-0037		
Name of Employer (Required) Montgomery Enterprises, Inc.		
Occupation (Required) President	Aggregate Year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald A. White	05/26/2023	\$500.00
Mailing Address 211 Ridge Dr		
City, State, Zip Code Jackson, MS 39216-4112		
Name of Employer (Required) White Realty Inc.		
Occupation (Required) Real Estate	Aggregate Year-to-date	\$500.00

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Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Montgomery Enterprises, Inc.	05/08/2023	\$1,000.00
Mailing Address PO Box 37		
City, State, Zip Code Fulton, MS 38843-0037		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Caroline Sims	05/04/2023	\$1,000.00
Mailing Address 4125 Crane Blvd		
City, State, Zip Code Jackson, MS 39216-3406		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada		
Occupation (Required) Government Relations	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lesly Gaynor Murray	05/01/2023	\$1,000.00
Mailing Address 120 Herons Landing		
City, State, Zip Code Ridgeland, MS 39157-8687		
Name of Employer (Required) Butler Snow		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name J. Allen Toyota	05/03/2023	\$1,000.00
Mailing Address 11397 Helen Richards Road		
City, State, Zip Code Gulfport, MS 39503-5901		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Endom Welding & Trailer Repair Inc.	05/31/2023	\$1,000.00
Mailing Address PO Drawer10		
City, State, Zip Code Ellisville, MS 39437-0010		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

  

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nationwide Mutual Insurance Company	05/02/2023	\$1,000.00
Mailing Address One Nationwide Plaza		
City, State, Zip Code Columbus, OH 43215-2226		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name B.J. Canup	05/09/2023	\$300.00
Mailing Address 102 Francis Drive		
City, State, Zip Code Fulton, MS 38843-8434		
Name of Employer (Required) Tremont Floral		
Occupation (Required) President	Aggregate Year-to-date	\$300.00

  

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Akins And Adams P.A.	05/15/2023	\$250.00
Mailing Address 108 E Jefferson St.		
City, State, Zip Code Ripley, MS 38663-2016		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles W. Rigdon	05/10/2023	\$2,000.00
Mailing Address PO Box 2182		
City, State, Zip Code Columbus, MS 39704-2182		
Name of Employer (Required) Columbus Nissan		
Occupation (Required) Owner	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Walter B. Wellington	05/01/2023	\$250.00
Mailing Address 1002 Sapphire Crossing		
City, State, Zip Code Flowood, MS 39232-5015		
Name of Employer (Required) Wellington & Associates		
Occupation (Required) Owner	Aggregate Year-to-date	\$250.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cannon Cochran Management Services, Inc.	05/04/2023	\$1,000.00
Mailing Address 2 E Main Street Suite 208		
City, State, Zip Code Danville, IL 61832-5844		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLP	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Adams & Reese LLP	05/25/2023	\$1,000.00
Mailing Address 4500 One Shell Square		
City, State, Zip Code New Orleans, LA 70139		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jujuana F. Thompson	05/15/2023	\$500.00
Mailing Address 24 Ridgeview Dr.		
City, State, Zip Code Corinth, MS 38834-7322		
Name of Employer (Required) StoneRidge		
Occupation (Required) Executive	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William B. Stevens	05/01/2023	\$500.00
Mailing Address PO Box 422		
City, State, Zip Code Smithville, MS 38870-0422		
Name of Employer (Required) Community Bank Amory		
Occupation (Required) President	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi Physicians PAC	05/10/2023	\$25,000.00
Mailing Address 404 W Parkway Pl		
City, State, Zip Code Ridgeland, MS 39157-6010		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$25,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald Clark	05/03/2023	\$5,000.00
Mailing Address 263 Quail Road		
City, State, Zip Code Canton, MS 39046		
Name of Employer (Required) Butler Snow		
Occupation (Required) Attorney	Aggregate Year-to-date	\$5,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pitcher Point Investments LLC	05/02/2023	\$1,000.00
Mailing Address 15039 Lorraine Rd		
City, State, Zip Code Biloxi, MS 39532-9111		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James D. Polk	05/15/2023	\$250.00
Mailing Address 5432 Parsons Road		
City, State, Zip Code Terry, MS 39170-7197		
Name of Employer (Required) Greenfield Family Healthcare		
Occupation (Required) Physician	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Herring	05/04/2023	\$2,500.00
Mailing Address 232 E Semmes Street		
City, State, Zip Code Canton, MS 39046-4530		
Name of Employer (Required) Herring, Long, and Crews		
Occupation (Required) Attorney	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Deborah W. Coleman	05/15/2023	\$250.00
Mailing Address 505 Saratoga Cove		
City, State, Zip Code Madison, MS 39110-7036		
Name of Employer (Required) State of Mississippi		
Occupation (Required) Accountant	Aggregate Year-to-date	\$250.00

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Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name International Paper PAC	05/25/2023	\$2,500.00
Mailing Address 1101 Pennsylvania Avenue NW Suite 200		
City, State, Zip Code Washington, DC 20004-2514		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Blackburn Chrysler Jeep Dodge	05/02/2023	\$500.00
Mailing Address 2135 North Frontage Road		
City, State, Zip Code Vicksburg, MS 39180-5182		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Louis Zemek	05/01/2023	\$150.00
Mailing Address 418 County Road 177		
City, State, Zip Code Bruce, MS 38915-9744		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Providence Management LLC	05/17/2023	\$1,000.00
Mailing Address 317 Heritage Dr. STE 3B		
City, State, Zip Code Oxford, MS 38655-5507		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee

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## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mazda of Jackson	05/16/2023	\$1,000.00
Mailing Address 5397 I-55 North Frontage Road		
City, State, Zip Code Jackson, MS 39206		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brian Gomillion	05/17/2023	\$250.00
Mailing Address 212 Main St.		
City, State, Zip Code Walnut Grove, MS 39189-5002		
Name of Employer (Required) The Town of Walnut Grove		
Occupation (Required) Mayor	Aggregate Year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brian Gomillion	05/30/2023	\$100.00
Mailing Address 212 Main St.		
City, State, Zip Code Walnut Grove, MS 39189-5002		
Name of Employer (Required) The Town of Walnut Grove		
Occupation (Required) Mayor	Aggregate Year-to-date	\$350.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hankins, Inc.	05/15/2023	\$1,000.00
Mailing Address PO Box 517		
City, State, Zip Code Ripley, MS 38663-0517		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William R. Tynes	05/01/2023	\$250.00
Mailing Address 1910 Stuart Ave		
City, State, Zip Code Ocean Springs, MS 39564-3926		
Name of Employer (Required) Community Bank		
Occupation (Required) Banker	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name E.E. Laird	05/10/2023	\$250.00
Mailing Address 200 Dominican #4107		
City, State, Zip Code Madison, MS 39110-8630		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sarah Young	05/03/2023	\$1,000.00
Mailing Address 4702 Calhita Place		
City, State, Zip Code Jackson, MS 39211-5803		
Name of Employer (Required) Homemaker		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark Cleary	05/17/2023	\$250.00
Mailing Address 800 College Hill Road #5101		
City, State, Zip Code Oxford, MS 38655-2780		
Name of Employer (Required) Self		
Occupation (Required) Real Estate	Aggregate Year-to-date	\$250.00

Name of Candidate or Committee Tate for Governor  
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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Calvert	05/02/2023	\$1,000.00
Mailing Address 210 Hidden Oaks		
City, State, Zip Code Ridgeland, MS 39157-7000		
Name of Employer (Required) MS Sports Medicine		
Occupation (Required) Doctor	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sharon Ross	05/16/2023	\$1,000.00
Mailing Address 105 Michael Cove		
City, State, Zip Code Brandon, MS 39047-9009		
Name of Employer (Required) Mississippi Center for Public Policy		
Occupation (Required) Director of External Affairs	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Billy Young	05/16/2023	\$1,000.00
Mailing Address 803 Tucan Ridge Dr.		
City, State, Zip Code Oxford, MS 38655-9340		
Name of Employer (Required) Right Track Medical Group		
Occupation (Required) Adminstrator/CEO	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name The Mississippi Center for Plastic Surgery	05/03/2023	\$1,000.00
Mailing Address 200 West Jackson St. STE 100		
City, State, Zip Code Ridgeland, MS 39157-2310		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Key, LLC	05/09/2023	\$10,000.00
Mailing Address 219 Key Drive		
City, State, Zip Code Madison, MS 39110-7370		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Wallace	05/04/2023	\$1,000.00
Mailing Address 318 Hillview Drive		
City, State, Zip Code Ridgeland, MS 39157-8606		
Name of Employer (Required) Wise, Carter, Child, & Carraway, P.A.		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Matthew Carroll	05/04/2023	\$250.00
Mailing Address 114 Seaside Drive		
City, State, Zip Code Ocean Springs, MS 39564-5145		
Name of Employer (Required) Singing River		
Occupation (Required) Physician	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name DRB Holdings LLC	05/08/2023	\$250.00
Mailing Address 5072 Lackey Lane		
City, State, Zip Code Tupelo, MS 38801-6925		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00

Name of Candidate or Committee

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Camille Allen Snyder	05/22/2023	\$255.00
Mailing Address 2315 Twin Lakes Circle		
City, State, Zip Code Jackson, MS 39211-6758		
Name of Employer (Required) Ashford Advisors		
Occupation (Required) Managing Director	Aggregate Year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anna Marie Barnes	05/02/2023	\$100.00
Mailing Address 3980 Council Circle		
City, State, Zip Code Jackson, MS 39206-5811		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$455.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anna Marie Barnes	05/31/2023	\$105.00
Mailing Address 3980 Council Circle		
City, State, Zip Code Jackson, MS 39206-5811		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$455.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas C. Shelton	05/17/2023	\$250.00
Mailing Address 131 Woodstock Dr		
City, State, Zip Code Vicksburg, MS 39180-5746		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Sparks Law Firm PLLC</u>	05/15/2023	\$250.00
Mailing Address <u>PO Box 2610</u>		
City, State, Zip Code <u>Oxford, MS 38655-4600</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Janson Durr Boyles</u>	05/11/2023	\$2,500.00
Mailing Address <u>215 Winged Foot Cir</u>		
City, State, Zip Code <u>Jackson, MS 39211-2530</u>		
Name of Employer (Required) <u>Boyles Moak</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	\$2,505.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Janson Durr Boyles</u>	05/11/2023	\$5.00
Mailing Address <u>215 Winged Foot Cir</u>		
City, State, Zip Code <u>Jackson, MS 39211-2530</u>		
Name of Employer (Required) <u>Boyles Moak</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	\$2,505.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Paul Beck</u>	05/03/2023	\$250.00
Mailing Address <u>106 Seventeen Place</u>		
City, State, Zip Code <u>Hattiesburg, MS 39402-3605</u>		
Name of Employer (Required) <u>USM</u>		
Occupation (Required) <u>Professor</u>	Aggregate Year-to-date	\$250.00



Name of Candidate or Committee Tate for Governor  
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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stewart Rutledge	05/11/2023	\$1,000.00
Mailing Address 1739 University Ave STE 116		
City, State, Zip Code Oxford, MS 38655-4109		
Name of Employer (Required) Self		
Occupation (Required) Developer	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert L. S. McElhaney	05/11/2023	\$250.00
Mailing Address 723 Versailles Drive		
City, State, Zip Code Ridgeland, MS 39157-5130		
Name of Employer (Required) UMC		
Occupation (Required) Administration	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sharon Susie Sojourner	05/12/2023	\$500.00
Mailing Address 2126 Sandy Yam Rd		
City, State, Zip Code Crystal Springs, MS 39059-9202		
Name of Employer (Required) Self		
Occupation (Required) Timber Industry	Aggregate Year-to-date	\$500.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Blair & Bondurant, P.A.	05/08/2023	\$300.00
Mailing Address PO Box 321423		
City, State, Zip Code Jackson, MS 39232-1423		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$300.00

Name of Candidate or Committee Tate for Governor  
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## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Efficiency Billing Service Inc.</u>	05/15/2023	\$1,000.00
Mailing Address <u>PO Box 2353</u>		
City, State, Zip Code <u>Tupelo, MS 38803-2353</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Clyde X. Copeland III</u>	05/30/2023	\$1,000.00
Mailing Address <u>106 Glenwood Bend</u>		
City, State, Zip Code <u>Madison, MS 39110-6575</u>		
Name of Employer (Required) <u>Jernigan &amp; Copeland</u>		
Occupation (Required) <u>Attorney</u>	Aggregate Year-to-date	\$1,000.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Brian K. Johnson</u>	05/26/2023	\$1,000.00
Mailing Address <u>113 Rosedowne Dr.</u>		
City, State, Zip Code <u>Madison, MS 39110-4757</u>		
Name of Employer (Required) <u>Trustmark National Bank</u>		
Occupation (Required) <u>Insurance Consultant</u>	Aggregate Year-to-date	\$2,000.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Brian K. Johnson</u>	05/31/2023	\$1,000.00
Mailing Address <u>113 Rosedowne Dr.</u>		
City, State, Zip Code <u>Madison, MS 39110-4757</u>		
Name of Employer (Required) <u>Trustmark National Bank</u>		
Occupation (Required) <u>Insurance Consultant</u>	Aggregate Year-to-date	\$2,000.00

Name of Candidate or Committee

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Phillip Bowman	05/22/2023	\$1,000.00
Mailing Address 250 Commerce Park Drive		
City, State, Zip Code Jackson, MS 39213-7052		
Name of Employer (Required) Specialty Metals Supply, Inc.		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,000.00

  

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Herrin-Gear Lexus	05/04/2023	\$1,000.00
Mailing Address 1685 High St.		
City, State, Zip Code Jackson, MS 39202-3522		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) Candidate Campaign Committee	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Friends of Tanner Newman	05/09/2023	\$250.00
Mailing Address PO Box 341		
City, State, Zip Code Tupelo, MS 38802-0341		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Guy Matthew Clayton	05/10/2023	\$5,000.00
Mailing Address 1305 Charleston Blvd		
City, State, Zip Code Tupelo, MS 38801-6924		
Name of Employer (Required) CBMC, LLC		
Occupation (Required) Executive	Aggregate Year-to-date	\$5,000.00

Name of Candidate or Committee

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## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dossett GMC Cadillac Inc.	05/05/2023	\$1,000.00
Mailing Address PO Box 1667		
City, State, Zip Code Hattiesburg, MS 39403-1667		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert S. Murphree	05/19/2023	\$250.00
Mailing Address 1909 Petit Bois St N		
City, State, Zip Code Jackson, MS 39211-6708		
Name of Employer (Required) Retired		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ken Williams	05/11/2023	\$1,000.00
Mailing Address 132 Afton Dr.		
City, State, Zip Code Corinth, MS 38834-8644		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Micah Gober	05/31/2023	\$250.00
Mailing Address 507 Hunters Creek Circle		
City, State, Zip Code Madison, MS 39110-8399		
Name of Employer (Required) Self		
Occupation (Required) Photographer	Aggregate Year-to-date	\$250.00

Name of Candidate or Committee \_\_\_\_\_ Tate for Governor \_\_\_\_\_  
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Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi Beer Distributors Association Six-PAC	05/16/2023	\$40,000.00
Mailing Address PO Box 1132		
City, State, Zip Code Jackson, MS 39215-1132		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$40,000.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gerald Steen	05/30/2023	\$1,000.00
Mailing Address 312 Bob White Lane		
City, State, Zip Code Ridgeland, MS 39157-9455		
Name of Employer (Required) Victory Marketing		
Occupation (Required) Executive	Aggregate Year-to-date	\$1,000.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ken Dulaney	05/09/2023	\$250.00
Mailing Address PO Box 907		
City, State, Zip Code Belmont, MS 38827-0907		
Name of Employer (Required) Alliance		
Occupation (Required) Sales	Aggregate Year-to-date	\$250.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tina's Flowers and Gifts LLC	05/31/2023	\$250.00
Mailing Address 1630 Hwy 61N		
City, State, Zip Code Vicksburg, MS 39183-3411		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Chris Johns	05/03/2023	\$1,000.00
Mailing Address 105 Stacy Dawn Drive		
City, State, Zip Code McComb, MS 39648-4627		
Name of Employer (Required) Family Choice Financial		
Occupation (Required) President	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 61 North Mini Storage LLC	05/31/2023	\$250.00
Mailing Address 955 Hwy 61 N		
City, State, Zip Code Vicksburg, MS 39183-3415		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jared A. Waldrop	05/16/2023	\$2,000.00
Mailing Address 26 Avery Knoll		
City, State, Zip Code Hattiesburg, MS 39402-8096		
Name of Employer (Required) Pine Belt Chevrolet Buick		
Occupation (Required) Executive	Aggregate Year-to-date	\$2,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carraway Properties Inc.	05/16/2023	\$250.00
Mailing Address 103 C Marshall Place		
City, State, Zip Code Brandon, MS 39047-8458		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Shane Upshaw	05/18/2023	\$1,000.00
Mailing Address 107 Golding Boulevard		
City, State, Zip Code Vicksburg, MS 39180-5818		
Name of Employer (Required) Magnolia Estates		
Occupation (Required) President	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eric Chambless	05/01/2023	\$250.00
Mailing Address 11820 Sleeping Deer Lane		
City, State, Zip Code Saucier, MS 39574-6901		
Name of Employer (Required) Community Bank		
Occupation (Required) Banker	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Colin Maloney	05/09/2023	\$10,000.00
Mailing Address PO Box 1366		
City, State, Zip Code Tupelo, MS 38802-1366		
Name of Employer (Required) Maloney Glass/Century Construction & Realty		
Occupation (Required) Owner	Aggregate Year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joseph C. Canizaro	05/05/2023	\$25,000.00
Mailing Address 909 Poydras St Ste 1700		
City, State, Zip Code New Orleans, LA 70112-4010		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$25,000.00

Name of Candidate or Committee

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Justin Blackwell	05/13/2023	\$2,500.00
Mailing Address 104 Carlyle Drive		
City, State, Zip Code Madison, MS 39110-6599		
Name of Employer (Required) Medtronic Neuromodulation		
Occupation (Required) Pharmaceutical Sales	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas E Joiner	05/16/2023	\$1,000.00
Mailing Address 422 Winbledon Drive		
City, State, Zip Code Brandon, MS 39047-7339		
Name of Employer (Required) Self		
Occupation (Required) Physician	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) PLLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jason Leach DMD, PLLC	05/03/2023	\$1,000.00
Mailing Address 310 Fazio Drive		
City, State, Zip Code Oxford, MS 38655-2166		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Massengill	05/15/2023	\$5,000.00
Mailing Address 151 County Road 511		
City, State, Zip Code Ripley, MS 38663-8510		
Name of Employer (Required) Big M Transportation		
Occupation (Required) Owner	Aggregate Year-to-date	\$5,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hunter Moorhead	05/17/2023	\$250.00
Mailing Address 109 Price St.		
City, State, Zip Code Oxford, MS 38655-3130		
Name of Employer (Required) Crossroads Strategies LLC		
Occupation (Required) Consultant	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William H. Cartier	05/16/2023	\$250.00
Mailing Address 408 Glen Oaks Dr.		
City, State, Zip Code Brandon, MS 39047-7109		
Name of Employer (Required) SOUTHERN GRADUATE INSTITUTE OF NATURAL		
Occupation (Required) Director	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cleveland Properties, LLC	05/08/2023	\$1,000.00
Mailing Address 1879 North Coley Road		
City, State, Zip Code Tupelo, MS 38801-6931		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Versant Holdings, Inc.	05/12/2023	\$1,000.00
Mailing Address PO Box 84410		
City, State, Zip Code Baton Rouge, LA 70884-4410		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Tate for Governor

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Jeff Field	05/15/2023	\$1,000.00
Mailing Address: 55 Notting Creek Cove		
City, State, Zip Code: Eads, TN 38028-8009		
Name of Employer (Required): Landers Memphis		
Occupation (Required): Manager	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Gulf Coast Automotive Group LLC	05/15/2023	\$1,000.00
Mailing Address: 11282 Mandal Pkwy		
City, State, Zip Code: Diberville, MS 39540-2469		
Name of Employer (Required):		
Occupation (Required):	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: BKS, Inc	05/16/2023	\$1,000.00
Mailing Address: 7048 U.S. Hwy 49 N		
City, State, Zip Code: Hattiesburg, MS 39402-9159		
Name of Employer (Required):		
Occupation (Required):	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Donald Waller	05/07/2023	\$250.00
Mailing Address: 136 County Road 313		
City, State, Zip Code: Oxford, MS 38655-8508		
Name of Employer (Required): Retired		
Occupation (Required): Retired	Aggregate Year-to-date	\$250.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James McLaughlin Hobson	05/15/2023	\$500.00
Mailing Address 611 Alcorn Drive		
City, State, Zip Code Corinth, MS 38834-9321		
Name of Employer (Required) Magnolia Regional Health Center		
Occupation (Required) Executive	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joseph P. Deason	05/15/2023	\$1,000.00
Mailing Address 108 Normandy Ct.		
City, State, Zip Code Madison, MS 39110-6711		
Name of Employer (Required) Madison County Economic Development Authority		
Occupation (Required) Executive Director	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jean Cox	05/01/2023	\$250.00
Mailing Address 4207 Hwy 35S		
City, State, Zip Code Forest, MS 39074-7707		
Name of Employer (Required) Community Bank		
Occupation (Required) Banker	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Carpenter	05/12/2023	\$250.00
Mailing Address PO Box 489		
City, State, Zip Code Port Gibson, MS 39150-0489		
Name of Employer (Required) Self		
Occupation (Required) Farmer	Aggregate Year-to-date	\$250.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lynn Bryan III	05/09/2023	\$250.00
Mailing Address 1226 N Clayton Ave		
City, State, Zip Code Tupelo, MS 38804-1825		
Name of Employer (Required) Lynn Bryan Construction		
Occupation (Required) Executive	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Bradley Prewitt	05/09/2023	\$250.00
Mailing Address PO Box 1404		
City, State, Zip Code Tupelo, MS 38802-1404		
Name of Employer (Required) Prewitt Group, PA		
Occupation (Required) Owner	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Greg Hinkebein	05/31/2023	\$500.00
Mailing Address 125 Dumaine Place		
City, State, Zip Code Madison, MS 39110-9283		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$500.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Blackburn Nissan	05/02/2023	\$500.00
Mailing Address 2195 North Frontage Road		
City, State, Zip Code Vicksburg, MS 39180-5182		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cadence Bank PAC	05/04/2023	\$25,000.00
Mailing Address PO Box 789		
City, State, Zip Code Tupelo, MS 38802-0789		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$25,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rick Looser	05/16/2023	\$5,000.00
Mailing Address 1826 Highway 471		
City, State, Zip Code Brandon, MS 39047-7964		
Name of Employer (Required) The Cirtot Agency		
Occupation (Required) President	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Renasant Bank Employees Voluntary PAC	05/04/2023	\$2,500.00
Mailing Address PO Box 709		
City, State, Zip Code Tupelo, MS 38802-0709		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bill Russell	05/03/2023	\$250.00
Mailing Address PO Box 9180		
City, State, Zip Code Columbus, MS 39705-0016		
Name of Employer (Required) Bill Russell Ford		
Occupation (Required) Owner	Aggregate Year-to-date	\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Victor Walsh	05/30/2023	\$250.00
Mailing Address 4619 Main Street Suite A		
City, State, Zip Code Moss Point, MS 39563-3939		
Name of Employer (Required) Millette Administrators		
Occupation (Required) TPA	Aggregate Year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gloster Forest Products LLC	05/01/2023	\$2,500.00
Mailing Address PO Box 5327		
City, State, Zip Code Jackson, MS 39296-5327		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles A Younger	05/27/2023	\$25.00
Mailing Address 1213 Younger Road		
City, State, Zip Code Columbus, MS 39701-8503		
Name of Employer (Required) Self		
Occupation (Required) Farmer	Aggregate Year-to-date	\$375.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Franks Chevrolet Buick GMC	05/15/2023	\$1,000.00
Mailing Address PO Box 1281		
City, State, Zip Code Kosciusko, MS 39090-1281		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gary Rhoads	05/16/2023	\$500.00
Mailing Address 225 Birch Lane		
City, State, Zip Code Flowood, MS 39232-8412		
Name of Employer (Required) City Of Flowood		
Occupation (Required) Mayor	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Avery B. Truitt	05/31/2023	\$500.00
Mailing Address 124 Dendron Dr.		
City, State, Zip Code Jackson, MS 39211-4712		
Name of Employer (Required) JA		
Occupation (Required) Teacher	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Daniel Burton	05/09/2023	\$5,000.00
Mailing Address PO Box 7605		
City, State, Zip Code Gulfport, MS 39506-7605		
Name of Employer (Required) Self		
Occupation (Required) CPA	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name MADA AutoPAC	05/10/2023	\$20,000.00
Mailing Address 800 Woodlands Parkway Suite 100		
City, State, Zip Code Ridgeland, MS 39157-5215		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$20,000.00

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Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Columbus Nissan, Inc.	05/10/2023	\$1,000.00
Mailing Address 100 Hwy 12 East		
City, State, Zip Code Columbus, MS 39702-7828		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rodney Grogan	05/04/2023	\$500.00
Mailing Address 110 Chadwyck Court		
City, State, Zip Code Madison, MS 39110-6506		
Name of Employer (Required) MMC Materials, Inc.		
Occupation (Required) President	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William E. Whitfield III	05/21/2023	\$250.00
Mailing Address PO Box 1002		
City, State, Zip Code Perkinston, MS 39573-0017		
Name of Employer (Required) Copeland Cook Taylor and Bush		
Occupation (Required) Attorney	Aggregate Year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William S Mayo	05/22/2023	\$250.00
Mailing Address 306 Lakewood Hill Dr.		
City, State, Zip Code Oxford, MS 38655-4478		
Name of Employer (Required) MS Eye Consultants		
Occupation (Required) Ophthalmologist	Aggregate Year-to-date	\$250.00



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William B. Lee	05/22/2023	\$250.00
Mailing Address Po Box 12409		
City, State, Zip Code Jackson, MS 39236-2409		
Name of Employer (Required) Gulf Guaranty Life Insurance Company		
Occupation (Required) Senior Vice President	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barney Daly	05/25/2023	\$500.00
Mailing Address 509 Arbor Drive		
City, State, Zip Code Madison, MS 39110-9154		
Name of Employer (Required) Trustmark Bank, North Metro		
Occupation (Required) President	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeffrey T. Laseter	05/03/2023	\$1,000.00
Mailing Address 157 Dogwood Place		
City, State, Zip Code Flowood, MS 39232-9236		
Name of Employer (Required) New South Neuro Spine		
Occupation (Required) Physician	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rainbow Chrysler-Dodge-Jeep	05/10/2023	\$1,000.00
Mailing Address 101 Rainbow Way		
City, State, Zip Code McComb, MS 39648-3600		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard F. Cowart Sr.	05/18/2023	\$250.00
Mailing Address 100 Cherrybark Lane		
City, State, Zip Code Vicksburg, MS 39180-1823		
Name of Employer (Required) Self		
Occupation (Required) Contractor	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jackie Grimes	05/22/2023	\$1,000.00
Mailing Address 1804 Roswell Street		
City, State, Zip Code Pascagoula, MS 39581-2442		
Name of Employer (Required) Coastal Development & Const.		
Occupation (Required) Business Owner	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLP</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Teller, Hopson & Schrader, LLP	05/31/2023	\$1,000.00
Mailing Address 1201 Cherry St.		
City, State, Zip Code Vicksburg, MS 39183-2919		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janel House	05/25/2023	\$250.00
Mailing Address 4756 E Massena Drive		
City, State, Zip Code Jackson, MS 39211-4930		
Name of Employer (Required) N/A		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$250.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jennifer Rogers	05/04/2023	\$500.00
Mailing Address 2254 E Manor Drive		
City, State, Zip Code Jackson, MS 39211-6152		
Name of Employer (Required) Watkins & Eager		
Occupation (Required) Attorney	Aggregate Year-to-date	\$500.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eric Amundson	05/03/2023	\$1,000.00
Mailing Address 108 Summerlake Dr		
City, State, Zip Code Ridgeland, MS 39157-8630		
Name of Employer (Required) New South Neurospine		
Occupation (Required) Physician	Aggregate Year-to-date	\$1,000.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Joe Cannon	05/15/2023	\$1,000.00
Mailing Address 423 N 16th St. Unit 101		
City, State, Zip Code Oxford, MS 38655		
Name of Employer (Required) Cannon Motors		
Occupation (Required) Owner	Aggregate Year-to-date	\$2,000.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gregory D. Pirkle	05/09/2023	\$500.00
Mailing Address 4216 Ridgemont Drive		
City, State, Zip Code Belden, MS 38826-9785		
Name of Employer (Required) Phelps Dunbar		
Occupation (Required) Attorney	Aggregate Year-to-date	\$500.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jason H. William	05/16/2023	\$250.00
Mailing Address 112 Pennisula Dr.		
City, State, Zip Code Brandon, MS 39047-8280		
Name of Employer (Required) UMC		
Occupation (Required) Physician	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Herbert Montgomery	05/01/2023	\$100.00
Mailing Address 208 Orchid Cv.		
City, State, Zip Code Oxford, MS 38655-6028		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Graham Sexton	05/15/2023	\$250.00
Mailing Address 2912 Lake Terrace Dr.		
City, State, Zip Code Corinth, MS 38834-2009		
Name of Employer (Required) Magnolia Regional		
Occupation (Required) Physician	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Branyan Johnson	05/09/2023	\$250.00
Mailing Address 354 Old Payne Place		
City, State, Zip Code Saville, MS 38866-8752		
Name of Employer (Required) Maloney Management		
Occupation (Required) Executive	Aggregate Year-to-date	\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ergon State PAC	05/04/2023	\$25,000.00
Mailing Address PO Box 1639		
City, State, Zip Code Jackson, MS 39215-1639		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$25,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Clay Hays Jr.	05/03/2023	\$1,000.00
Mailing Address 5 Laurel Cove		
City, State, Zip Code Jackson, MS 39211-6463		
Name of Employer (Required) Jackson Heart Clinic		
Occupation (Required) Cardiologist	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeanette C. Winstead	05/01/2023	\$250.00
Mailing Address 214 Arbor Trail		
City, State, Zip Code Brandon, MS 39047		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Larry J. Stanford	05/13/2023	\$1,000.00
Mailing Address 1224 N. Fillmore St.		
City, State, Zip Code Corinth, MS 38834-3449		
Name of Employer (Required) Corinth Coca-Cola		
Occupation (Required) COO	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold L. Weess	05/03/2023	\$250.00
Mailing Address PO Box 1953		
City, State, Zip Code Florence, MS 39073-1953		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Guynes	05/03/2023	\$1,000.00
Mailing Address 237 ROLLING MEADOWS RD		
City, State, Zip Code Ridgeland, MS 39157-9425		
Name of Employer (Required) Jackson Heart		
Occupation (Required) Cardiologist	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Occupational Consulting LLC	05/16/2023	\$250.00
Mailing Address 123 Jackson Place STE D		
City, State, Zip Code Brandon, MS 39047-4453		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David B. Craddock	05/05/2023	\$2,500.00
Mailing Address 2727 Quail Run Road		
City, State, Zip Code Jackson, MS 39211-6627		
Name of Employer (Required) Craddock Oil Company Inc		
Occupation (Required) CEO	Aggregate Year-to-date	\$2,500.00



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kevin Courville	05/16/2023	\$10,000.00
Mailing Address 19506 Perkins Road East		
City, State, Zip Code Baton Rouge, LA 70810-6010		
Name of Employer (Required) Performance Contractors, Inc.		
Occupation (Required) CEO	Aggregate Year-to-date	\$10,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Reid Cotten Jr.	05/03/2023	\$1,000.00
Mailing Address 2202 Culleywood Road		
City, State, Zip Code Jackson, MS 39211-5815		
Name of Employer (Required) Jackson Heart		
Occupation (Required) Cardiologist	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Russell G. Newman	05/16/2023	\$2,500.00
Mailing Address 801 Country Place Dr		
City, State, Zip Code Pearl, MS 39208-6621		
Name of Employer (Required) MS Bonding Company		
Occupation (Required) Vice President	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Lloyd Prater	05/09/2023	\$250.00
Mailing Address 3201 N Hill Dr.		
City, State, Zip Code Tupelo, MS 38804-9787		
Name of Employer (Required) Century Construction		
Occupation (Required) CFO	Aggregate Year-to-date	\$250.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Dees	05/15/2023	\$5,000.00
Mailing Address PO Box 98		
City, State, Zip Code Ripley, MS 38663-0098		
Name of Employer (Required) Dees Oil Company		
Occupation (Required) Owner	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rigdon & Street Properties, LLC	05/10/2023	\$1,000.00
Mailing Address P.O. Box 2568		
City, State, Zip Code Columbus, MS 39704-2568		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tony Geiger	05/25/2023	\$250.00
Mailing Address 105 Indigo Ct.		
City, State, Zip Code Madison, MS 39110-7842		
Name of Employer (Required) Attorney General		
Occupation (Required) Director	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny M. Crofts	05/15/2023	\$250.00
Mailing Address 381 CR 301		
City, State, Zip Code Corinth, MS 38834-8840		
Name of Employer (Required) Cook Coggin Engineers Inc		
Occupation (Required) Executive	Aggregate Year-to-date	\$250.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nancy Craddock	05/03/2023	\$100.00
Mailing Address 1002 Hillshire Drive		
City, State, Zip Code McComb, MS 39648-9559		
Name of Employer (Required) Craddock Oil Company Inc		
Occupation (Required) Owner	Aggregate Year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Henry	05/17/2023	\$250.00
Mailing Address 704 Faulkner Woods Place		
City, State, Zip Code Oxford, MS 38655-4620		
Name of Employer (Required) Self		
Occupation (Required) Author	Aggregate Year-to-date	\$250.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Crossroads Automotive	05/12/2023	\$1,000.00
Mailing Address 1701 Hwy 72 W		
City, State, Zip Code Corinth, MS 38834-6755		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marc Petro	05/03/2023	\$1,000.00
Mailing Address 141 Burne Run		
City, State, Zip Code Madison, MS 39110-4005		
Name of Employer (Required) Community Bank		
Occupation (Required) Banker	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Walker J Swaney	05/17/2023	\$1,000.00
Mailing Address 634 N Lamar Boulevard		
City, State, Zip Code Oxford, MS 38655-3208		
Name of Employer (Required) Oxford Dental		
Occupation (Required) Dentist	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lynn Stringer	05/03/2023	\$1,000.00
Mailing Address 542 Lake Cavalier Road		
City, State, Zip Code Madison, MS 39110-7153		
Name of Employer (Required) Newsouth Neurospine, LLC		
Occupation (Required) Physician	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carson M. Hughes	05/27/2023	\$100.00
Mailing Address 129 Kingston Ct.		
City, State, Zip Code Starkville, MS 39759-4246		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Home Builders Association of Mississippi (Build PAC)	05/08/2023	\$50,000.00
Mailing Address PO Box 3556		
City, State, Zip Code Jackson, MS 39207-3556		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$50,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name The Plastic Surgical Center of Mississippi, LLC	05/03/2023	\$1,000.00
Mailing Address 2550 Flowood Drive Suite 101		
City, State, Zip Code Flowood, MS 39232-9304		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James E. Carney	05/09/2023	\$500.00
Mailing Address 2700 Marigold Cv		
City, State, Zip Code Tupelo, MS 38801-7129		
Name of Employer (Required) Life Church		
Occupation (Required) Pastor	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Willis	05/11/2023	\$1,500.00
Mailing Address PO Box 160		
City, State, Zip Code Grenada, MS 38902-0160		
Name of Employer (Required) Self		
Occupation (Required) WEI Management Co.	Aggregate Year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carey Johnston	05/23/2023	\$1,000.00
Mailing Address 1064 Stokes Road		
City, State, Zip Code Canton, MS 39046-8407		
Name of Employer (Required) Endodontic Associates PLLC		
Occupation (Required) Dentist	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jan C. Collins	05/20/2023	\$250.00
Mailing Address 416 Woodland Hills Court		
City, State, Zip Code Madison, MS 39110-7819		
Name of Employer (Required) Madison County Business League Foundation		
Occupation (Required) Executive Director	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi Chiropractors PAC	05/22/2023	\$2,500.00
Mailing Address 4294 Lakeland Dr Ste 100		
City, State, Zip Code Flowood, MS 39232-9510		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lee R. Bush	05/16/2023	\$1,000.00
Mailing Address 432 Buena Vista Avenue		
City, State, Zip Code Jackson, MS 39209-6405		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stephen Burrow	05/19/2023	\$1,000.00
Mailing Address 1202 Gallery Street		
City, State, Zip Code Pascagoula, MS 39581-2310		
Name of Employer (Required) Heidelberg Steinberger		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tom Kline	05/02/2023	\$500.00
Mailing Address 409 South Spring St.		
City, State, Zip Code Fulton, MS 38843-1707		
Name of Employer (Required) Kline Mechanical Systems, Inc.		
Occupation (Required) President	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Covington Civil and Environmental LLC	05/10/2023	\$10,000.00
Mailing Address 2510 14th St, Ste 1010		
City, State, Zip Code Gulfport, MS 39501-1984		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Truck PAC	05/28/2023	\$5,000.00
Mailing Address 825 N President St		
City, State, Zip Code Jackson, MS 39202-2561		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronnie S. Windham	05/17/2023	\$250.00
Mailing Address PO Box 159		
City, State, Zip Code Oxford, MS 38655-0159		
Name of Employer (Required) Self		
Occupation (Required) CPA	Aggregate Year-to-date	\$250.00

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Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name WEI Management Co	05/11/2023	\$1,000.00
Mailing Address 133 South Mound St.		
City, State, Zip Code Grenada, MS 38901-3314		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John M. Long	05/24/2023	\$1,000.00
Mailing Address 620 Hampshire Drive		
City, State, Zip Code Brandon, MS 39047-7701		
Name of Employer (Required) Self		
Occupation (Required) John Long Electric	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gary Butler	05/01/2023	\$500.00
Mailing Address 113 Derbyshire Road		
City, State, Zip Code Starkville, MS 39759-4010		
Name of Employer (Required) Camgian		
Occupation (Required) CEO	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Freddie Bagley	05/01/2023	\$1,000.00
Mailing Address 112 Colony Way		
City, State, Zip Code Brandon, MS 39047-8271		
Name of Employer (Required) Community Bank		
Occupation (Required) Banker	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name W H Benson	05/09/2023	\$1,000.00
Mailing Address 475 County Road 520		
City, State, Zip Code Shannon, MS 38868-8753		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name JW, LLC	05/04/2023	\$1,000.00
Mailing Address PO Box 12227		
City, State, Zip Code Jackson, MS 39236-2227		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Belle Meade Medical LLC	05/13/2023	\$250.00
Mailing Address 507 Ridge Circle		
City, State, Zip Code Brandon, MS 39047-8671		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Elam	05/16/2023	\$1,000.00
Mailing Address 3805 Majestic Oaks Dr		
City, State, Zip Code Oxford, MS 38655-8153		
Name of Employer (Required) Elam Consulting		
Occupation (Required) Executive	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William A. Brown	05/12/2023	\$2,500.00
Mailing Address 131 Green Glades		
City, State, Zip Code Ridgeland, MS 39157-8661		
Name of Employer (Required) Brown Bottling Group Inc./Brown Vending Compar		
Occupation (Required) CEO	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Growth Strategies LLC	05/11/2023	\$250.00
Mailing Address 1176 Sarepta Church Road		
City, State, Zip Code Pattison, MS 39144		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name W. Mac Elliott	05/18/2023	\$10,000.00
Mailing Address PO Box 2387		
City, State, Zip Code Madison, MS 39130-2387		
Name of Employer (Required) National Aviation Academy		
Occupation (Required) President	Aggregate Year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sidney P. Allen Jr.	05/04/2023	\$1,000.00
Mailing Address 200 Brae Burn Dr		
City, State, Zip Code Jackson, MS 39211-2504		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada		
Occupation (Required) Government Relations	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Slocum	05/15/2023	\$250.00
Mailing Address PO Box 1008		
City, State, Zip Code Coldwater, MS 38618-1008		
Name of Employer (Required) North MS Grain Co Inc		
Occupation (Required) President	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roy H. Parker	05/24/2023	\$1,000.00
Mailing Address 2820 Narrow Gauge Road		
City, State, Zip Code Bolton, MS 39041-9774		
Name of Employer (Required) Parker - McGill		
Occupation (Required) President	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anderson Law Group, LLC	05/26/2023	\$250.00
Mailing Address P.O. Box 1483		
City, State, Zip Code Madison, MS 39130-1483		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gene Allen	05/11/2023	\$250.00
Mailing Address 103 Langdon Dr.		
City, State, Zip Code Madison, MS 39110-7077		
Name of Employer (Required) Larken Labs		
Occupation (Required) Owner	Aggregate Year-to-date	\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Grayson	05/16/2023	\$250.00
Mailing Address PO Box 1051		
City, State, Zip Code Oxford, MS 38655-1051		
Name of Employer (Required) CareMed EMS		
Occupation (Required) Executive	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name J. Kenneth Austin	05/24/2023	\$500.00
Mailing Address 126 Fleitas Ave		
City, State, Zip Code Pass Christian, MS 39571-4507		
Name of Employer (Required) Coast Realty		
Occupation (Required) Realtor	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard J. Thomas Jr.	05/13/2023	\$250.00
Mailing Address 115 Mason Way		
City, State, Zip Code Madison, MS 39110-6817		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard J. Thomas Jr.	05/03/2023	\$100.00
Mailing Address 115 Mason Way		
City, State, Zip Code Madison, MS 39110-6817		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$350.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kirk Scoggins	05/24/2023	\$255.00
Mailing Address 824 Aberdeen Cove		
City, State, Zip Code Madison, MS 39110-7065		
Name of Employer (Required) HUB International		
Occupation (Required) Health Insurance	Aggregate Year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cecelia Cenac	05/22/2023	\$1,000.00
Mailing Address 13801 Arbor Cr.		
City, State, Zip Code Ocean Springs, MS 39564-2200		
Name of Employer (Required) GCO LLC		
Occupation (Required) Finance	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeff C. Bowman	05/29/2023	\$2,000.00
Mailing Address 102 Wild Mdws		
City, State, Zip Code Hattiesburg, MS 39402-8109		
Name of Employer (Required) Southern Mississippi Electric Power Association		
Occupation (Required) Executive	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry M. Hall	05/11/2023	\$250.00
Mailing Address 203 Avalon Cl.		
City, State, Zip Code Vicksburg, MS 39180-1819		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name McIninch Law Firm PLLC	05/16/2023	\$250.00
Mailing Address 115 Laurel Park Cove STE 211		
City, State, Zip Code Flowood, MS 39232-8054		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Greg Wood III	05/03/2023	\$1,000.00
Mailing Address 805 Woodland Pine		
City, State, Zip Code Flowood, MS 39232-8611		
Name of Employer (Required) Newsouth Neurospine, LLC		
Occupation (Required) Physician	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Scott Pickering	05/01/2023	\$500.00
Mailing Address 15 Service Road		
City, State, Zip Code Laurel, MS 39443-9058		
Name of Employer (Required) Community Bank		
Occupation (Required) Banker	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Dane III	05/29/2023	\$2,500.00
Mailing Address 11638 Bluff Lane		
City, State, Zip Code Gulfport, MS 39503-6151		
Name of Employer (Required) United States Marine, Inc.		
Occupation (Required) Chairman	Aggregate Year-to-date	\$2,500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Pickering	05/04/2023	\$1,000.00
Mailing Address 4793 Crestwood Dr.		
City, State, Zip Code Jackson, MS 39211-4915		
Name of Employer (Required) University of MS		
Occupation (Required) Adjunct Instructor	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name GuidePoint LLC	05/16/2023	\$2,500.00
Mailing Address 1037 Lake Village Cir STE A		
City, State, Zip Code Brandon, MS 39047-6725		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John J Durfey	05/16/2023	\$1,000.00
Mailing Address 104 Bridgeview Cr.		
City, State, Zip Code Ridgeland, MS 39157-8601		
Name of Employer (Required) UMC		
Occupation (Required) Physician	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nicole Boyd	05/23/2023	\$1,000.00
Mailing Address 113 Sivley Street		
City, State, Zip Code Oxford, MS 38655-3121		
Name of Employer (Required) State of MS		
Occupation (Required) Representative	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Walker Dyess	05/08/2023	\$250.00
Mailing Address 26700 E Main St.		
City, State, Zip Code West Point, MS 39773-7545		
Name of Employer (Required) BXS		
Occupation (Required) Banker	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name MS for Emergency Medical Services - PAC	05/16/2023	\$250.00
Mailing Address PO Box 1051		
City, State, Zip Code Oxford, MS 38655-1051		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marshall J Eleuterius	05/01/2023	\$250.00
Mailing Address 15122 Big John Road		
City, State, Zip Code Biloxi, MS 39532-8438		
Name of Employer (Required) Community Bank		
Occupation (Required) Banker	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) Candidate Campaign Committee	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Friends Of Clay Deweese	05/17/2023	\$500.00
Mailing Address 5006 Bluff Cove		
City, State, Zip Code Oxford, MS 38655-5979		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James D Tharpe	05/01/2023	\$350.00
Mailing Address 609 Rolling Oaks Dr.		
City, State, Zip Code Grenada, MS 38901-9285		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$350.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lassitter Homes	05/23/2023	\$2,500.00
Mailing Address 10725 Hwy 63		
City, State, Zip Code Moss Point, MS 39562-6626		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <u>Refund-over corp. limit</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lassitter Homes	05/31/2023	(\$1,500.00)
Mailing Address 10725 Hwy 63		
City, State, Zip Code Moss Point, MS 39562-6626		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jennifer Bryan	05/16/2023	\$1,000.00
Mailing Address 88 Grandview Cr		
City, State, Zip Code Brandon, MS 39047-7398		
Name of Employer (Required) St. Dominics		
Occupation (Required) Physician	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andy Anderson	05/15/2023	\$250.00
Mailing Address 525 Parkway Ave		
City, State, Zip Code Rolling Fork, MS 39159-5101		
Name of Employer (Required) Bank of Anguilla		
Occupation (Required) President and CEO	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Larry Michael	05/08/2023	\$500.00
Mailing Address PO Box 7006		
City, State, Zip Code Tupelo, MS 38802-7006		
Name of Employer (Required) Precision Machine		
Occupation (Required) Executive	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Brannon	05/01/2023	\$250.00
Mailing Address 145 Sea Oaks Blvd		
City, State, Zip Code Long Beach, MS 39560-5842		
Name of Employer (Required) NOARC		
Occupation (Required) President	Aggregate Year-to-date	\$500.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dwayne Blackmon Chevrolet Inc	05/15/2023	\$1,000.00
Mailing Address PO Box 25		
City, State, Zip Code Tupelo, MS 38802-0025		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nancy Adams Collins	05/09/2023	\$250.00
Mailing Address 1604 Briar Ridge Road		
City, State, Zip Code Tupelo, MS 38804-5108		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bernard W. Bean	05/04/2023	\$1,000.00
Mailing Address 628 Highland Circle		
City, State, Zip Code Tupelo, MS 38804-2013		
Name of Employer (Required) Eat With Us		
Occupation (Required) COO	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ed Holliday	05/09/2023	\$250.00
Mailing Address 1526 Morning Glory Cr		
City, State, Zip Code Tupelo, MS 38801-8446		
Name of Employer (Required) Ed Holliday, D.M.D. Inc.		
Occupation (Required) President, Director, Treasurer	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gary Lee Dodson	05/15/2023	\$1,000.00
Mailing Address 109 Southampton Cr.		
City, State, Zip Code Madison, MS 39110-4712		
Name of Employer (Required) Cadillac Of Jackson		
Occupation (Required) Executive	Aggregate Year-to-date	\$1,000.00

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Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Triple M Motors	05/22/2023	\$1,000.00
Mailing Address PO Box 746		
City, State, Zip Code Carthage, MS 39051-0746		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edward Staton	05/04/2023	\$2,500.00
Mailing Address 129 Hampton Way		
City, State, Zip Code Madison, MS 39110-9586		
Name of Employer (Required) Self		
Occupation (Required) Marketing	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Edward Parsons	05/17/2023	\$250.00
Mailing Address 9 Autumn Hill Cv		
City, State, Zip Code Jackson, MS 39211-2942		
Name of Employer (Required) Sky Frequency		
Occupation (Required) Executive	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name A3 Consulting LLC	05/31/2023	\$2,500.00
Mailing Address 6 Eastpark Cove		
City, State, Zip Code Jackson, MS 39211-6075		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Case Land Company, LLC	05/04/2023	\$1,000.00
Mailing Address 773 Hwy 61 N		
City, State, Zip Code Natchez, MS 39120-8456		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David I. Bridgers Jr.	05/15/2023	\$2,500.00
Mailing Address 3528 Manor Dr		
City, State, Zip Code Vicksburg, MS 39180-5693		
Name of Employer (Required) Bridgers CPA's		
Occupation (Required) CPA	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name VMCPP, LLC	05/08/2023	\$1,000.00
Mailing Address 1879 North Coley Road		
City, State, Zip Code Tupelo, MS 38801-6931		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jamie Woods Dull	05/16/2023	\$250.00
Mailing Address 151 Eastside Dr		
City, State, Zip Code Brandon, MS 39047-9029		
Name of Employer (Required) Self		
Occupation (Required) Business Owner	Aggregate Year-to-date	\$250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Newsouth Neurospine, LLC	05/03/2023	\$1,000.00
Mailing Address 2470 Flowood Drive		
City, State, Zip Code Flowood, MS 39232-9019		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Wansley	05/21/2023	\$1,000.00
Mailing Address 120 Brookwood Dr.		
City, State, Zip Code Vicksburg, MS 39183-8101		
Name of Employer (Required) Self		
Occupation (Required) Farmer	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William L. Williamson III	05/21/2023	\$250.00
Mailing Address 1117 Windy Lake Drive		
City, State, Zip Code Vicksburg, MS 39183-8302		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donna Shanks	05/14/2023	\$250.00
Mailing Address PO Box 100		
City, State, Zip Code Madison, MS 39130-0100		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$250.00

Name of Candidate or Committee

Tate for Governor

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edward M. Hargett	05/29/2023	\$1,000.00
Mailing Address 1007 Hargett Drive		
City, State, Zip Code Charleston, MS 38921-9726		
Name of Employer (Required) Corrections Management Services Inc.		
Occupation (Required) Corrections	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wier Boerner Allin Architecture, PLLC	05/17/2023	\$1,000.00
Mailing Address 2727 Old Canton Rd. STE #200		
City, State, Zip Code Jackson, MS 39216-4310		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Taylor M Whatley	05/16/2023	\$1,000.00
Mailing Address 11 Moreton Place NE		
City, State, Zip Code Brookhaven, MS 39601-9257		
Name of Employer (Required) Mike Whatley Honda		
Occupation (Required) Executive	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tyson Foods, Inc.	05/05/2023	\$1,000.00
Mailing Address PO Box 2020		
City, State, Zip Code Springdale, AR 72765-2020		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ray Riley	05/01/2023	\$250.00
Mailing Address 136 Chantilly Dr.		
City, State, Zip Code Madison, MS 39110-8411		
Name of Employer (Required) Community Bank		
Occupation (Required) Banker	Aggregate Year-to-date	\$250.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John David Fagan	05/31/2023	\$250.00
Mailing Address 106 Lakewood Hills		
City, State, Zip Code Vicksburg, MS 39180-5343		
Name of Employer (Required) Self Employed		
Occupation (Required) Physician	Aggregate Year-to-date	\$250.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cindy Phillips	05/29/2023	\$250.00
Mailing Address 372 Sundial Road		
City, State, Zip Code Madison, MS 39110-8772		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$350.00

  

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Moore	05/17/2023	\$250.00
Mailing Address 3733 County Road 100		
City, State, Zip Code Corinth, MS 38834-1360		
Name of Employer (Required) St. Luke's Counseling		
Occupation (Required) Clinical Psychology	Aggregate Year-to-date	\$250.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Orma S. Smith III	05/15/2023	\$1,000.00
Mailing Address 1005 Peachtree Street		
City, State, Zip Code Corinth, MS 38834-2239		
Name of Employer (Required) Canopy Nation		
Occupation (Required) Insurance Agent	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Greg Collier	05/09/2023	\$250.00
Mailing Address PO Box 731		
City, State, Zip Code Belmont, MS 38827-0731		
Name of Employer (Required) Belmont		
Occupation (Required) Supervisor	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Upland Properties LLC	05/12/2023	\$10,000.00
Mailing Address 1018 Industrial Park Dr.		
City, State, Zip Code Clinton, MS 39056-3210		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Gilmore	05/15/2023	\$500.00
Mailing Address 3508 Thornwood Trail		
City, State, Zip Code Corinth, MS 38834-8064		
Name of Employer (Required) Magnolia Regional Medical Center		
Occupation (Required) Surgeon	Aggregate Year-to-date	\$500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ella M. Maisch	05/25/2023	\$300.00
Mailing Address 106 San Souci Avenue		
City, State, Zip Code Ocean Springs, MS 39564-5311		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$500.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilson Auto Group	05/12/2023	\$1,000.00
Mailing Address 11 Northtown Dr.		
City, State, Zip Code Jackson, MS 39211-3699		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Southern Miss Sport Fishing, LLC	05/16/2023	\$2,000.00
Mailing Address 6248 US Hwy 98 West		
City, State, Zip Code Hattiesburg, MS 39402-8531		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harry Simmons Jr.	05/15/2023	\$1,000.00
Mailing Address 2628 Erickson Road		
City, State, Zip Code Yazoo City, MS 39194-9457		
Name of Employer (Required) Simmons Farm Raised Catfish		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) 527 Political Organization	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Georgians First Leadership Committee	05/31/2023	\$10,000.00
Mailing Address PO Box 20036		
City, State, Zip Code Atlanta, GA 30325-0036		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$10,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Larry Clark Chevrolet, Buick, Pontiac, GMC, Cadillac Inc.	05/15/2023	\$1,000.00
Mailing Address PO Box 789		
City, State, Zip Code Amory, MS 38821-0789		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mercedes Benz of Jackson	05/22/2023	\$1,000.00
Mailing Address 455 Steed Road		
City, State, Zip Code Ridgeland, MS 39157-8691		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mitchell Hill	05/03/2023	\$1,000.00
Mailing Address 174 Hwy 448		
City, State, Zip Code Indianola, MS 38751-2773		
Name of Employer (Required) Community Bank		
Occupation (Required) banker	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cannon Kirk	05/16/2023	\$1,000.00
Mailing Address 235 Southwest Frontage Road		
City, State, Zip Code Grenada, MS 38901-8009		
Name of Employer (Required) Self		
Occupation (Required) Auto Dealer	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Interest Earnings	05/31/2023	\$19,337.50
Mailing Address 1667 Lelia Drive		
City, State, Zip Code Jackson, MS 39216-4818		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$45,620.09
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Candidate Campaign Committee</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harkins For MS	05/16/2023	\$2,500.00
Mailing Address PO Box 320374		
City, State, Zip Code Flowood, MS 39232-0374		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andy Brien	05/03/2023	\$1,000.00
Mailing Address 255 Hidden Oaks Dr.		
City, State, Zip Code Ridgeland, MS 39157-7001		
Name of Employer (Required) Capital Ortho		
Occupation (Required) Surgeon	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Danny Joe Turner	05/15/2023	\$250.00
Mailing Address 80 CR 633		
City, State, Zip Code Corinth, MS 38834-8490		
Name of Employer (Required) Self		
Occupation (Required) Insurance	Aggregate Year-to-date	\$250.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Huffman & Company, CPA PA	05/04/2023	\$500.00
Mailing Address PO Box 321330		
City, State, Zip Code Flowood, MS 39232-1330		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John A. Crawford	05/12/2023	\$300.00
Mailing Address 2434 Culleywood Road		
City, State, Zip Code Jackson, MS 39211-4916		
Name of Employer (Required) Self		
Occupation (Required) Attorney	Aggregate Year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Alexander Brunini	05/01/2023	\$1,000.00
Mailing Address 158 Kehle Road		
City, State, Zip Code Madison, MS 39110-9792		
Name of Employer (Required) Butler Snow Omara Stevens & Cannada		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Tate for Governor

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas D. Fowlkes	05/17/2023	\$1,000.00
Mailing Address P.O. Box 1955		
City, State, Zip Code Oxford, MS 38655-1955		
Name of Employer (Required) Self		
Occupation (Required) Physician	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mayo Flynt III	05/17/2023	\$1,000.00
Mailing Address 32 County Road 3070		
City, State, Zip Code Oxford, MS 38655-8277		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tom Underwood	05/11/2023	\$1,000.00
Mailing Address 3999 Dogwood Drive		
City, State, Zip Code Jackson, MS 39211-6704		
Name of Employer (Required) Underwood Cos.		
Occupation (Required) Real Estate	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Delois Montgomery	05/08/2023	\$1,500.00
Mailing Address 101 Francis Dr		
City, State, Zip Code Fulton, MS 38843-6615		
Name of Employer (Required) Montgomery Enterprises, Inc.		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,500.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald McClain	05/16/2023	\$500.00
Mailing Address 345 Fannin Landing Circle		
City, State, Zip Code Brandon, MS 39047-9381		
Name of Employer (Required) McLain Sonics		
Occupation (Required) CEO	Aggregate Year-to-date	\$500.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tupelo Furniture Market, Inc.	05/08/2023	\$1,000.00
Mailing Address 1879 North Coley Road		
City, State, Zip Code Tupelo, MS 38801-6931		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Chad McMahan	05/09/2023	\$1,000.00
Mailing Address 1537 Hwy 145		
City, State, Zip Code Guntown, MS 38849-7940		
Name of Employer (Required) State of MS		
Occupation (Required) Senator	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Keystone Strategies LLC	05/16/2023	\$500.00
Mailing Address PO Box 947		
City, State, Zip Code Brandon, MS 39043-0947		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George W Butler Jr.	05/22/2023	\$200.00
Mailing Address 2110 Brackenshire Circle		
City, State, Zip Code Jackson, MS 39211-5836		
Name of Employer (Required) Grantham Poole		
Occupation (Required) CPA	Aggregate Year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name DMH LLC	05/17/2023	\$500.00
Mailing Address 1204 Clayton Ave.		
City, State, Zip Code Tupelo, MS 38804-1825		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Irl Dean Rhodes	05/05/2023	\$250.00
Mailing Address 107 AIRLINE TER		
City, State, Zip Code Pearl, MS 39208-4202		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Luke Chamblee	05/16/2023	\$1,055.00
Mailing Address 3837 Majestic Oaks Dr.		
City, State, Zip Code Oxford, MS 38655-8153		
Name of Employer (Required) Self		
Occupation (Required) Real Estate	Aggregate Year-to-date	\$1,055.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joshua Jones	05/01/2023	\$250.00
Mailing Address 51 John Griffith Road		
City, State, Zip Code Laurel, MS 39443-4716		
Name of Employer (Required) Community Bank		
Occupation (Required) Banker	Aggregate Year-to-date	\$250.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Montgomery Properties Inc	05/08/2023	\$1,000.00
Mailing Address PO Box 37		
City, State, Zip Code Fulton, MS 38843-0037		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Lee Giffin	05/31/2023	\$500.00
Mailing Address 1901 Mission 66		
City, State, Zip Code Vicksburg, MS 39180-3711		
Name of Employer (Required) Self		
Occupation (Required) Physician	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew W Callicutt	05/17/2023	\$2,500.00
Mailing Address 3850 Majestic Oaks Drive		
City, State, Zip Code Oxford, MS 38655-8143		
Name of Employer (Required) Oxford Farms LLC		
Occupation (Required) Executive	Aggregate Year-to-date	\$2,500.00

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## ITEMIZED RECEIPTS – IN-KIND CONTRIBUTIONS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan		Date (Mo., Day, Year)
<input type="checkbox"/> Other (please specify) _____		
Full Name Donald Clark		05/04/2023
Mailing Address 263 Quail Road		Estimated Amount of In-Kind Contribution*
City, State, Zip Code Canton, MS 39046		
Name of Employer (Required) Butler Snow		\$10,184.24
Occupation (Required) Attorney		
<b>In-Kind Description:</b> Event Expenses		

\* Do not add estimated amount of in-kind contribution into total amount of contributions on Report of Receipts and Disbursements.

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## ITEMIZED DISBURSEMENTS

		Aggregate Total Running	
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
The Manship			
Mailing Address	1200 N State St #100	05/08/2023	\$616.33
City, State, Zip Code	Jackson, MS 39202-2000		
Purpose of Disbursement (Optional)	Event Expense, Catering	Aggregate Year-to-date	\$6,123.62
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
Hederman Brothers			
Mailing Address	P.O. Box 1036	05/15/2023	\$1,520.42
City, State, Zip Code	Madison, MS 39130-1036		
Purpose of Disbursement (Optional)	Printing Services	Aggregate Year-to-date	\$42,830.59
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
WinRed			
Mailing Address	PO Box 9891	05/31/2023	\$4,016.38
City, State, Zip Code	Arlington, VA 22219-1891		
Purpose of Disbursement (Optional)	Processing Fees	Aggregate Year-to-date	\$12,599.28
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
J.S. Lupe's			
Mailing Address	P.O. Box 2736	05/19/2023	\$1,112.27
City, State, Zip Code	Madison, MS 39130-2736		
Purpose of Disbursement (Optional)	Printed Materials	Aggregate Year-to-date	\$1,112.27
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
OnMessage, Inc.			
Mailing Address	705 Melvin Ave #105	05/11/2023	\$10,000.00
City, State, Zip Code	Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional)	Digital	Aggregate Year-to-date	\$139,779.73
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
Ana Marina Ingham			
Mailing Address	122 Langdon Drive	05/31/2023	\$3,338.75
City, State, Zip Code	Madison, MS 39110-7076		
Purpose of Disbursement (Optional)	Payroll	Aggregate Year-to-date	\$6,933.37

Reporting Period 05/01/2023 through 05/31/2023

## ITEMIZED DISBURSEMENTS

Full Name		Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursement this period
Copey Grantham		05/01/2023	\$361.56
Mailing Address			
823 Old Hwy 45			
City, State, Zip Code			
Saltillo, MS 38866-7926			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$6,721.32
Travel Reimbursement			
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
Kristin C McDevitt		05/04/2023	\$87.00
Mailing Address			
130 Eagles Nest Circle			
City, State, Zip Code			
Madison, MS 39110-6029			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$237.33
Expense reimbursement			
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
Melissa Hederman		05/01/2023	\$41,316.64
Mailing Address			
3845 Redbud Road			
City, State, Zip Code			
Jackson, MS 39211-6712			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$242,712.59
Consulting Services			
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
Hederman Brothers		05/18/2023	\$1,106.04
Mailing Address			
P.O. Box 1036			
City, State, Zip Code			
Madison, MS 39130-1036			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$46,845.52
Printing Services			
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
PT Strategy LLC		05/15/2023	\$1,909.00
Mailing Address			
1223 Aldebraran Dr.			
City, State, Zip Code			
Mc Lean, VA 22101-2304			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$9,409.00
Travel Reimbursement Expenses			
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
Premium Consulting Group LLC		05/31/2023	\$2,000.00
Mailing Address			
12301 Tiffany Lane			
City, State, Zip Code			
Biloxi, MS 39532			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$10,000.00
Consulting Services			



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through 05/31/2023

## ITEMIZED DISBURSEMENTS

Full Name		Date		Aggregate Total Running
		(Mo., Day, Year)		Amount of each disbursement this period
The Marship		05/03/2023		\$156.00
Mailing Address				
1200 N State St #100				
City, State, Zip Code				
Jackson, MS 39202-2000				
Purpose of Disbursement (Optional)		Aggregate		
Event Expense, Catering		Year-to-date		\$5,507.29
Full Name		Date		Amount of each
The Jackson-Alvarez Group		(Mo., Day, Year)		disbursement this period
Mailing Address				
PO Box 7272		05/01/2023		\$3,743.17
City, State, Zip Code				
Mc Lean, VA 22106-7272				
Purpose of Disbursement (Optional)		Aggregate		
Consulting Services		Year-to-date		\$3,743.17
Full Name		Date		Amount of each
Premium Consulting Group LLC		(Mo., Day, Year)		disbursement this period
Mailing Address				
12301 Tiffany Lane		05/01/2023		\$2,000.00
City, State, Zip Code				
Biloxi, MS 39532				
Purpose of Disbursement (Optional)		Aggregate		
Consulting Services		Year-to-date		\$8,000.00
Full Name		Date		Amount of each
OnMessage, Inc.		(Mo., Day, Year)		disbursement this period
Mailing Address				
705 Melvin Ave #105		05/08/2023		\$26,651.57
City, State, Zip Code				
Annapolis, MD 21401-1534				
Purpose of Disbursement (Optional)		Aggregate		
Media Production		Year-to-date		\$129,779.73
Full Name		Date		Amount of each
Elizabeth Heiskell Catering		(Mo., Day, Year)		disbursement this period
Mailing Address				
P.O. Box 2790		05/17/2023		\$2,635.08
City, State, Zip Code				
Oxford, MS 38655				
Purpose of Disbursement (Optional)		Aggregate		
Event Expense, Catering		Year-to-date		\$2,635.08
Full Name		Date		Amount of each
Internal Revenue Service		(Mo., Day, Year)		disbursement this period
Mailing Address				
Department of the Treasury Internal Revenue Service Ce		05/15/2023		\$1,356.50
City, State, Zip Code				
Ogden, UT 84201-0001				
Purpose of Disbursement (Optional)		Aggregate		
Payroll Tax Expense		Year-to-date		\$14,667.50

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## ITEMIZED DISBURSEMENTS

Full Name		Date		Aggregate Total Running
		(Mo., Day, Year)		Amount of each disbursement this period
Southern Hospitality Services LLC		05/01/2023		\$3,461.18
Mailing Address		115 Hospitality Dr.		
City, State, Zip Code		Flowood, MS 39232-6007		
Purpose of Disbursement (Optional)		Aggregate		
Printed Materials		Year-to-date		\$3,461.18
Full Name		Date		Amount of each
Google Gsuite		(Mo., Day, Year)		disbursement this period
Mailing Address		1600 Amphitheater Parkway Mountain View		\$50.00
City, State, Zip Code		Mountain View, CA 94043		
Purpose of Disbursement (Optional)		Aggregate		
Email and Data Services		Year-to-date		\$242.00
Full Name		Date		Amount of each
SoDelta Candle Company		(Mo., Day, Year)		disbursement this period
Mailing Address		308 South Gamwyn Park Drive		\$1,621.05
City, State, Zip Code		Greenville, MS 38701-6391		
Purpose of Disbursement (Optional)		Aggregate		
Event Expenses		Year-to-date		\$1,942.05
Full Name		Date		Amount of each
Storagemax		(Mo., Day, Year)		disbursement this period
Mailing Address		4600 Lakeland Drive		\$608.00
City, State, Zip Code		Flowood, MS 39232-8978		
Purpose of Disbursement (Optional)		Aggregate		
Storage Fees		Year-to-date		\$2,980.00
Full Name		Date		Amount of each
Hederman Brothers		(Mo., Day, Year)		disbursement this period
Mailing Address		P.O. Box 1036		\$2,908.89
City, State, Zip Code		Madison, MS 39130-1036		
Purpose of Disbursement (Optional)		Aggregate		
Printing Services		Year-to-date		\$45,739.48
Full Name		Date		Amount of each
Office Depot		(Mo., Day, Year)		disbursement this period
Mailing Address		4950 I-55 North		\$102.08
City, State, Zip Code		Jackson, MS 39211-5401		
Purpose of Disbursement (Optional)		Aggregate		
Event Supplies		Year-to-date		\$384.53

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## ITEMIZED DISBURSEMENTS

Full Name		Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursement this period
Hederman Brothers			
Mailing Address P.O. Box 1036		05/05/2023	\$2,175.54
City, State, Zip Code Madison, MS 39130-1036			
Purpose of Disbursement (Optional) Printing Services		Aggregate Year-to-date	\$23,376.39
Full Name Butler Snow		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P.O. Box 6010		05/01/2023	\$6,020.00
City, State, Zip Code Ridgeland, MS 39158-6010			
Purpose of Disbursement (Optional) Legal Fees		Aggregate Year-to-date	\$12,819.00
Full Name OnMessage, Inc.		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 705 Melvin Ave #105		05/23/2023	\$90,339.84
City, State, Zip Code Annapolis, MD 21401-1534			
Purpose of Disbursement (Optional) TV Buy		Aggregate Year-to-date	\$230,119.57
Full Name Ana Marina Ingham		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 122 Langdon Drive		05/24/2023	\$255.87
City, State, Zip Code Madison, MS 39110-7076			
Purpose of Disbursement (Optional) Reimbursement for supplies		Aggregate Year-to-date	\$3,594.62
Full Name Mississippi Republican Party		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P.O. Box 60		05/01/2023	\$2,050.00
City, State, Zip Code Jackson, MS 39205-0060			
Purpose of Disbursement (Optional) Rent for office space		Aggregate Year-to-date	\$17,150.00
Full Name C Spire		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P.O. Box 519		05/15/2023	\$98.43
City, State, Zip Code Meadville, MS 39653-0519			
Purpose of Disbursement (Optional) Wireless Services		Aggregate Year-to-date	\$3,031.43

Reporting Period 05/01/2023 through 05/31/2023

## ITEMIZED DISBURSEMENTS

Full Name		Date		Aggregate Total Running
Mississippi Department Of Revenue		(Mo., Day, Year)		Amount of each disbursement this period
Mailing Address		05/15/2023		\$523.00
P.O. Box 23058				
City, State, Zip Code				
Jackson, MS 39225-3058				
Purpose of Disbursement (Optional)		Aggregate		
Payroll Tax Expense		Year-to-date		\$897.00
Full Name		Date		Amount of each
Hederman Brothers		(Mo., Day, Year)		disbursement this period
Mailing Address		05/09/2023		\$8,234.23
P.O. Box 1036				
City, State, Zip Code				
Madison, MS 39130-1036				
Purpose of Disbursement (Optional)		Aggregate		
Printing Services		Year-to-date		\$31,610.62
Full Name		Date		Amount of each
C. Spire		(Mo., Day, Year)		disbursement this period
Mailing Address		05/09/2023		\$57.34
P.O. Box 519				
City, State, Zip Code				
Meadville, MS 39653-0519				
Purpose of Disbursement (Optional)		Aggregate		
Wireless Services		Year-to-date		\$2,933.00
Full Name		Date		Amount of each
Office Depot		(Mo., Day, Year)		disbursement this period
Mailing Address		05/08/2023		\$144.46
4950 I-55 North				
City, State, Zip Code				
Jackson, MS 39211-5401				
Purpose of Disbursement (Optional)		Aggregate		
Event Supplies		Year-to-date		\$282.45
Full Name		Date		Amount of each
Stephens Printing, LLC		(Mo., Day, Year)		disbursement this period
Mailing Address		05/18/2023		\$505.03
642 Hwy 469 S				
City, State, Zip Code				
Florence, MS 39073-9064				
Purpose of Disbursement (Optional)		Aggregate		
Printing Services		Year-to-date		\$14,234.29
Full Name		Date		Amount of each
Kelli Miller		(Mo., Day, Year)		disbursement this period
Mailing Address		05/12/2023		\$2,000.00
950 Anniston Ave				
City, State, Zip Code				
Gulfport, MS 39507-2731				
Purpose of Disbursement (Optional)		Aggregate		
Consulting Services		Year-to-date		\$2,000.00

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## ITEMIZED DISBURSEMENTS

Full Name		Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursement this period
Vicari Catering		05/16/2023	\$1,895.29
Mailing Address			
514 Cruise St.			
City, State, Zip Code			
Corinth, MS 38834-4813			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$1,895.29
Event Expense, Catering			
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
PT Strategy LLC		05/15/2023	\$5,000.00
Mailing Address			
1223 Aldebraran Dr.			
City, State, Zip Code			
Mc Lean, VA 22101-2304			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$14,409.00
Consulting Services			
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
The Manship		05/12/2023	\$260.00
Mailing Address			
1200 N State St #100			
City, State, Zip Code			
Jackson, MS 39202-2000			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$6,383.62
Event Expense, Catering			
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
McDevitt Consulting LLC		05/01/2023	\$9,000.00
Mailing Address			
130 Eagles Nest Cr			
City, State, Zip Code			
Madison, MS 39110-6029			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$52,500.00
Consulting Services			
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
Aristotle International, Inc.		05/01/2023	\$750.00
Mailing Address			
200 Pennsylvania Ave. SE			
City, State, Zip Code			
Washington, DC 20003			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$4,500.00
Data Services			
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
The Manship		05/12/2023	\$260.00
Mailing Address			
1200 N State St #100			
City, State, Zip Code			
Jackson, MS 39202-2000			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$6,643.62
Event Expense, Catering			



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## ITEMIZED DISBURSEMENTS

Full Name		Date		Aggregate Total Running
		(Mo., Day, Year)		Amount of each disbursement this period
The Marship		05/12/2023		\$260.00
Mailing Address		1200 N State St #100		
City, State, Zip Code		Jackson, MS 39202-2000		
Purpose of Disbursement (Optional)		Aggregate Year-to-date		\$6,903.62
Event Expense, Catering				
Copey Grantham		05/01/2023		\$5.00
Mailing Address		823 Old Hwy 45		
City, State, Zip Code		Saltillo, MS 38866-7926		
Purpose of Disbursement (Optional)		Aggregate Year-to-date		\$6,726.32
Expense fee reimbursement				
Aristotle International, Inc.		05/01/2023		\$450.00
Mailing Address		200 Pennsylvania Ave. SE		
City, State, Zip Code		Washington, DC 20003		
Purpose of Disbursement (Optional)		Aggregate Year-to-date		\$4,950.00
Data Services				
Iron Horse Grill		05/08/2023		\$397.52
Mailing Address		320 W Pearl St		
City, State, Zip Code		Jackson, MS 39203-3001		
Purpose of Disbursement (Optional)		Aggregate Year-to-date		\$397.52
Event Expense, Catering				
Copey Grantham		05/01/2023		\$2,500.00
Mailing Address		823 Old Hwy 45		
City, State, Zip Code		Saltillo, MS 38866-7926		
Purpose of Disbursement (Optional)		Aggregate Year-to-date		\$9,226.32
Consulting Services				
i360, LLC		05/15/2023		\$150.00
Mailing Address		29374 Network Place		
City, State, Zip Code		Chicago, IL 60673-1293		
Purpose of Disbursement (Optional)		Aggregate Year-to-date		\$750.00
Data Services				



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## ITEMIZED DISBURSEMENTS

Full Name		Date		Aggregate Total Running
		(Mo., Day, Year)		Amount of each disbursement this period
Hederman Brothers		05/09/2023		\$9,699.55
Mailing Address				
P.O. Box 1036				
City, State, Zip Code				
Madison, MS 39130-1036				
Purpose of Disbursement (Optional)		Aggregate		
Printing Services		Year-to-date		\$41,310.17
Full Name		Date		Amount of each
Hederman Brothers		(Mo., Day, Year)		disbursement this period
Mailing Address				
P.O. Box 1036		05/03/2023		\$586.93
City, State, Zip Code				
Madison, MS 39130-1036				
Purpose of Disbursement (Optional)		Aggregate		
Printing Services		Year-to-date		\$21,200.85
Full Name		Date		Amount of each
United Airlines		(Mo., Day, Year)		disbursement this period
Mailing Address				
233 S Wacker Drive Ste 430		05/25/2023		\$338.25
City, State, Zip Code				
Chicago, IL 60606-6435				
Purpose of Disbursement (Optional)		Aggregate		
Travel Expense		Year-to-date		\$338.25
Full Name		Date		Amount of each
McClain General Store & Restaurant		(Mo., Day, Year)		disbursement this period
Mailing Address				
874 Holly Bush Rd		05/25/2023		\$3,391.67
City, State, Zip Code				
Brandon, MS 39047				
Purpose of Disbursement (Optional)		Aggregate		
Event Expense, Catering		Year-to-date		\$3,391.67
Full Name		Date		Amount of each
Snapshot Publishing LLC		(Mo., Day, Year)		disbursement this period
Mailing Address				
P.O. Box 320925		05/16/2023		\$1,025.00
City, State, Zip Code				
Flowood, MS 39232-0925				
Purpose of Disbursement (Optional)		Aggregate		
Design Services		Year-to-date		\$1,939.50
Full Name		Date		Amount of each
Elliott Husbands		(Mo., Day, Year)		disbursement this period
Mailing Address				
1855 Lakeland Drive Apt 201		05/31/2023		\$6,602.50
City, State, Zip Code				
Jackson, MS 39216-4927				
Purpose of Disbursement (Optional)		Aggregate		
Payroll		Year-to-date		\$19,807.50

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## ITEMIZED DISBURSEMENTS

Full Name		Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursement this period
Fresh Cut Catering & Floral		05/05/2023	\$959.20
Mailing Address 108 Cypress Cove			
City, State, Zip Code Flowood, MS 39232-5500			
Purpose of Disbursement (Optional) Event Expense, Catering		Aggregate Year-to-date	\$959.20
Full Name Jackson Jambalaya		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 855 S. Pear Orchard Road Building 100		05/12/2023	\$2,500.00
City, State, Zip Code Ridgeland, MS 39167-5113			
Purpose of Disbursement (Optional) Advertising		Aggregate Year-to-date	\$2,500.00
Full Name Melissa Hederman		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3845 Redbud Road		05/01/2023	\$179.76
City, State, Zip Code Jackson, MS 39211-6712			
Purpose of Disbursement (Optional) Reimbursement for supplies		Aggregate Year-to-date	\$242,892.35
Full Name Penn's Catering		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 190		05/23/2023	\$5,611.32
City, State, Zip Code Sandhill, MS 39161-0190			
Purpose of Disbursement (Optional) Event Expense, Catering		Aggregate Year-to-date	\$5,611.32
Full Name American Airlines		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4333 Amon Carter Blvd		05/25/2023	\$396.90
City, State, Zip Code Fort Worth, TX 76155-2605			
Purpose of Disbursement (Optional) Travel Expense		Aggregate Year-to-date	\$396.90
Full Name The Manship		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1200 N State St #100		05/25/2023	\$660.93
City, State, Zip Code Jackson, MS 39202-2000			
Purpose of Disbursement (Optional) Event Expense, Catering		Aggregate Year-to-date	\$7,564.55

Name of Candidate or Committee

Tate for Governor

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## ITEMIZED DISBURSEMENTS

Full Name		Aggregate Total Running	
		Date (Mo., Day, Year)	Amount of each disbursement this period
Trustmark Bank		05/31/2023	\$110.39
Mailing Address			
PO Box 291			
City, State, Zip Code			
Jackson, MS 39205-0291			
Purpose of Disbursement (Optional)		Aggregate Year-to-date	
Bank Fee			\$551.69