RECEIVED

By Secretary of State Elections Division at 3:33 pm, Jul 10, 2023

	REPORT OF REC	CEIPTS AND DISBURSEMENTS 2023 Election	-
Name of Candidate	andon Presley		DATE STAMP
Address PO Box 208		City/State/Zip Nettle	eton, MS 38858
Telephone (Work)	(He	ome) (202) 552-0221 (Fax)	
Contact Name Rachel	Headley	Email Address in	nfo@brandonpresley.com
Office Sought		Political Party De	emocratic Party
Check here	if above is different from prev	ious report	
		TYPE OF REPORT	
May Periodic Report			Mandatory
June Periodic Report			Mandatory
✓ July Periodic Report	(June 1, 2023	through June 30, 2023)	Mandatory
Prim	ary Pre-Election Report (through) Mandatory
Prin	nary Pre-Runoff Report (through) Runoff Candidates Only
October Periodic Report			Mandatory
Pre	-Election Report (through (Mandatory
Pre Pre	-Runoff Report (through)	Runoff Candidates Only
January Periodic Report			Mandatory
		t contributions, make campaign expenditures obligation and zero cash on hand balance)	s, has Required to terminate reporting obligations

Candidate

IMPORTANT

(1) All candidates for office shall file periodic reports in the year in which they are to be elected.

- (2) Periodic Reports are mandatory, even if no expenditures were made during the period. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and/or expenditures during this period. Pre-Election Reports are mandatory if the candidate is opposed.
- (3) Until a candidate files a Termination Report, annual reports must be filed in accordance with Miss. Code Ann. § 23-15-807(b) (ii) and (iii)
- (4) Beginning on Jan. 1, 2018, candidates and officeholders may not "personally use" campaign contributions. Section 23-15-821, Miss. Code Ann., sets forth these "personal use" expenditures which are specifically prohibited from campaign contributions and those disbursements which are not definited 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 reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline.

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

JAN 1, 2023 CASH ON HAND BALANCE					
	Itemized (+)	No	on-Itemized (=)	This Period	Calendar Year-To-Date
TOTAL AMT OF CONTRIBUTIONS		+			
TOTAL AMT OF DISBURSEMENTS		+			
CASH ON HAND BALANCE					

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

JAN 1, 2023 CASH ON HAND E	BALANCE				\$727,532.54
	Itemized (+)		Non-Itemized (=)	This Period	Calendar Year-To-Date
TOTAL AMT OF CONTRIBUTIONS	\$449,938.87	+	\$64,523.61	\$514,462.48	\$2,274,519.77
TOTAL AMT OF DISBURSEMENTS	\$344,293.16	+	\$1,918.48	\$346,211.64	\$1,119,346.06
CASH ON HAND BALANCE					\$1,882,706.25

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

Brandon Presley

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Signature of Candidate

07/10/2023

Date

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

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

Candidates for Statewide, State District, or Legislative Offices file this Report with the Secretary of State to 401 Mississippi Street, Jackson, MS; P.O. Box 136, Jackson, MS 39205; fax 601-576-2545; or email <u>CampaignFinance@sos.ms.gov</u>

Candidates for county and/or county district office file this Report with their respective Circuit Clerk's Office.

Name of Candidate or Comm	ittee Brandon Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barry Powell	06/30/2023	\$1,000.00
Mailing Address 600 S Pear Orchard Rd	-	
City, State, Zip Code Ridgeland, MS 39157-4225	_	
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Phil Bredesen	06/30/2023	\$5,000.00
Mailing Address 1724 Chickering Rd	_	
City, State, Zip Code Nashville, TN 37215-4908		
Name of Employer (Required) State of Tennessee		
Occupation (Required) Former Governor	Aggregate year-to-date	\$5,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Clark	06/25/2023	\$1,000.00
Mailing Address 110 Olympia Flds		
City, State, Zip Code Jackson, MS 39211-2509		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$11,003.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Judi Leake	06/16/2023	\$25.00
Mailing Address 5645 Traceside Dr		
City, State, Zip Code Nashville, TN 37221-4093		
Name of Employer (Required) Not Employed	1	
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

Name of Candidate of	r Committee	Brandon	Presley
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Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carolyn G	Goren	06/08/2023	\$25.00
Mailing Addre		-	
City, State, Zi Missoula ,	p Code MT 59807-7189	_	
Name of Emp Not Emplo	loyer (Required) byed		
Occupation (F		Aggregate year-to-date	\$310.00
Source:	Corporation PAC ✓Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Sl	akie	06/28/2023	\$25.00
Mailing Addre 4706 Buck	ess Lingham Dr		
City, State, Zi Chattanoc	p Code oga, TN 37421-1108		
Name of Emp Regal	loyer (Required)		
Occupation (F Usher	Required)	Aggregate year-to-date	\$422.60
Source:	□Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Geog	ghegan	06/29/2023	\$50.00
Mailing Addre		-	
City, State, Zi Brandon ,	p Code MS 39047-9007	-	
Name of Emp Not Emplo	loyer (Required) byed		
Occupation (F Retired	Required)	Aggregate year-to-date	\$500.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please specify)	(mol, bay, rear)	period
Full Name Robert Al		06/13/2023	\$50.00
	and Meadows Dr		
City, State, Zi Jackson ,	p Code MS 39211-5949		
	loyer (Required) C CPA, LLC		
Occupation (F Accountar		Aggregate year-to-date	\$550.00
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Name of Can	didate or	Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton	06/24/2023	\$10.00
Mailing Address 707 Randolph Ave SE		
City, State, Zip Code Huntsville, AL 35801-3606		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$222.51
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Hull	06/20/2023	\$25.00
Mailing Address 1008 Coolidge St		
City, State, Zip Code Tupelo, MS 38801-6231		
Name of Employer (Required) Self Employed		
Occupation (Required) Journalist	Aggregate year-to-date	\$275.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tiffany Bensen	06/30/2023	\$100.00
Mailing Address 237 Timber Ln		
City, State, Zip Code Oxford, MS 38655-5851		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Educator	Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year) _	Amount of each receipt this period
Full Name Yvonne Harrison	06/14/2023	\$100.00
Mailing Address 149 Acacia Ave		
149 Acacia Ave City, State, Zip Code	_	
149 Acacia Ave	_	
149 Acacia Ave City, State, Zip Code Biloxi, MS 39530-3308 Name of Employer (Required)	Aggregate year-to-date	\$377.00

Name of Can	didate or	Committee	Brandon	Presley
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Source:	Corporation	PAC / Individua	I Doan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thorne Bu	atler			06/28/2023	\$10.00
Mailing Addro 3942 Oaki					
City, State, Zi					
Name of Emp Not Emplo	loyer (Required) byed				
Occupation (Aggregate year-to-date	\$370.00
Source:	Corporation	PAC / Individua		Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mack Lowe	ery			06/11/2023	\$25.00
Mailing Addro 5055 Myer					
City, State, Zi Terry, MS	p Code 5 39170-9429				
	loyer (Required) ansmission				
Occupation (Business				Aggregate year-to-date	\$300.00
0	— - · · ·			Data	A manual of each
Source:	Corporation	PAC ✓Individua	I Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name			Loan		
Full Name	Other (please specify E. McMullan ess		Loan	(Mo., Day, Year)	receipt this period
Full Name Margaret Mailing Addro 541 E Sce City, State, Zi	Conter (please specify E. McMullan ess enic Dr)	Loan	(Mo., Day, Year)	receipt this period
Full Name Margaret Mailing Addro 541 E Sce City, State, Zi Pass Chri	Other (please specify E. McMullan ess enic Dr p Code .stian, MS 39571-4 loyer (Required))	Loan	(Mo., Day, Year)	receipt this period
Full Name Margaret Mailing Addro 541 E Sce City, State, Zi Pass Chri Name of Emp	Conter (please specify E. McMullan Ess enic Dr p Code stian, MS 39571-4 loyer (Required) oyed)	ILoan	(Mo., Day, Year)	receipt this period
Full Name Margaret Mailing Addro 541 E Sce City, State, Zi Pass Chri Name of Emp Self Emp] Occupation (Conter (please specify E. McMullan Ess enic Dr p Code stian, MS 39571-4 loyer (Required) oyed) 4510 PAC VIndividua		(Mo., Day, Year) 06/27/2023 Aggregate	receipt this period \$10,000.00
Full Name Margaret Mailing Addre 541 E Sce City, State, Zi Pass Chri Name of Emp Self Emp] Occupation (Author	Corporation Cother (please specify E. McMullan Ess Enic Dr p Code Stian, MS 39571-4 loyer (Required) Coyed Required) Corporation Cother (please specify) 4510 PAC VIndividua		(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date	receipt this period \$10,000.00 \$10,000.00 \$10,000.00 Amount of each receipt this
Full Name Margaret Mailing Addre 541 E Sce City, State, Zi Pass Chri Name of Emp Self Emp] Occupation (Author Source: Full Name	<pre>Other (please specify E. McMullan ess enic Dr p Code .stian, MS 39571-4 loyer (Required) .oyed Required) Other (please specify aw-Feder ess</pre>) 4510 PAC VIndividua		(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$10,000.00 \$10,000.00 \$10,000.00 Amount of each receipt this period
Full Name Margaret Mailing Addre 541 E Sce City, State, Zi Pass Chri Name of Emp Self Emp Occupation (Author Source: Full Name Misty Sha Mailing Addre 1202 Iola City, State, Zi	Other (please specify E. McMullan ess enic Dr p Code .stian, MS 39571-4 loyer (Required) .oyed Required) Corporation Other (please specify aw-Feder ess a Rd			(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$10,000.00 \$10,000.00 \$10,000.00 Amount of each receipt this period
Full Name Margaret Mailing Addro 541 E Sce City, State, Zi Pass Chri Name of Emp Self Empl Occupation (Author Source: Full Name Misty Sha Mailing Addro 1202 Iola City, State, Zi Ocean Spi Name of Emp	<pre>Other (please specify E. McMullan ess enic Dr p Code .stian, MS 39571-4 loyer (Required) .oyed Required) Corporation Other (please specify aw-Feder ess a Rd p Code</pre>			(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$10,000.00 \$10,000.00 \$10,000.00 Amount of each receipt this period
Full Name Margaret Mailing Addro 541 E Sce City, State, Zi Pass Chri Name of Emp Self Empl Occupation (Author Source: Full Name Misty Sha Mailing Addro 1202 Iola City, State, Zi Ocean Spi Name of Emp	<pre> Other (please specify E. McMullan ess enic Dr p Code stian, MS 39571-4 loyer (Required) coyed Required) Other (please specify aw-Feder ess a Rd p Code rings, MS 39564-28 loyer (Required) r Foundation Required) </pre>			(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$10,000.00 \$10,000.00 \$10,000.00 Amount of each receipt this period

Name of Can	didate or	Committee	Brandon	Presley
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Source:					
Source.	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sandra We	st			06/19/2023	\$100.00
Mailing Addre 5535 Marb	ss lehead Dr				
City, State, Zij Jackson,	DCode MS 39211-4249				
Name of Emplo	oyer (Required) yed				
Occupation (F Retired	Required)			Aggregate year-to-date	\$300.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marian Ku	rz			06/29/2023	\$25.00
Mailing Addre					
City, State, Zij Evanston,	Code IL 60201-1676				
Name of Empl Self Empl	oyer (Required) oyed				
Occupation (F Public Re				Aggregate year-to-date	\$210.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					
Joe York				06/30/2023	\$500.00
Joe York Mailing Addre 121 Panol				06/30/2023	\$500.00
Mailing Addre 121 Panol City, State, Zij	a St			06/30/2023	\$500.00
Mailing Addre 121 Panol City, State, Zij Water Val	a St Code ley, MS 38965-2511 oyer (Required)			06/30/2023	\$500.00
Mailing Addre 121 Panol City, State, Zij Water Val Name of Empl	a St o Code ley, MS 38965-2511 oyer (Required) oyed Required)			06/30/2023 Aggregate year-to-date	\$500.00 \$500.00
Mailing Addre 121 Panol City, State, Zij Water Val Name of Empl Self Empl Occupation (F	a St o Code ley, MS 38965-2511 oyer (Required) oyed Required)		Loan	Aggregate	\$500.00 Amount of each receipt this
Mailing Addre 121 Panol City, State, Zij Water Val Name of Empl Self Empl Occupation (F Video Pro Source: Full Name	a St o Code ley, MS 38965-2511 oyer (Required) oyed Required) ducer Corporation PAC Other (please specify)	✓ Individual	Loan	Aggregate year-to-date Date	\$500.00 Amount of each
Mailing Addre 121 Panol City, State, Zij Water Val Name of Empl Self Empl Occupation (F Video Pro Source: Full Name Margaret Mailing Addre	a St o Code ley, MS 38965-2511 oyer (Required) oyed Required) ducer Corporation PAC Other (please specify) Thomas ss	✓ Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$500.00 Amount of each receipt this period
Mailing Addre 121 Panol City, State, Zig Water Val Name of Empl Self Empl Occupation (F Video Pro Source: Full Name Margaret Mailing Addre 153 Timbe City, State, Zig	a St o Code ley, MS 38965-2511 oyer (Required) oyed Required) ducer Corporation PAC Other (please specify) Thomas ss rton Dr o Code	✓ Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$500.00 Amount of each receipt this period
Mailing Addre 121 Panol City, State, Zij Water Val Name of Empl Self Empl Occupation (F Video Pro Source: Full Name Margaret Mailing Addre 153 Timbe City, State, Zij Hattiesbu Name of Empl	a St o Code ley, MS 38965-2511 oyer (Required) oyed Required) ducer Corporation PAC Other (please specify) Thomas ss rton Dr o Code rg, MS 39401-8209 oyer (Required)	✓Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$500.00 Amount of each receipt this period
Mailing Addre 121 Panol City, State, Zij Water Val Name of Empl Self Empl Occupation (F Video Pro Source: Full Name Margaret Mailing Addre 153 Timbe City, State, Zij Hattiesbu	a St Code ley, MS 38965-2511 oyer (Required) oyed Required) ducer Corporation PAC Other (please specify) Thomas ss rton Dr Code rg, MS 39401-8209 oyer (Required) yed Required)	✓ Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$500.00 Amount of each receipt this period

Name of Candidate	or Committee	Brandon	Presley
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Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Douglas M	lasterson			06/26/2023	\$50.00
Mailing Addre					
City, State, Zi					
	loyer (Required) ry of Southern Mississipp	pi			
Occupation (I Chemist	Required)			Aggregate year-to-date	\$310.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karr	ıУ			06/07/2023	\$16.00
Mailing Addre	ess shire Blvd				
City, State, Zi Los Angel	p Code .es, CA 90048-5126				
Name of Emp Self Empl	loyer (Required) .oyed				
Occupation (I Clinical	Required) Social Worker			Aggregate year-to-date	\$252.00
Source:	Corporation PAC	Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name			Loan		
Full Name	Cother (please specify) LLC		Loan	(Mo., Day, Year)	receipt this period
Full Name Gordon Mc Mailing Addre 4545 HILT City, State, Zi	✓Other (please specify) LLC Kernan Injury Attorneys CON Ave		Loan	(Mo., Day, Year)	receipt this period
Full Name Gordon Mc Mailing Addre 4545 HILT City, State, Zi Baton Rou	✓ Other (please specify) LLC EKernan Injury Attorneys ESS CON Ave p Code		Loan	(Mo., Day, Year)	receipt this period
Full Name Gordon Mc Mailing Addre 4545 HILT City, State, Zi Baton Rou	✓ Other (please specify) LLC EKernan Injury Attorneys ESS CON Ave p Code age, LA 70808 loyer (Required)		Loan	(Mo., Day, Year)	receipt this period
Full Name Gordon Mc Mailing Addre 4545 HILT City, State, Zi Baton Rou Name of Emp	✓ Other (please specify) LLC EKernan Injury Attorneys Ess CON Ave p Code nge, LA 70808 loyer (Required) Required) □Corporation □PAC		Loan	(Mo., Day, Year) 06/29/2023 Aggregate	receipt this period \$25,000.00 \$25,000.00 \$25,000.00 Amount of each receipt this
Full Name Gordon Mc Mailing Addre 4545 HILT City, State, Zi Baton Rou Name of Emp Occupation (I Source:	✓ Other (please specify) LLC ✓ Exernan Injury Attorneys Sess CON Ave p Code tge, LA 70808 loyer (Required) Corporation □PAC Other (please specify)	, LLC		(Mo., Day, Year) 06/29/2023 Aggregate year-to-date Date	receipt this period \$25,000.00 \$25,000.00 \$25,000.00
Full Name Gordon Mc Mailing Addre 4545 HILT City, State, Zi Baton Rou Name of Emp Occupation (I Source: Full Name Anthony E	✓ Other (please specify) LLC EKernan Injury Attorneys ESS CON Ave p Code nge, LA 70808 loyer (Required) Required) ☐ Corporation ☐ PAC ☐ Other (please specify) Byron Norris	, LLC		(Mo., Day, Year) 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25,000.00 \$25,000.00 \$25,000.00 Amount of each receipt this period
Full Name Gordon Mc Mailing Addre 4545 HILT City, State, Zi Baton Rou Name of Emp Occupation (I Source: Full Name Anthony E Mailing Addre 750 S Lir	✓ Other (please specify) LLC EKernan Injury Attorneys ESS CON Ave p Code age, LA 70808 loyer (Required) Required) Corporation □PAC □Other (please specify) Byron Norris ESS he St	, LLC		(Mo., Day, Year) 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25,000.00 \$25,000.00 \$25,000.00 Amount of each receipt this period
Full Name Gordon Mc Mailing Addre 4545 HILT City, State, Zi Baton Rou Name of Emp Occupation (I Source: Full Name Anthony F Mailing Addre 750 S Lir City, State, Zi	✓ Other (please specify) LLC EKernan Injury Attorneys ESS CON Ave p Code age, LA 70808 loyer (Required) Required) Corporation □PAC □Other (please specify) Byron Norris ESS he St	, LLC		(Mo., Day, Year) 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25,000.00 \$25,000.00 \$25,000.00 Amount of each receipt this period
Full Name Gordon Mc Mailing Addre 4545 HILT City, State, Zi Baton Rou Name of Emp Occupation (I Source: Full Name Anthony E Mailing Addre 750 S Lir City, State, Zi Grenada,	✓ Other (please specify) LLC ✓ Other (please specify) LLC EKernan Injury Attorneys Ess CON Ave p Code age, LA 70808 loyer (Required) Required) □ Corporation □ PAC □ Other (please specify) Byron Norris ess he St p Code MS 38901-3702 loyer (Required)	, LLC		(Mo., Day, Year) 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25,000.00 \$25,000.00 \$25,000.00 Amount of each receipt this period
Full Name Gordon Mc Mailing Addre 4545 HILT City, State, Zi Baton Rou Name of Emp Occupation (I Source: Full Name Anthony E Mailing Addre 750 S Lir City, State, Zi Grenada, Name of Emp	✓ Other (please specify) LLC EXErnan Injury Attorneys EXErnan Injury Attorneys EXERNAL INJURY Attorneys EXERNAL INJURY Attorneys EXERNAL INJURY Attorneys EXERNAL INJURY Attorneys EXERNAL INJURY Attorneys EXERNAL INJURY ATTORNEY EXERNAL INJURY ATTORNEY EXERCISE INTORNEY EXERCISE INTORNEY EXERCISE INTORNEY EXERCISE INTORNEY EXERCISE INTORNEY EXERCISE INTORNEY EXERCISE INTORNEY EXERCISE INTORNEY EXERCISE INTORNEY	, LLC		(Mo., Day, Year) 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25,000.00 \$25,000.00 \$25,000.00 Amount of each receipt this period

Name of Can	didate or	Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Oneal	06/24/2023	\$100.00
Mailing Address 1011 Adeline St	-	
City, State, Zip Code	-	
Hattiesburg, MS 39401-5022		
Name of Employer (Required) Hattiesburg Clinic		
Occupation (Required) Physician	Aggregate year-to-date	\$1,450.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Rabalais	06/16/2023	\$15.00
Mailing Address 132 Sara Fox Dr	-	
City, State, Zip Code Brandon , MS 39047-5526		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$201.00
Source: Corporation PAC 🗸 Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
		receipt this
Other (please specify) Full Name Kristopher Pittard Mailing Address	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Kristopher Pittard Mailing Address 1160 lst St NE City, State, Zip Code	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Kristopher Pittard Mailing Address 1160 1st St NE City, State, Zip Code Washington, DC 20002-4696	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Kristopher Pittard Mailing Address 1160 lst St NE City, State, Zip Code	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Kristopher Pittard Mailing Address 1160 1st St NE City, State, Zip Code Washington, DC 20002-4696 Name of Employer (Required)	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Kristopher Pittard Mailing Address 1160 1st St NE City, State, Zip Code Washington, DC 20002-4696 Name of Employer (Required) US House of Representatives Occupation (Required) Professional Staff Member Source: □Corporation □PAC ✓Individual □Loan	(Mo., Day, Year) 06/17/2023 Aggregate year-to-date Date	receipt this period \$250.00 \$250.00 Amount of each
Cher (please specify) Full Name Kristopher Pittard Mailing Address 1160 1st St NE City, State, Zip Code Washington, DC 20002-4696 Name of Employer (Required) US House of Representatives Occupation (Required) Professional Staff Member	(Mo., Day, Year) 06/17/2023 Aggregate year-to-date	receipt this period \$250.00 \$250.00
Other (please specify) Full Name Kristopher Pittard Mailing Address 1160 1st St NE City, State, Zip Code Washington, DC 20002-4696 Name of Employer (Required) US House of Representatives Occupation (Required) Professional Staff Member Source: □Corporation □PAC ✓Individual □Loan	(Mo., Day, Year) 06/17/2023 Aggregate year-to-date Date	receipt this period \$250.00 \$250.00 Amount of each receipt this
□Other (please specify) Full Name Kristopher Pittard Mailing Address 1160 1st St NE City, State, Zip Code Washington, DC 20002-4696 Name of Employer (Required) US House of Representatives Occupation (Required) Professional Staff Member Source: □Corporation □Other (please specify) Full Name	(Mo., Day, Year) 06/17/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$250.00 \$250.00 Amount of each receipt this period
□Other (please specify)	(Mo., Day, Year) 06/17/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$250.00 \$250.00 Amount of each receipt this period
□Other (please specify) Full Name Kristopher Pittard Mailing Address 1160 1st St NE City, State, Zip Code Washington, DC 20002-4696 Name of Employer (Required) US House of Representatives Occupation (Required) Professional Staff Member Source: □Corporation □Other (please specify) Full Name John Drake Mailing Address	(Mo., Day, Year) 06/17/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$250.00 \$250.00 Amount of each receipt this period
□ Other (please specify)	(Mo., Day, Year) 06/17/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$250.00 \$250.00 Amount of each receipt this period
□Other (please specify) Full Name Kristopher Pittard Mailing Address 1160 1st St NE City, State, Zip Code Washington, DC 20002-4696 Name of Employer (Required) US House of Representatives Occupation (Required) Professional Staff Member Source: □Corporation □Other (please specify) Full Name John Drake Mailing Address 1220 Sunset Dr City, State, Zip Code Ocean Springs, MS 39564-2943 Name of Employer (Required)	(Mo., Day, Year) 06/17/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$250.00 \$250.00 Amount of each receipt this period

Name of Candidate or Committee Bra	andon Presie	У
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ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pam Woodley	06/27/2023	\$250.00
Mailing Address 1691 Ridgewood Dr NE		
City, State, Zip Code Atlanta, GA 30307-1250		
Name of Employer (Required) Towers Watson		
Occupation (Required) Business Owner	Aggregate year-to-date	\$350.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars	06/28/2023	\$10.00
Mailing Address 48 County Road 229		
City, State, Zip Code Oxford, MS 38655-5800		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$380.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Oneal	06/20/2023	\$50.00
Mailing Address 1011 Adeline St		
City, State, Zip Code Hattiesburg, MS 39401-5022		
Name of Employer (Required) Hattiesburg Clinic		
Occupation (Required) Physician	Aggregate year-to-date	\$1,450.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Henry L. Coaxum Jr	06/30/2023	\$250.00
Mailing Address 231 Harbor Cir		
City, State, Zip Code New Orleans, LA 70126-1103		
Name of Employer (Required)		
Coaxum Enterprises, Inc.		
Coaxum Enterprises, Inc. Occupation (Required) Restauranteur	Aggregate year-to-date	\$600.00

Name of	Candidate or	Committee	Brandon	Presley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

ITEMIZED RECEIPTS

Source:					
	Corporation PA	C 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alvin Wil	liams			06/01/2023	\$150.00
Mailing Addre					
City, State, Zip	Code				
	rg, MS 39402-9208				
	oyer (Required) y of South Alabama				
Occupation (R College P				Aggregate year-to-date	\$250.00
Source:	Corporation PA	C 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dennis Sci	hwarzauer			06/01/2023	\$500.00
Mailing Addre 606 Malli					
City, State, Zip Ridgeland	Code , MS 39157-2854				
	oyer (Required) itects + Engineers				
Occupation (R Architect	equired)			Aggregate year-to-date	\$500.00
Source:	Corporation PA	C 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael K	Fitzwilliam			06/24/2023	\$1,000.00
Mailing Addre	SS				
	on Pl				
City, State, Zip	Code				
Picayune,	Code MS 39466-8799				
Picayune,	OCode MS 39466-8799 oyer (Required)				
Picayune, Name of Empl	Code MS 39466-8799 oyer (Required) yed			Aggregate year-to-date	\$1,000.00
Picayune, Name of Emplo Not Emplo Occupation (R	Code MS 39466-8799 oyer (Required) yed equired)	.C ✓Individual	Loan	year-to-date Date	Amount of each receipt this
Picayune, Name of Employ Not Employ Occupation (R Retired Source:	Code MS 39466-8799 oyer (Required) yed equired)	.C ✓Individual	Loan	year-to-date	Amount of each
Picayune, Name of Empl Not Emplo Occupation (R Retired	Code MS 39466-8799 oyer (Required) yed equired) Corporation PA	.C 🗹 Individual	Loan	year-to-date Date	Amount of each receipt this
Picayune, Name of Employ Not Employ Occupation (R Retired Source: Full Name Sandra Ray Mailing Addre	<pre>o Code MS 39466-8799 oyer (Required) yed equired) Corporation PA Other (please specify)y</pre>	.C ✓ Individual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Picayune, Name of Employ Not Employ Occupation (R Retired Source: Full Name Sandra Ra Mailing Addre 144 Young City, State, Zip	<pre>o Code MS 39466-8799 over (Required) yed equired) Corporation PA Other (please specify) y ss swood Loop</pre>		Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Picayune, Name of Emplo Not Emplo Occupation (R Retired Source: Full Name Sandra Ray Mailing Addre 144 Young City, State, Zip Pass Chri	Code MS 39466-8799 oyer (Required) yed equired) Corporation PA Other (please specify) y ss swood Loop Code stian, MS 39571-2310 oyer (Required)		Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Picayune, Name of Employ Not Employ Occupation (R Retired Source: Full Name Sandra Ray Mailing Addres 144 Young City, State, Zip Pass Chri Name of Empl	<pre>o Code MS 39466-8799 over (Required) yed equired) Corporation PA Other (please specify) y ss swood Loop o Code stian, MS 39571-2310 over (Required) yed equired)</pre>		Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Ca	ndidate or	Committee	Brandon	Presley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

ITEN/IZED DECEIDTO

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	06/06/2023	\$1,000.00
Ransom P. Jones III Mailing Address		
2200 Gatlin Creek Rd		
City, State, Zip Code Leakesville, MS 39451-3063		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James K. Child Jr	06/16/2023	\$250.00
Mailing Address 1935 E Bourne Pl		
City, State, Zip Code Jackson, MS 39211-6714		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00
Source: Corporation PAC 🗸 Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
		receipt this
Contraction of the second	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Richard Ballard Mailing Address	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Richard Ballard Mailing Address 142 Road 598 City, State, Zip Code	(Mo., Day, Year)	receipt this period
Conter (please specify)	(Mo., Day, Year)	receipt this period
Conter (please specify)	(Mo., Day, Year) 06/07/2023 Aggregate	receipt this period \$5.00
Other (please specify) Full Name Richard Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ✓Individual □Loan	(Mo., Day, Year) 06/07/2023 Aggregate year-to-date Date	receipt this period \$5.00 \$240.00 Amount of each receipt this
Other (please specify) Full Name Richard Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name Janice Antonow Mailing Address	(Mo., Day, Year) 06/07/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$5.00 \$240.00 Amount of each receipt this period
□Other (please specify) Full Name Richard Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name	(Mo., Day, Year) 06/07/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$5.00 \$240.00 Amount of each receipt this period
□Other (please specify) Full Name Richard Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name Janice Antonow Mailing Address 3336 Whippoorwill Ln City, State, Zip Code	(Mo., Day, Year) 06/07/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$5.00 \$240.00 Amount of each receipt this period
□Other (please specify) Full Name Richard Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ☑Individual □Loan □Other (please specify) Full Name Janice Antonow Mailing Address 3336 Whippoorwill Ln City, State, Zip Code Oxford, MS 38655-5311 Name of Employer (Required)	(Mo., Day, Year) 06/07/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$5.00 \$240.00 Amount of each receipt this period

Name of Candidate of	r Committee	Brandon	Presley
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Sources			
Source:	Corporation □PAC ✓Individual □Loa	an Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Sta	llings	06/30/2023	\$25.00
Mailing Addre			
City, State, Zi			
Name of Emp	loyer (Required) Mississippi		
Occupation (F Attorney	Required)	Aggregate year-to-date	\$225.00
Source:	Corporation PAC ✓Individual Loa	an Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard R	Rhoden	06/22/2023	\$50.00
Mailing Addre			
City, State, Zi Jackson ,	p Code MS 39202-1711		
Name of Emp Self Empl	loyer (Required) .oyed		
Occupation (F Physician		Aggregate year-to-date	\$450.00
Source:	Corporation PAC Individual Loa	an Date (Mo., Day, Year)	Amount of each receipt this
			i period
Full Name Karen Hir	iton	06/05/2023	period \$100.00
Karen Hir Mailing Addre	285	06/05/2023	
Karen Hir Mailing Addre 817 Chart City, State, Zi	erss tres St p Code	06/05/2023	
Karen Hir Mailing Addre 817 Chart City, State, Zi New Orlea Name of Emp	eres St p Code ans, LA 70116-3206 loyer (Required)	06/05/2023	
Karen Hir Mailing Addre 817 Chart City, State, Zi New Orlea	eres St p Code ans, LA 70116-3206 loyer (Required) Loyed	06/05/2023 Aggregate year-to-date	
Karen Hir Mailing Addre 817 Chart City, State, Zi New Orlea Name of Emp Self Empl Occupation (f	eres St p Code ans, LA 70116-3206 loyer (Required) Loyed	Aggregate year-to-date	\$100.00 \$2,550.00 Amount of each receipt this
Karen Hir Mailing Addre 817 Chart City, State, Zi New Orlea Name of Emp Self Empl Occupation (f Writer Source: Full Name	ess cres St p Code ans, LA 70116-3206 loyer (Required) .oyed Required) Corporation PAC Individual Loa Other (please specify)	Aggregate year-to-date	\$100.00 \$2,550.00 Amount of each
Karen Hir Mailing Addre 817 Chart City, State, Zi New Orlea Name of Emp Self Empl Occupation (F Writer Source: Full Name Karen S. Mailing Addre	ess cres St p Code ans, LA 70116-3206 loyer (Required) oyed Required) Corporation PAC Individual Loa Other (please specify) Lundy ess	Aggregate year-to-date an Date (Mo., Day, Year)	\$100.00 \$2,550.00 Amount of each receipt this period
Karen Hir Mailing Addre 817 Chart City, State, Zi New Orlea Name of Emp Self Empl Occupation (f Writer Source: Full Name Karen S. Mailing Addre 89 James City, State, Zi	ess cres St p Code ans, LA 70116-3206 loyer (Required) .oyed Required) Corporation PAC Individual Loa Other (please specify) Lundy ess Switzer Rd p Code	Aggregate year-to-date an Date (Mo., Day, Year)	\$100.00 \$2,550.00 Amount of each receipt this period
Karen Hir Mailing Addre 817 Chart City, State, Zi New Orlea Name of Emp Self Empl Occupation (F Writer Source: Full Name Karen S. Mailing Addre 89 James City, State, Zi Purvis, M	ess cres St p Code ns, LA 70116-3206 loyer (Required) .oyed Required) Corporation PAC Individual Loa Other (please specify) Lundy ess Switzer Rd	Aggregate year-to-date an Date (Mo., Day, Year)	\$100.00 \$2,550.00 Amount of each receipt this period
Karen Hir Mailing Addre 817 Chart City, State, Zi New Orlea Name of Emp Self Empl Occupation (F Writer Source: Full Name Karen S. Mailing Addre 89 James City, State, Zi Purvis, M	ess cres St p Code ans, LA 70116-3206 loyer (Required) .oyed Required) □ Corporation □ PAC ☑ Individual □ Loa □ Other (please specify) Lundy ess Switzer Rd p Code IS 39475-3036 loyer (Required) cy of Southern Mississippi Required)	Aggregate year-to-date an Date (Mo., Day, Year)	\$100.00 \$2,550.00 Amount of each receipt this period

Name of	Candidate or	Committee	Brandon	Presley
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Source:	Corporation		ndividual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Larry O.	Vaughn				06/27/2023	\$100.00
Mailing Addre 259 Odom						
City, State, Zi						
Name of Emp Not Emplo	loyer (Required) byed					
Occupation (I Not Emplo					Aggregate year-to-date	\$225.00
Source:	Corporation		ndividual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Keith Joł	inson				06/30/2023	\$50.00
Mailing Addre PO Box 42						
City, State, Zi Nesbit, M	p Code IS 38651-0421					
Name of Emp Not Emplo	loyer (Required) byed					
Occupation (I Not Emplo					Aggregate year-to-date	\$550.00
Source:	Corporation		ndividual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Don Mathi					06/12/2023	\$500.00
Don Macin	son					
Mailing Addre	288					
Mailing Addre 616 E Sec City, State, Zi	ess cond St	1-4007				
Mailing Addre 616 E Sec City, State, Zi Pass Chri	ess cond St p Code .stian, MS 3957 loyer (Required)	1-4007				
Mailing Addre 616 E Sec City, State, Zi Pass Chri Name of Emp	ess cond St p Code .stian, MS 3957 loyer (Required) oyed	1-4007			Aggregate year-to-date	\$575.00
Mailing Addre 616 E Sec City, State, Zi Pass Chri Name of Emp Not Emplo Occupation (I	ess cond St p Code .stian, MS 3957 loyer (Required) oyed	PAC VI	ndividual	Loan		Amount of each receipt this
Mailing Addre 616 E Sec City, State, Zi Pass Chri Name of Emp Not Emplo Occupation (Retired	ess cond St p Code .stian, MS 3957 loyer (Required) oyed Required) Corporation	PAC VI	ndividual	Loan	year-to-date Date	Amount of each
Mailing Addre 616 E Sec City, State, Zi Pass Chri Name of Emp Not Emplo Occupation (I Retired Source: Full Name Charles I Mailing Addre	ess cond St p Code .stian, MS 3957 loyer (Required) byed Required) Corporation Other (please spection Lacavera	PAC VI	ndividual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Addre 616 E Sec City, State, Zi Pass Chri Name of Emp Not Emplo Occupation (R Retired Source: Full Name Charles I Mailing Addre 1459 Fork City, State, Zi	ess cond St p Code .stian, MS 3957 loyer (Required) byed Required) Corporation Other (please spe Dacavera ess bes Dr p Code	PAC VI	ndividual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Addre 616 E Sec City, State, Zi Pass Chri Name of Emp Not Emplo Occupation (Retired Source: Full Name Charles I Mailing Addre 1459 Fork City, State, Zi Byram, MS	ess cond St p Code .stian, MS 3957 loyer (Required) oyed Required) Corporation Other (please spe Jacavera ess Des Dr p Code 3 39272-9459 loyer (Required)	PAC VI	ndividual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Addre 616 E Sec City, State, Zi Pass Chri Name of Emp Not Emplo Occupation (Retired Source: Full Name Charles I Mailing Addre 1459 Fork City, State, Zi Byram, MS Name of Emp Eastpoint Occupation (ess cond St p Code .stian, MS 3957 loyer (Required) oyed Required) Corporation Other (please spe Jacavera bes Dr p Code S 39272-9459 loyer (Required) ce	PAC VI	ndividual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of	Candidate or	Committee	Brandon	Presley
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Source: Corporation PAC 🖌 Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Dickson	06/15/2023	\$250.00
Mailing Address 807STH 19Th Ave		
City, State, Zip Code Hattiesburg, MS 39401		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald W. Medley	06/06/2023	\$1,000.00
Mailing Address PO Box 1724		
City, State, Zip Code Hattiesburg, MS 39403-1724		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,150.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this
		period
Full Name Margaret Thomas	06/08/2023	\$5.00
Full Name	-	·
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code	-	·
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required)	-	i
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed Occupation (Required)	-	i
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed	06/08/2023	\$5.00
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC □Individual	Aggregate year-to-date Date	\$5.00 \$362.00 Amount of each receipt this
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation Other (please specify) Full Name	Aggregate year-to-date (Mo., Day, Year)	\$5.00 \$362.00 Amount of each receipt this period
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC ✓Individual Loan Other (please specify) Full Name Dorsey R. Carson Jr Mailing Address 2431 Lake Cir City, State, Zip Code	Aggregate year-to-date (Mo., Day, Year)	\$5.00 \$362.00 Amount of each receipt this period
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name Dorsey R. Carson Jr Mailing Address 2431 Lake Cir City, State, Zip Code Jackson, MS 39211-6622 Name of Employer (Required)	Aggregate year-to-date (Mo., Day, Year)	\$5.00 \$362.00 Amount of each receipt this period
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employed Occupation (Required) Not Employed Corporation PAC Individual Loan Other (please specify) Full Name Dorsey R. Carson Jr Mailing Address 2431 Lake Cir City, State, Zip Code Jackson, MS 39211-6622	Aggregate year-to-date (Mo., Day, Year)	\$5.00 \$362.00 Amount of each receipt this period

Name of Candidate or Committee Bra	andon Presie	У
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 Reporting Period
 6/1/2023
 through
 6/30/2023

ITEMIZED RECEIPTS

Source: Corp					
	oration	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Williams				06/22/2023	\$25.00
Mailing Address 122 Madison Pl					
City, State, Zip Code Hattiesburg, MS	39402-8339				
Name of Employer (Rec Bristow Helicop	,				
Occupation (Required) Pilot				Aggregate year-to-date	\$575.00
	r (please specify)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Hasty				06/05/2023	\$500.00
Mailing Address 133 Beach View	Dr				
City, State, Zip Code Pass Christian,	MS 39571-3503				
Name of Employer (Rec None	uired)				
Occupation (Required) Homemaker				Aggregate year-to-date	\$600.00
	pration PAC	🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debbie Hall				06/16/2023	\$25.00
Mailing Address					
Mailing Address 127 Sesame Rd					
-	1-8615				
127 Sesame Rd City, State, Zip Code	uired)				
127 Sesame Rd City, State, Zip Code Tupelo, MS 3880 Name of Employer (Rec	uired)			Aggregate year-to-date	\$462.40
127 Sesame Rd City, State, Zip Code Tupelo, MS 3880 Name of Employer (Rec University of M Occupation (Required) Professor Source: Corp	uired)	✓Individual	Loan		\$462.40 Amount of each receipt this period
127 Sesame Rd City, State, Zip Code Tupelo, MS 3880 Name of Employer (Rec University of M Occupation (Required) Professor Source: Corp	uired) ississippi pration PAC	✓ Individual	Loan	year-to-date Date	Amount of each receipt this
127 Sesame Rd City, State, Zip Code Tupelo, MS 3880 Name of Employer (Rec University of M Occupation (Required) Professor Source: Corp Othe Full Name	uired) ississippi pration PAC	✓Individual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
127 Sesame Rd City, State, Zip Code Tupelo, MS 3880 Name of Employer (Rec University of M Occupation (Required) Professor Source: Corp Othe Full Name Carol C. Mann Mailing Address 316 Sonoma Cv City, State, Zip Code	uired) ississippi pration PAC r (please specify)	✓ Individual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
127 Sesame Rd City, State, Zip Code Tupelo, MS 3880 Name of Employer (Rec University of M Occupation (Required) Professor Source: Corp Other Full Name Carol C. Mann Mailing Address 316 Sonoma Cv	uired) ississippi pration PAC r (please specify) 10-9549	✓Individual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
127 Sesame Rd City, State, Zip Code Tupelo, MS 3880 Name of Employer (Rec University of M Occupation (Required) Professor Source: Corp Othe Full Name Carol C. Mann Mailing Address 316 Sonoma Cv City, State, Zip Code Madison, MS 391 Name of Employer (Rec	uired) ississippi pration PAC r (please specify) 10-9549	✓Individual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate of	r Committee	Brandon	Presley
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Source:	Corporation	□PAC ✓Indi cify)	vidual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nan Tarlt	con				06/29/2023	\$100.00
Mailing Addr	ess owlane Dr					
City, State, Z						
-	MS 39110-9611					
Name of Emp Not Emplo	loyer (Required) byed					
Occupation (Not Emplo					Aggregate year-to-date	\$725.00
Source:	Corporation	□PAC ✓Indi cify)	vidual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Angela Th	lomas				06/30/2023	\$1,000.00
Mailing Addr 1060 E Co	ess Dunty Line Rd					
	A, MS 39157-1937	1				
Name of Emp	loyer (Required) Loyed					
Occupation (Author	Required)				Aggregate year-to-date	\$1,000.00
Source:	Corporation	□PAC ✓Indi	vidual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne H	Robinson				06/30/2023	\$500.00
Mailing Addr 206 Wood						
206 Wood City, State, Z	St	2603				
206 Wood City, State, Z Water Va	St p Code Lley, MS 38965-2 loyer (Required)	2603				
206 Wood City, State, Z Water Val Name of Emp	St p Code Lley, MS 38965-2 Noyer (Required) byed Required)	2603			Aggregate year-to-date	\$985.00
206 Wood City, State, Z Water Va Name of Emplo Occupation (St p Code Lley, MS 38965-2 loyer (Required) byed Required) byed Corporation	□PAC ✔Indi	vidual	Loan	year-to-date Date	Amount of each receipt this
206 Wood City, State, Z Water Va Name of Emp Not Emplo Occupation (Not Emplo Source:	St p Code Lley, MS 38965-2 Noyer (Required) byed Required) byed	□PAC ✔Indi	vidual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
206 Wood City, State, Z Water Va Name of Emp Not Emplo Occupation (Not Emplo	St p Code Lley, MS 38965-2 Noyer (Required) byed Required) byed Corporation	□PAC ✔Indi	vidual	Loan	year-to-date Date	Amount of each receipt this
206 Wood City, State, Z Water Val Name of Emplo Occupation (Not Emplo Source: Full Name	St p Code Lley, MS 38965-2 loyer (Required) byed Required) byed Corporation Other (please spect ran ess	□PAC ✔Indi	vidual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
206 Wood City, State, Z Water Val Name of Emplo Occupation (Not Emplo Source: Full Name Roy H. Ry Mailing Addr 2800 W Ma City, State, Z	St p Code Lley, MS 38965-2 loyer (Required) byed Required) byed Corporation Other (please spect van ess ain St	□PAC ✔Indi	vidual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
206 Wood City, State, Z Water Val Name of Emplo Occupation (Not Emplo Source: Full Name Roy H. Ry Mailing Addr 2800 W Ma City, State, Z Tupelo, N	St p Code Lley, MS 38965-2 loyer (Required) byed Corporation Other (please spect van ess ain St p Code MS 38801-3027 loyer (Required)	□PAC ✔Indi	vidual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
206 Wood City, State, Z Water Val Name of Emplo Occupation (Not Emplo Source: Full Name Roy H. Ry Mailing Addr 2800 W Ma City, State, Z Tupelo, M	St p Code Lley, MS 38965-2 loyer (Required) byed Corporation Other (please spect van ess ain St p Code MS 38801-3027 loyer (Required) byed	□PAC ✔Indi	vidual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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Source: Corpor	ation	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roger Mcdowell				06/06/2023	\$200.00
Mailing Address 1904 Fuller St					
City, State, Zip Code Hattiesburg, MS	39401-7544				
Name of Employer (Requ Not Employed	ired)				
Occupation (Required) Retired				Aggregate year-to-date	\$1,539.25
Source: Corpor	ation	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pin Ni				06/26/2023	\$10,000.00
Mailing Address 9 S Meadow Ct					
City, State, Zip Code South Barringto,	IL 60010-9554				
Name of Employer (Requ Wanxiang America					
Occupation (Required) President				Aggregate year-to-date	\$10,000.00
Source: Corpor	ation	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie Fye				06/07/2023	\$50.00
Mailing Address 5439 Ennis Rd					
City, State, Zip Code Starkville, MS 3	9759-4861				
Name of Employer (Requ Self Employed					
Occupation (Required) Licensed Profess	ional Counselor			Aggregate year-to-date	\$620.00
Source: Corpor	ation	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Buchanan				06/28/2023	\$31.79
Mailing Address 155 Bryant St					
City, State, Zip Code Palo Alto, CA 94	301-1104				
Name of Employer (Requ Not Employed					
Occupation (Required) Not Employed				Aggregate year-to-date	\$564.00

Name of Candidate of	r Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carolyn Goren	06/11/2023	\$5.00
Mailing Address PO Box 7189		
City, State, Zip Code Missoula, MT 59807-7189		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$310.00
Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joe Powell	06/26/2023	\$500.00
Mailing Address 417 Glenway Dr		
City, State, Zip Code Jackson, MS 39216-4108		
Name of Employer (Required) WC Leasing, LLC		
Occupation (Required) Commercial Equipment Finance	Aggregate year-to-date	\$2,000.00
Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Mercier	06/30/2023	\$100.00
Mailing Address 515 Childs St		
City, State, Zip Code Corinth, MS 38834-4808		
Name of Employer (Required)		
Officepro		
	Aggregate year-to-date	\$500.00
Officepro Occupation (Required)		\$500.00 Amount of each receipt this period
Officepro Occupation (Required) Business Owner Source: Corporation PAC VIndividual Loan	year-to-date Date	Amount of each receipt this
Officepro Occupation (Required) Business Owner Source: Corporation PAC VIndividual Loan Other (please specify) Full Name	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Officepro Occupation (Required) Business Owner Source: Corporation PAC Individual Loan Other (please specify) Full Name David McKinnis Mailing Address	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Officepro Occupation (Required) Business Owner Source: Corporation PAC VIndividual Loan Other (please specify) Full Name David McKinnis Mailing Address 301 Sasco Hill Rd City, State, Zip Code	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Officepro Occupation (Required) Business Owner Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name David McKinnis Mailing Address 301 Sasco Hill Rd City, State, Zip Code Fairfield, CT 06824-5649 Name of Employer (Required)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candida	te or Committee	Brandon	Presley
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Source: Corporation PAC VIndividual Loan		
Source: Corporation PAC 🖌 Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steve McCormick	06/23/2023	\$400.00
Mailing Address 138 Glenwild Rd		
City, State, Zip Code Grenada, MS 38901-9342		
Name of Employer (Required) McCormick Equipment and Excavating, LLC		
Occupation (Required) Business Owner	Aggregate year-to-date	\$400.00
Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Hinton	06/14/2023	\$500.00
Mailing Address 817 Chartres St		
City, State, Zip Code New Orleans, LA 70116-3206		
Name of Employer (Required) Self Employed		
Occupation (Required) Writer	Aggregate year-to-date	\$2,550.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this
		period
Full Name	06/27/2023	\$500.00
Full Name C. Gale Singley Mailing Address	06/27/2023	·
Full Name C. Gale Singley Mailing Address 521 E Second St City, State, Zip Code	06/27/2023	·
Full Name C. Gale Singley Mailing Address 521 E Second St	06/27/2023	·
Full Name C. Gale Singley Mailing Address 521 E Second St City, State, Zip Code Pass Christian, MS 39571-4530 Name of Employer (Required)	Aggregate year-to-date	·
Full Name C. Gale Singley Mailing Address 521 E Second St City, State, Zip Code Pass Christian, MS 39571-4530 Name of Employer (Required) Not Employed Occupation (Required)	Aggregate	\$500.00
Full Name C. Gale Singley Mailing Address 521 E Second St City, State, Zip Code Pass Christian, MS 39571-4530 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC VIndividual Loan	Aggregate year-to-date Date	\$500.00 \$500.00 Amount of each receipt this
Full Name C. Gale Singley Mailing Address 521 E Second St City, State, Zip Code Pass Christian, MS 39571-4530 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name L. V. Holland Mailing Address	Aggregate year-to-date Date (Mo., Day, Year)	\$500.00 \$500.00 Amount of each receipt this period
Full Name C. Gale Singley Mailing Address 521 E Second St City, State, Zip Code Pass Christian, MS 39571-4530 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name L. V. Holland Mailing Address 17 New Bethel Rd City, State, Zip Code	Aggregate year-to-date Date (Mo., Day, Year)	\$500.00 \$500.00 Amount of each receipt this period
Full Name C. Gale Singley Mailing Address 521 E Second St City, State, Zip Code Pass Christian, MS 39571-4530 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC VIndividual Loan Other (please specify) Full Name L. V. Holland Mailing Address 17 New Bethel Rd	Aggregate year-to-date Date (Mo., Day, Year)	\$500.00 \$500.00 Amount of each receipt this period
Full Name C. Gale Singley Mailing Address 521 E Second St City, State, Zip Code Pass Christian, MS 39571-4530 Name of Employer (Required) Not Employed Cocupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name L. V. Holland Mailing Address 17 New Bethel Rd City, State, Zip Code Tylertown, MS 39667-6608 Name of Employer (Required)	Aggregate year-to-date Date (Mo., Day, Year)	\$500.00 \$500.00 Amount of each receipt this period

Name of Candidate of	r Committee	Brandon	Presley
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Source:	Corporation		/Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hugh Parl	ker				06/28/2023	\$1,000.00
Mailing Addr	ess L Garden Ter					
City, State, Z						
	MS 39110-7635					
Name of Emp	oloyer (Required) byed					
Occupation (Not Emplo					Aggregate year-to-date	\$1,025.00
Source:	Corporation		/Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William H	Kirkpatrick				06/30/2023	\$500.00
Mailing Addr 43282 Wat	ess cwick Hills Ct					
City, State, Z Leesburg	p Code , VA 20176-3950					
Name of Emp VMware	oloyer (Required)					
Occupation (Sales Exe					Aggregate year-to-date	\$3,000.00
Source:	Corporation				Date	Amount of each
	Other (please specif		Individual	Loan	(Mo., Day, Year)	receipt this
Full Name Brad Mori	Other (please speci			Coan		
Full Name	Other (please specification of the specification of				(Mo., Day, Year)	receipt this period
Full Name Brad Morr Mailing Addr PO Box 22 City, State, Z	Other (please specificies				(Mo., Day, Year)	receipt this period
Full Name Brad Morr Mailing Addr PO Box 22 City, State, Z Oxford, M Name of Emp	Other (please specificies cis ess 136 p Code	 fy)			(Mo., Day, Year)	receipt this period
Full Name Brad Morr Mailing Addr PO Box 22 City, State, Z Oxford, M Name of Emp	Other (please speci cis ess 136 p Code 4S 38655-7136 ployer (Required) cis Law Firm PLLC	 fy)			(Mo., Day, Year)	receipt this period
Full Name Brad Morr Mailing Addr PO Box 22 City, State, Z Oxford, 1 Name of Emp Brad Morr Occupation (☐ Other (please specific cis ess 136 p Code 4S 38655-7136 ployer (Required) cis Law Firm PLLC Required) ☐ Corporation	 fy) _	✓Individual	Loan	(Mo., Day, Year) 06/30/2023 Aggregate	receipt this period \$2,500.00 \$4,000.00 Amount of each receipt this
Full Name Brad Morn Mailing Addr PO Box 22 City, State, Z Oxford, 1 Name of Emp Brad Morn Occupation (Attorney Source: Full Name	Other (please specificies Content (please specificies Content (please specificies) Content (please specificies) Other (please specificies) Other (please specificies)	 fy) _			(Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,500.00 \$4,000.00 Amount of each receipt this period
Full Name Brad Morr Mailing Addr PO Box 22 City, State, Z Oxford, M Name of Emp Brad Morr Occupation (Attorney Source: Full Name Cynthia	☐ Other (please specific ris ess 136 p Code 4S 38655-7136 ployer (Required) ris Law Firm PLLC Required) ☐ Corporation ☐ Other (please specific Zap	 fy) _			(Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date	receipt this period \$2,500.00 \$4,000.00 Amount of each receipt this
Full Name Brad Morr Mailing Addr PO Box 22 City, State, Z Oxford, M Name of Emp Brad Morr Occupation (Attorney Source: Full Name Cynthia	☐ Other (please specific ris ess 136 p Code 4S 38655-7136 ployer (Required) ris Law Firm PLLC Required) ☐ Corporation ☐ Other (please specific Zap	 fy) _			(Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,500.00 \$4,000.00 Amount of each receipt this period
Full Name Brad Morn Mailing Addr PO Box 22 City, State, Z Oxford, 1 Name of Emp Brad Morn Occupation (Attorney Source: Full Name Cynthia 1 Mailing Addr 1955 Popp City, State, Z	Corporation Corpo	 fy) _			(Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,500.00 \$4,000.00 Amount of each receipt this period
Full Name Brad Morn Mailing Addr PO Box 22 City, State, Z Oxford, M Name of Emp Brad Morn Occupation (Attorney Source: Full Name Cynthia S Mailing Addr 1955 Popp City, State, Z Biloxi, M	Corporation Corpo	 fy) _			(Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,500.00 \$4,000.00 Amount of each receipt this period
Full Name Brad Morn Mailing Addr PO Box 22 City, State, Z Oxford, M Name of Emp Brad Morn Occupation (Attorney Source: Full Name Cynthia S Mailing Addr 1955 Popp City, State, Z Biloxi, M	Corporation Corpo	 fy) _			(Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,500.00 \$4,000.00 Amount of each receipt this period
Full Name Brad Morn PO Box 2: City, State, Z Oxford, M Name of Emp Brad Morn Occupation (Attorney Source: Full Name Cynthia 2 Mailing Addr 1955 Popp City, State, Z Biloxi, M	☐ Other (please species Cis Cis Code AS 38655-7136 Ployer (Required) Corporation ☐ Corporation ☐ Other (please species Corporation ☐ Other (please species Corporation] Other (please species Corporation] Other (please species] Othe	 fy) _			(Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,500.00 \$4,000.00 Amount of each receipt this period

Name of Candida	te or Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Oneal	06/22/2023	\$100.00
Mailing Address 1011 Adeline St		
City, State, Zip Code Hattiesburg, MS 39401-5022		
Name of Employer (Required) Hattiesburg Clinic		
Occupation (Required) Physician	Aggregate year-to-date	\$1,450.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Q. Evans	06/22/2023	\$100.00
Mailing Address 321 Water Garden Ter		
City, State, Zip Code Madison, MS 39110-6954		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda E. McDaniel	06/16/2023	\$500.00
Mailing Address 110 Greenbriar Pl		
City, State, Zip Code Hattiesburg, MS 39402-2532		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Parks Construction LLC	06/26/2023	\$1,000.00
Mailing Address 109 Okolona Cutoff Rd		
City, State, Zip Code Houston, MS 38851-8711		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$1,000.00

Name of Ca	ndidate or	Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Balpreet Grewal-Virk	06/30/2023	\$1,250.00
Mailing Address 5 Sandstone Rdg	-	
City, State, Zip Code Upper Saddle Ri, NJ 07458-1838	-	
Name of Employer (Required) RWJBarnabas Health	_	
Occupation (Required) Senior Vice President	Aggregate year-to-date	\$1,250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Ubertini	06/13/2023	\$5.00
Mailing Address 11 Helen Ln	-	
City, State, Zip Code Walpole, MA 02081-2046		
Name of Employer (Required) Long and Foster		
Occupation (Required) Recruiter	Aggregate year-to-date	\$270.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carey R. Varnado	06/06/2023	\$1,000.00
Mailing Address 500 6th Ave		
City, State, Zip Code Hattiesburg, MS 39401-4243	-	
Name of Employer (Required) Self Employed	-	
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John P. Sullivan	06/16/2023	\$250.00
Mailing Address 1239 Winwood Cv	_	
City, State, Zip Code Tupelo, MS 38801-6472	_	
Name of Employer (Required) Sullivan Insurance Solutions	1	
Occupation (Required) Business Owner	Aggregate year-to-date	\$500.00

Name of Candida	te or Committee	Brandon	Presley
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Date	Amount of each
., Day, Year)	receipt this period
/17/2023	\$1,000.00
ggregate ar-to-date	\$3,000.00
Date ., Day, Year)	Amount of each receipt this period
/28/2023	\$250.00
ggregate ar-to-date	\$250.00
Date ., Day, Year)	Amount of each receipt this period
/10/2023	\$250.00
ggregate ar-to-date	\$350.00
Date ., Day, Year)	Amount of each receipt this
,, buy, rour)	period
/30/2023	period \$250.00
	ar-to-date Date , Day, Year) /28/2023 /28/2023 /28/2023 /28/2023 /2023 /2023 /2023 /10/2023 /10/2023 /10/2023

Name of Can	didate or	Committee	Brandon	Presley
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Source:	Corporation	PAC Individua	al Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne R	obinson			06/13/2023	\$25.00
Mailing Addre					
City, State, Zi Water Val	p Code .ley, MS 38965-26	03		_	
Name of Emp Not Emplo	loyer (Required) byed				
Occupation (F				Aggregate year-to-date	\$985.00
Source:	Corporation	□PAC ✓Individua	al Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie Fy	re			06/23/2023	\$25.00
Mailing Addre 5439 Enni					
City, State, Zi Starkvill	p Code .e, MS 39759-4861				
Name of Emp Self Empl	loyer (Required) .oyed				
Occupation (F Licensed	Required) Professional Cou	nselor		Aggregate year-to-date	\$620.00
Source:	Corporation	PAC 🖌 Individua	al Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Percy W.	Watson			06/06/2023	\$500.00
Mailing Addre 930 N Mai					
City, State, Zi		0			
•	loyer (Required) of Representativ	es			
Occupation (F Member	Required)			Aggregate year-to-date	\$500.00
Source:	Corporation	□PAC ✓Individua y)	al Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stanley C)wen			06/11/2023	\$100.00
Mailing Addre	288				
24 Sweets City, State, Zi	p Code				
	rings, MS 39564-3 loyer (Required) oved	455		—	
Occupation (F				Aggregate year-to-date	\$400.00

Name of Candidate or Committee Bra	andon Pre	sley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steven C. Phillips	06/23/2023	\$50,000.00
Mailing Address 455 Hyde St		
City, State, Zip Code San Francisco, CA 94109-7464		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$50,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James T. Murray Jr	06/06/2023	\$1,000.00
Mailing Address 65 Caitlynn Cir		
City, State, Zip Code Hattiesburg, MS 39402-7995		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,100.00
Source: Corporation PAC VIndividual Loan		
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
		receipt this
Other (please specify) Full Name James W. Manuel Mailing Address	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name James W. Manuel	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name James W. Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name James W. Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code Madison, MS 39110-7494 Name of Employer (Required)	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name James W. Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code Madison, MS 39110-7494 Name of Employer (Required) Bradley Arant Boult Cummings LLP Occupation (Required)	(Mo., Day, Year)	receipt this period \$25.00
□Other (please specify) Full Name James W. Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code Madison, MS 39110-7494 Name of Employer (Required) Bradley Arant Boult Cummings LLP Occupation (Required) Attorney Source: □Corporation □PAC □Individual	(Mo., Day, Year) 06/07/2023 Aggregate year-to-date Date	receipt this period \$25.00 \$275.00 Amount of each receipt this
□Other (please specify) Full Name James W. Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code Madison, MS 39110-7494 Name of Employer (Required) Bradley Arant Boult Cummings LLP Occupation (Required) Attorney Source: □Corporation □Other (please specify) Full Name Marilyn Vandemark Mailing Address	(Mo., Day, Year) 06/07/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25.00 \$275.00 Amount of each receipt this period
□Other (please specify) Full Name James W. Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code Madison, MS 39110-7494 Name of Employer (Required) Bradley Arant Boult Cummings LLP Occupation (Required) Attorney Source: □Corporation □Other (please specify) Full Name Marilyn Vandemark Mailing Address 412 Highpoint Dr City, State, Zip Code	(Mo., Day, Year) 06/07/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25.00 \$275.00 Amount of each receipt this period
□Other (please specify) Full Name James W. Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code Madison, MS 39110-7494 Name of Employer (Required) Bradley Arant Boult Cummings LLP Occupation (Required) Attorney Source: □Corporation □Other (please specify) Full Name Marilyn Vandemark Mailing Address 412 Highpoint Dr City, State, Zip Code Diamondhead, MS 39525-3719 Name of Employer (Required)	(Mo., Day, Year) 06/07/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25.00 \$275.00 Amount of each receipt this period
□Other (please specify) Full Name James W. Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code Madison, MS 39110-7494 Name of Employer (Required) Bradley Arant Boult Cummings LLP Occupation (Required) Attorney Source: □Corporation □Other (please specify) Full Name Marilyn Vandemark Mailing Address 412 Highpoint Dr City, State, Zip Code Diamondhead, MS 39525-3719	(Mo., Day, Year) 06/07/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25.00 \$275.00 Amount of each receipt this period

Name of Candidate or Committee Br	randon	Presley
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Source:	□Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Colen	an	06/30/2023	\$50.00
Mailing Addre	ess Creek Dr		
City, State, Zi			
Name of Emp Not Emplo	loyer (Required) yed		
Occupation (I Not Emplo		Aggregate year-to-date	\$285.00
Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael F	arris Smith	06/30/2023	\$500.00
Mailing Addre			
City, State, Zi Oxford, M	p Code IS 38655-5178		
Name of Emp Self Empl	loyer (Required) .oyed		
Occupation (I Writer	Required)	Aggregate year-to-date	\$655.00
Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Grah	lam	06/16/2023	\$250.00
Mailing Addre			
City, State, Zi Oxford, M	p Code IS 38655-8559		
Name of Emp Not Emplo	loyer (Required) byed		
Occupation (I Not Emplo		Aggregate year-to-date	\$450.00
Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Staci Mor	gan	06/07/2023	\$100.00
Mailing Addre			
City, State, Zi Weir, MS	p Code	-	
Name of Emp	11116	1	
Self Empl	loyer (Required)		
Occupation (I	loyer (Required) .oyed	Aggregate year-to-date	\$968.40

Name of Can	didate or	Committee	Brandon	Presley
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Reporting Period6/1/2023through6/30/2023

ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Samuel Begley	06/29/2023	\$100.00
Mailing Address 255 Eastbrooke St	-	
City, State, Zip Code Jackson, MS 39216-4716		
Name of Employer (Required) Begley Law Firm		
Occupation (Required) Attorney	Aggregate year-to-date	\$350.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Foshee	06/30/2023	\$10.00
Mailing Address Not Employed	-	
City, State, Zip Code Hattiesburg, MS 39402		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$383.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William R. Wheeler Jr	06/30/2023	\$1,000.00
Mailing Address 1700 Jefferson Ave		
City, State, Zip Code Oxford, MS 38655-3722		
Name of Employer (Required) Wheeler and Franks Law Firm PC		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this
Other (please specify)	(- , - , - , - , - ,	period
Full Name Wilson Golden	06/15/2023	\$100.00
Full Name		-
Full Name Wilson Golden Mailing Address		-
Full Name Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code		-
Full Name Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required)		-

Name of Candidate or Committee Bra	andon Presie	У
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Amount of each receipt this period

\$25.00

\$300.00

\$500.00

Amount of each

receipt this

period

Name of Candidate or Committee Brandon Presley					Р	ag
Reporting Period	6/1/2023	through		6/30/2023		
		ITEMIZ	ED F	RECEIP	ΓS	
Source: Corporation	n PAC se specify)	✓ Individual	Loar)	Date (Mo., Day, Year)	
Full Name Pam Mottley					06/25/2023	
Mailing Address 1810 Fuller St						
City, State, Zip Code Hattiesburg, MS 394	01-7548					
Name of Employer (Required) Not Employed						
Occupation (Required) Not Employed					Aggregate year-to-date	
Source: Corporation	n PAC se specify)	✓ Individual	Loar	1	Date (Mo., Day, Year)	
Full Name Jerutha Steptoe					06/26/2023	
Mailing Address PO Box 1906						
City, State, Zip Code Ridgeland, MS 39158	-1906					
Name of Employer (Required)						

Mailing Address PO Box 1906		
City, State, Zip Code Ridgeland, MS 39158-1906		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Matthew Kisber	06/29/2023	\$1,000.00
Mailing Address 5113 Annesway Dr		
City, State, Zip Code Nashville, TN 37205-2715		
Name of Employer (Required) Silicon Ranch Corp		
Occupation (Required) Chairman	Aggregate year-to-date	\$2,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alma Walls	06/29/2023	\$100.00
Mailing Address 3887 Kenton Dr		
City, State, Zip Code Southaven, MS 38672-7225		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$925.00

Name of Candidate or Committee	Brandon	Presley
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Source:	Corporation	PAC fy)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret	Thomas				06/20/2023	\$20.00
Mailing Addre						
City, State, Zi	o Code					
	rg, MS 39401-820	09				
Name of Emp Not Emplo	loyer (Required) yed					
Occupation (FNOT Emplo					Aggregate year-to-date	\$362.00
Source:	Corporation	PAC fy)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrea Ha	tfield				06/30/2023	\$250.00
Mailing Addre 3509 34th						
City, State, Zi Washingto	o Code n, DC 20008-3204	4				
	loyer (Required) n Fine Propertie	es				
Occupation (F Real Esta					Aggregate year-to-date	\$750.00
Source:	Corporation	PAC fy)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Vara Lyon	.S				06/23/2023	\$250.00
Mailing Addre	SS					
120 Distr						
City, State, Zi Jackson,	S Code MS 39211-6079					
	oyer (Required) Simmons & Brown					
Occupation (F Attorney	Required)				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please speci	fy)			(Mo., Day, Year)	period
Full Name Mittie R.	Field				06/16/2023	\$5.00
Mailing Addre PO Box 19	~~					
City, State, Zi Madison,	26 D Code					
Madison, Name of Emp	26 o Code MS 39130-1926 loyer (Required)					
Madison,	26 o Code MS 39130-1926 oyer (Required) Malouf				Aggregate year-to-date	\$255.00

Name of Candidate	or Committee	Brandon	Presley
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ITEMIZED RECEIF	PTS
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Source:	Corporation	PAC 🖌 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Lyr	nch			06/26/2023	\$100.00
Mailing Addro 617 Camel					
City, State, Zi Brandon ,	p Code MS 39047-6316				
Name of Emp Not Emplo	loyer (Required) byed				
Occupation (Retired	Required)			Aggregate year-to-date	\$425.00
Source:	Corporation	PAC V Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Juanita B	Boutin			06/07/2023	\$50.00
Mailing Addre PO Box 40					
City, State, Zi Oxford, M	p Code 1S 38655-0400				
Name of Emp Not Emplo	loyer (Required) byed				
Occupation (Aggregate year-to-date	\$500.00
Source:	Corporation	PAC 🗸 Individual	Loan	Date	Amount of each
	Other (please specify)			(Mo., Day, Year)	receipt this period
Full Name Linda Fos				(Mo., Day, Year) 06/27/2023	
Linda Fos Mailing Addre	shee				period
Linda Fos Mailing Addre Not Emplo City, State, Zi	shee ess oyed				period
Linda Fos Mailing Addro Not Emplo City, State, Zi Hattiesbu	shee ess byed p Code arg, MS 39402 loyer (Required)				period
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emp	shee ess pyed p Code arg, MS 39402 loyer (Required) pyed Required)				period
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (shee ess oyed p Code arg, MS 39402 loyer (Required) oyed Required) oyed]PAC ☑Individual		06/27/2023 Aggregate year-to-date Date	period \$30.00
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emplo Occupation (Not Emplo Source:	shee ess pyed p Code arg, MS 39402 loyer (Required) pyed Required) pyed]PAC ☑Individual		06/27/2023 Aggregate year-to-date	period \$30.00 \$383.00 Amount of each
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emplo Occupation (Not Emplo	shee ess byed p Code arg, MS 39402 doyer (Required) byed Required) byed Corporation]PAC ☑Individual		06/27/2023 Aggregate year-to-date Date	period \$30.00 \$383.00 Amount of each receipt this
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emplo Occupation (Not Emplo Source: Full Name	shee ess byed p Code arg, MS 39402 loyer (Required) byed Corporation [Other (please specify) shee ess]PAC ☑Individual		06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$30.00 \$383.00 Amount of each receipt this period
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emplo Occupation (Not Emplo Source: Full Name Linda Fos Mailing Addre Not Emplo City, State, Zi	shee ess oyed p Code arg, MS 39402 loyer (Required) oyed Required) oyed Corporation]PAC ☑Individual		06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$30.00 \$383.00 Amount of each receipt this period
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emplo Occupation (Not Emplo Source: Full Name Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu	shee ss byed p Code arg, MS 39402 byed Required) byed Corporation Other (please specify) shee ss byed p Code arg, MS 39402 byed loger (Required)]PAC ☑Individual		06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$30.00 \$383.00 Amount of each receipt this period
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (Not Emplo Source: Full Name Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu	shee shee ss byed p Code arg, MS 39402 byed Required) byed Corporation Corporation Other (please specify) shee ss byed p Code arg, MS 39402 byed Required) byed Required shee ss byed Required byed Required corporation Corpora]PAC ☑Individual		06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$30.00 \$383.00 Amount of each receipt this period

Name of Can	didate or	Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles J. Williams	06/30/2023	\$1,250.00
Mailing Address 305 Market St	_	
City, State, Zip Code Water Valley, MS 38965-2011		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Teacher	Aggregate year-to-date	\$1,330.60
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles R. Wilson	06/14/2023	\$50.00
Mailing Address 114 Leighton Rd		
City, State, Zip Code Oxford, MS 38655-2010		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jacqueline Scott	06/26/2023	\$100.00
No. 11 and Additional	-	
Mailing Address 12025 Springridge Rd		
•	_	
12025 Springridge Rd City, State, Zip Code	_	
12025 Springridge Rd City, State, Zip Code Terry, MS 39170-8105 Name of Employer (Required)	Aggregate year-to-date	\$210.00
12025 Springridge Rd City, State, Zip Code Terry, MS 39170-8105 Name of Employer (Required) Erimax Occupation (Required)		Amount of each receipt this
12025 Springridge Rd City, State, Zip Code Terry, MS 39170-8105 Name of Employer (Required) Erimax Occupation (Required) Business Owner Source: Corporation PAC Individual Loan Other (please specify) Full Name	year-to-date Date	Amount of each
12025 Springridge Rd City, State, Zip Code Terry, MS 39170-8105 Name of Employer (Required) Erimax Occupation (Required) Business Owner Source: Corporation PAC Individual Loan Other (please specify) Full Name Greg Ward Mailing Address	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
12025 Springridge Rd City, State, Zip Code Terry, MS 39170-8105 Name of Employer (Required) Erimax Occupation (Required) Business Owner Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name Greg Ward Mailing Address 670 Highway 4 W City, State, Zip Code	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
12025 Springridge Rd City, State, Zip Code Terry, MS 39170-8105 Name of Employer (Required) Erimax Occupation (Required) Business Owner Source: □Corporation □PAC ☑Individual □Loan □Other (please specify) Full Name Greg Ward Mailing Address 670 Highway 4 W City, State, Zip Code Ripley, MS 38663-8002 Name of Employer (Required)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
12025 Springridge Rd City, State, Zip Code Terry, MS 39170-8105 Name of Employer (Required) Erimax Occupation (Required) Business Owner Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name Greg Ward Mailing Address 670 Highway 4 W City, State, Zip Code Ripley, MS 38663-8002	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Br	andon Pr	esley
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Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kenneth G	froue				06/30/2023	\$25.00
Mailing Addre						
City, State, Zi					-	
Ocean Spr	ings, MS 39564-	5145				
Name of Emplo	loyer (Required) byed					
Occupation (F Not Emplo					Aggregate year-to-date	\$525.00
Source:	Corporation		Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name		<u> </u>			06/25/2023	period \$1,250.00
George Sc						
Mailing Addre 3630 King						
City, State, Zij Jackson,	p Code MS 39216-3321					
Name of Emplo	loyer (Required) byed					
Occupation (F Not Emplo	Required)				Aggregate year-to-date	\$8,850.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
					(Mo., Day, Year)	receipt this
	Other (please spec	(ify)			(, 2 ay, 10 a.)	period
Full Name Ronald Un		ciry)			06/07/2023	period \$5.00
Ronald Un Mailing Addre	12	city)				·
Ronald Un	nz ess ght Rd	ыту) <u></u>				·
Ronald Un Mailing Addre 2535 Wrig City, State, Zij	nz ess ght Rd	ыту) <u></u>				·
Ronald Un Mailing Addre 2535 Wrig City, State, Zi Steens, M Name of Emp	nz ess ght Rd p Code					·
Ronald Un Mailing Addre 2535 Wrig City, State, Zi Steens, M Name of Emp	nz ess ght Rd p Code IS 39766-9129 loyer (Required) opi State Univer Required)					·
Ronald Un Mailing Addre 2535 Wrig City, State, Zij Steens, M Name of Emp Mississip Occupation (F	nz ess ght Rd p Code IS 39766-9129 loyer (Required) opi State Univer Required)		 ✓ Individual	Loan	Aggregate year-to-date Date	\$5.00 \$220.00 Amount of each
Ronald Un Mailing Addre 2535 Wrig City, State, Zij Steens, M Name of Emp Mississip Occupation (F Scientist	nz ess ght Rd p Code IS 39766-9129 loyer (Required) opi State Univer Required)	 PAC	✓ Individual	Loan	06/07/2023 Aggregate year-to-date	\$5.00
Ronald Un Mailing Addre 2535 Wrig City, State, Zij Steens, M Name of Emp Mississip Occupation (F Scientist Source: Full Name	nz ess ght Rd p Code IS 39766-9129 loyer (Required) opi State Univer Required)	 PAC	✓ Individual	Loan	Aggregate year-to-date Date	\$5.00 \$220.00 Amount of each receipt this
Ronald Un Mailing Addre 2535 Wrig City, State, Zij Steens, M Name of Emp Mississip Occupation (F Scientist Source: Full Name Leonard A Mailing Addre	az ess ght Rd p Code IS 39766-9129 loyer (Required) opi State Univer Required) Corporation Other (please spec A. Blackwell II	 PAC	✓ Individual	Loan	Aggregate year-to-date (Mo., Day, Year)	\$5.00 \$220.00 Amount of each receipt this period
Ronald Un Mailing Addre 2535 Wrig City, State, Zi Steens, M Name of Emp Mississip Occupation (F Scientist Source: Full Name Leonard A	az ess ght Rd p Code IS 39766-9129 loyer (Required) opi State Univer Required) Corporation Other (please spect A. Blackwell II ess craine Rd	 PAC	✓ Individual	Loan	Aggregate year-to-date (Mo., Day, Year)	\$5.00 \$220.00 Amount of each receipt this period
Ronald Un Mailing Addre 2535 Wrig City, State, Zij Steens, M Name of Emp Mississip Occupation (F Scientist Source: Full Name Leonard A Mailing Addre 11867 Lor City, State, Zij	az ess ght Rd p Code IS 39766-9129 loyer (Required) opi State Univer Required) Corporation Other (please spect A. Blackwell II ess craine Rd	 PAC	✓ Individual	Loan	Aggregate year-to-date (Mo., Day, Year)	\$5.00 \$220.00 Amount of each receipt this period
Ronald Un Mailing Addre 2535 Wrig City, State, Zij Steens, M Name of Emp Mississip Occupation (F Scientist Source: Full Name Leonard A Mailing Addre 11867 Lor City, State, Zij Gulfport,	AZ AZ AZ AZ AZ AZ AZ AZ AZ AZ	 PAC	✓ Individual	Loan	Aggregate year-to-date (Mo., Day, Year)	\$5.00 \$220.00 Amount of each receipt this period
Ronald Un Mailing Addre 2535 Wrig City, State, Zi Steens, M Name of Emp Mississip Occupation (F Scientist Source: Full Name Leonard A Mailing Addre 11867 Lor City, State, Zi Gulfport, Name of Emp	AZ AZ AZ AZ AZ AZ AZ AZ AZ AZ	 PAC	✓ Individual		Aggregate year-to-date (Mo., Day, Year)	\$5.00 \$220.00 Amount of each receipt this period

Name of Candidate of	r Committee	Brandon	Presley
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ITEM	117FD	RECEIP	ΓS

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Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Meg Siner	rvo				06/20/2023	\$100.00
Mailing Addre						
City, State, Zi Oxford, M	p Code					
-	loyer (Required)					
Occupation (I Executive	Required) e Director				Aggregate year-to-date	\$316.75
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cindy Bro	own				06/11/2023	\$50.00
Mailing Addre 219 Carol	ess					
City, State, Zi Oxford, M	p Code 15 38655-3403					
Name of Emp Not Emplo	loyer (Required) byed					
Occupation (I					Aggregate year-to-date	\$400.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert M.	. Pugh				06/11/2023	\$25.00
Mailing Addre	ess cestone Rd					
City, State, Zi						
	loyer (Required)					
Occupation (INOT Emplo					Aggregate year-to-date	\$375.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeanne A.	. Marszalek				06/16/2023	\$200.00
Mailing Addre	ess l Ridge Rd					
City, State, Zi	_	112				
	loyer (Required)					
Occupation (I					Aggregate year-to-date	\$400.00
					-	

Name of Can	didate or	Committee	Brandon	Presley
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ITEMI	ZED	RECE	IPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janet D. Kennedy	06/28/2023	\$400.00
Mailing Address 158 Pleasant Grove Dr		
City, State, Zip Code Brandon, MS 39042-2617		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joel Brunt	06/29/2023	\$1,000.00
Mailing Address 5130 Arthur St		
City, State, Zip Code Moss Point, MS 39563-2706		
Name of Employer (Required) Ochsner		
Occupation (Required) Medical Doctor	Aggregate year-to-date	\$2,500.00
Source: Corporation PAC Individual Loan	Date	Amount of each receipt this
Other (please specify)	(Mo., Day, Year)	period
Full Name Monie Henderson	06/30/2023	
Full Name	-	period
Full Name Monie Henderson Mailing Address	-	period
Full Name Monie Henderson Mailing Address 3845 Majestic Oaks Dr City, State, Zip Code	-	period
Full Name Monie Henderson Mailing Address 3845 Majestic Oaks Dr City, State, Zip Code Oxford, MS 38655-8153 Name of Employer (Required)	-	period
Full Name Monie Henderson Mailing Address 3845 Majestic Oaks Dr City, State, Zip Code Oxford, MS 38655-8153 Name of Employer (Required) Square Books Jr. Occupation (Required)	06/30/2023	period \$500.00
Full Name Monie Henderson Mailing Address 3845 Majestic Oaks Dr City, State, Zip Code Oxford, MS 38655-8153 Name of Employer (Required) Square Books Jr. Occupation (Required) Bookseller Source: Corporation	Aggregate year-to-date	period \$500.00 \$900.00 Amount of each receipt this
Full Name Monie Henderson Mailing Address 3845 Majestic Oaks Dr City, State, Zip Code Oxford, MS 38655-8153 Name of Employer (Required) Square Books Jr. Occupation (Required) Bookseller Source: Corporation Other (please specify) Full Name Trey Jarrard Mailing Address	 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$500.00 \$900.00 Amount of each receipt this period
Full Name Monie Henderson Mailing Address 3845 Majestic Oaks Dr City, State, Zip Code Oxford, MS 38655-8153 Name of Employer (Required) Square Books Jr. Occupation (Required) Bookseller Source: Corporation Other (please specify) Full Name Trey Jarrard Mailing Address 1425 Mayson St NE City, State, Zip Code	 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$500.00 \$900.00 Amount of each receipt this period
Full Name Monie Henderson Mailing Address 3845 Majestic Oaks Dr City, State, Zip Code Oxford, MS 38655-8153 Name of Employer (Required) Square Books Jr. Occupation (Required) Bookseller Source: Corporation Other (please specify) Full Name Trey Jarrard Mailing Address 1425 Mayson St NE City, State, Zip Code Atlanta, GA 30324-3903 Name of Employer (Required)	 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$500.00 \$900.00 Amount of each receipt this period
Full Name Monie Henderson Mailing Address 3845 Majestic Oaks Dr City, State, Zip Code Oxford, MS 38655-8153 Name of Employer (Required) Square Books Jr. Occupation (Required) Bookseller Source: Corporation Other (please specify) Full Name Trey Jarrard Mailing Address 1425 Mayson St NE City, State, Zip Code Atlanta, GA 30324-3903	 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$500.00 \$900.00 Amount of each receipt this period

Name of	Candidate or	Committee	Brandon	Presley
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Not Employed Occupation (Required)

Retired

Amount of each receipt this

period

\$900.00

\$900.00

\$50.00

Amount of each

receipt this

period

Reporting Period	6/1/2023	through	6/30
Reporting Forloa	0, 1, 2020	unougn	0,00

Reporting Period	6/1/2023	through	l	6/30/2023		
		ITEMIZ	ED I	RECEIP	ГS	
	(please specify)	Individual	Loa	n	Date (Mo., Day, Year)	
Full Name Gore Kilpatrick	Gambino PLLC				06/26/2023	
Mailing Address 2000 Gateway St						
City, State, Zip Code Grenada, MS 3890)1-2842					
Name of Employer (Requ	uired)					
Occupation (Required)					Aggregate year-to-date	
	ration PAC (please specify)	✓ Individual	Loa	n	Date (Mo., Day, Year)	
Full Name Nan Tarlton					06/27/2023	
Marilia a Aslala a a						1

Full Name
Nan Tarlton
Mailing Address
210 Meadowlane Dr
City, State, Zip Code
Madison, MS 39110-9611
Name of Employer (Required)
Not Employed
Occupation (Required)

Occupation (Required) Not Employed	Aggregate year-to-date	\$725.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gail Hester	06/29/2023	\$25.00
Mailing Address 470 Fairway Dr		
City, State, Zip Code New Orleans, LA 70124-1023		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paramjit Grewal	06/30/2023	\$1,250.00
Mailing Address 18 Copperfield Way		
City, State, Zip Code Mahwah, NJ 07430-3200		
Name of Employer (Required)		

Aggregate

year-to-date

\$1,250.00

Name of Candidate or	Committee	Brandon	Presley
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Source:	Corporation PAC	: 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coler	nan			06/05/2023	\$25.00
Mailing Addr	ess Creek Dr				
City, State, Z					
-	IS 38655-6108				
Name of Emplo	loyer (Required) byed				
Occupation (Not Emplo				Aggregate year-to-date	\$285.00
Source:	Corporation PAC	Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Helen Boo	one			06/25/2023	\$100.00
Mailing Addr 3726 Crai					
City, State, Z Jackson,	p Code MS 39216-3605				
Name of Emp Not Emplo	loyer (Required) byed				
Occupation (Not Emplo				Aggregate year-to-date	\$747.45
Source:	Corporation PAC	Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karı	лу			06/16/2023	\$15.00
Mailing Addr 6230 Wils					
City, State, Z Los Ange	p Code				
Los Ange Name of Emp	p Code .es, CA 90048-5126 loyer (Required)				
Los Ange Name of Emp Self Emp Occupation (p Code .es, CA 90048-5126 loyer (Required) .oyed			Aggregate year-to-date	\$252.00
Los Ange Name of Emp Self Emp Occupation (p Code .es, CA 90048-5126 loyer (Required) .oyed Required)	: 🗹 Individual	Loan		Amount of each receipt this
Los Ange Name of Emp Self Emp Occupation (Clinical	p Code .es, CA 90048-5126 loyer (Required) .oyed Required) Social Worker Corporation PAC	: 🗸 Individual	Loan	year-to-date Date	Amount of each
Los Ange Name of Emp Self Emp Occupation (Clinical Source: Full Name	p Code .es, CA 90048-5126 loyer (Required) .oyed Required) Social Worker Corporation PAC Other (please specify) Eaton	: 🗹 Individual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Los Ange Name of Emp Self Emp Occupation (Clinical Source: Full Name Blaine B Mailing Addr 503 Gamb City, State, Z	p Code .es, CA 90048-5126 loyer (Required) .oyed Required) Social Worker Corporation PAC Other (please specify) Eaton Eaton	: 🗹 Individual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Los Ange Name of Emp Self Emp Occupation (Clinical Source: Full Name Blaine B Mailing Addr 503 Gambr City, State, Z Taylorsv Name of Emp	p Code .es, CA 90048-5126 loyer (Required) .oyed Required) Social Worker Corporation PAC Other (please specify) Eaton ess rell St p Code		Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Los Ange Name of Emp Self Emp Occupation (Clinical Source: Full Name Blaine B Mailing Addr 503 Gambr City, State, Z Taylorsv Name of Emp	p Code .es, CA 90048-5126 loyer (Required) .oyed Required) Social Worker Corporation PAC Other (please specify) Eaton ess cell St p Code .lle, MS 39168-4284 loyer (Required) Pine Electric Coopera		Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Can	didate or	Committee	Brandon	Presley
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RECEIPTS
RECEIPIS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas Wooldridge	06/16/2023	\$1,000.00
Mailing Address 1848 Northwood Dr		
City, State, Zip Code Tupelo, MS 38804-1047		
Name of Employer (Required)		
Nephrology & Hypertension Associates		
Occupation (Required) Physician	Aggregate year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Glenda Glover	06/27/2023	\$1,000.00
Mailing Address 3500 John A Merritt Blvd		
City, State, Zip Code Nashville, TN 37209-1500		
Name of Employer (Required) Tennessee State University		
Occupation (Required) President	Aggregate year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patrick Falkner	06/18/2023	\$100.00
Patrick Falkner Mailing Address	06/18/2023	\$100.00
Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code	06/18/2023	\$100.00
Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required)	06/18/2023	\$100.00
Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Not Employed		
Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required)	06/18/2023 Aggregate year-to-date	\$100.00 \$600.00
Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Not Employed Occupation (Required) Retired Source: Corporation PAC VIndividual Loan	Aggregate year-to-date Date	\$600.00 Amount of each receipt this
Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Not Employed Occupation (Required) Retired Source: Corporation PAC Individual Loan Other (please specify)	Aggregate year-to-date Date (Mo., Day, Year)	\$600.00 Amount of each receipt this period
Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Not Employed Occupation (Required) Retired Source: Corporation PAC VIndividual Loan	Aggregate year-to-date Date	\$600.00 Amount of each receipt this
Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Not Employed Occupation (Required) Retired Source: Corporation PAC VIndividual Loan Other (please specify) Full Name	Aggregate year-to-date Date (Mo., Day, Year)	\$600.00 Amount of each receipt this period
Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Not Employed Occupation (Required) Retired Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name Jim Schott Mailing Address 9 E Hill Dr City, State, Zip Code	Aggregate year-to-date Date (Mo., Day, Year)	\$600.00 Amount of each receipt this period
Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Not Employed Occupation (Required) Retired Source: Corporation PAC Individual Loan Other (please specify) Full Name Jim Schott Mailing Address 9 E Hill Dr City, State, Zip Code Jackson, MS 39216-3622	Aggregate year-to-date Date (Mo., Day, Year)	\$600.00 Amount of each receipt this period
Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Not Employed Occupation (Required) Retired Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name Jim Schott Mailing Address 9 E Hill Dr City, State, Zip Code	Aggregate year-to-date Date (Mo., Day, Year)	\$600.00 Amount of each receipt this period
Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Not Employed Occupation (Required) Retired Source: Corporation PAC Individual Loan Other (please specify) Full Name Jim Schott Mailing Address 9 E Hill Dr City, State, Zip Code Jackson, MS 39216-3622 Name of Employer (Required)	Aggregate year-to-date Date (Mo., Day, Year)	\$600.00 Amount of each receipt this period

Name of Candidate of	r Committee	Brandon	Presley
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Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Sul	livan			06/28/2023	\$250.00
Mailing Addre					
City, State, Zi	p Code				
	IS 38655-9566				
Name of Emp	loyer (Required) byed				
Occupation (I Not Emplo				Aggregate year-to-date	\$1,250.00
Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Geog	hegan			06/03/2023	\$150.00
Mailing Addre 227 Green					
City, State, Zi Brandon ,	p Code MS 39047-9007				
Name of Emp Not Emplo	loyer (Required) byed				
Occupation (I Retired	Required)			Aggregate year-to-date	\$500.00
Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name				06/03/2023	\$2,500.00
Full Name R. L. Lyl Mailing Addre	.e			06/03/2023	\$2,500.00
R. L. Lyl Mailing Addre PO Box 56	e ess i0			06/03/2023	\$2,500.00
R. L. Ly] Mailing Addre PO Box 56 City, State, Zi	e ess i0 p Code			06/03/2023	\$2,500.00
R. L. Lyl Mailing Addre PO Box 56 City, State, Zi Morton, M Name of Emp	e ess i0			06/03/2023	\$2,500.00
R. L. Lyl Mailing Addre PO Box 56 City, State, Zi Morton, M Name of Emp	e ess 50 p Code IS 39117-0560 loyer (Required) podlands Group LLC			06/03/2023 Aggregate year-to-date	\$2,500.00 \$2,500.00
R. L. Lyl Mailing Addre PO Box 56 City, State, Zi Morton, M Name of Emp Molpus Wo Occupation (H	e ess 50 p Code 1S 39117-0560 loyer (Required) bodlands Group LLC Required)	PAC VIndividual	Loan	Aggregate year-to-date Date	\$2,500.00 Amount of each receipt this
R. L. Lyl Mailing Addre PO Box 56 City, State, Zi Morton, M Name of Emp Molpus Wo Occupation (f Director Source:	e ess 50 p Code IS 39117-0560 loyer (Required) bodlands Group LLC Required)	PAC VIndividual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$2,500.00 Amount of each receipt this period
R. L. Lyl Mailing Addre PO Box 56 City, State, Zi Morton, M Name of Emp Molpus Wc Occupation (I Director	eeeess 50 p Code IS 39117-0560 loyer (Required) bodlands Group LLC Required) Corporation	PAC 🔽 Individual	Loan	Aggregate year-to-date Date	\$2,500.00 Amount of each receipt this
R. L. Lyl Mailing Addre PO Box 56 City, State, Zi Morton, M Name of Emp Molpus Wc Occupation (f Director Source: Full Name	e ess i0 p Code IS 39117-0560 loyer (Required) bodlands Group LLC Required) Corporation	PAC 🔽 Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$2,500.00 Amount of each receipt this period
R. L. Lyl Mailing Addre PO Box 56 City, State, Zi Morton, M Name of Emp Molpus Wo Occupation (f Director Source: Full Name Johnny L. Mailing Addre PO Box 57 City, State, Zi	e ess 60 p Code IS 39117-0560 loyer (Required) bodlands Group LLC Required) Corporation	PAC	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$2,500.00 Amount of each receipt this period
R. L. Lyl Mailing Addre PO Box 56 City, State, Zi Morton, M Name of Emp Molpus Wo Occupation (I Director Source: Full Name Johnny L. Mailing Addre PO Box 57 City, State, Zi Hattiesbu	e ess i0 p Code IS 39117-0560 loyer (Required) bodlands Group LLC Required) Corporation 1 Other (please specify) _ Dupree ess '4 p Code	PAC 🔽 Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$2,500.00 Amount of each receipt this period
R. L. Lyl Mailing Addre PO Box 56 City, State, Zi Morton, M Name of Emp Molpus Wc Occupation (I Director Source: Full Name Johnny L. Mailing Addre PO Box 57 City, State, Zi Hattiesbu	e ess 50 p Code 1S 39117-0560 loyer (Required) bodlands Group LLC Required) Corporation Corporation Other (please specify) _ Dupree ess 4 p Code erg, MS 39403-0574 loyer (Required) epree for Congress Required)	PAC Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$2,500.00 Amount of each receipt this period

Name of Candidate or	Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alicia Margolis	06/26/2023	\$100.00
Mailing Address 1474 Dover Rd		
City, State, Zip Code Bentonia, MS 39040-9162		
Name of Employer (Required) Bradley Arant Boult Cummings LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$450.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Ballard	06/26/2023	\$5.00
Mailing Address 142 Road 598		
City, State, Zip Code Plantersville, MS 38862-4901		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$240.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this
		period
Full Name Juanita Boutin	06/07/2023	\$25.00
	06/07/2023	·
Juanita Boutin Mailing Address	06/07/2023	·
Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code	06/07/2023	·
Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code Oxford, MS 38655-0400 Name of Employer (Required)	Aggregate year-to-date	·
Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code Oxford, MS 38655-0400 Name of Employer (Required) Not Employed Occupation (Required)	Aggregate	\$25.00
Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code Oxford, MS 38655-0400 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan	Aggregate year-to-date Date	\$25.00 \$500.00 Amount of each receipt this
Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code Oxford, MS 38655-0400 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC VIndividual Loan Other (please specify) Full Name Peter Buttross Jr Mailing Address	Aggregate year-to-date Date (Mo., Day, Year)	\$25.00 \$500.00 Amount of each receipt this period
Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code Oxford, MS 38655-0400 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ☑Individual □Loan □Other (please specify) Full Name Peter Buttross Jr Mailing Address 206 S Rankin St City, State, Zip Code	Aggregate year-to-date Date (Mo., Day, Year)	\$25.00 \$500.00 Amount of each receipt this period
Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code Oxford, MS 38655-0400 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name Peter Buttross Jr Mailing Address 206 S Rankin St	Aggregate year-to-date Date (Mo., Day, Year)	\$25.00 \$500.00 Amount of each receipt this period
Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code Oxford, MS 38655-0400 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name Peter Buttross Jr Mailing Address 206 S Rankin St City, State, Zip Code Natchez, MS 39120-3536 Name of Employer (Required)	Aggregate year-to-date Date (Mo., Day, Year)	\$25.00 \$500.00 Amount of each receipt this period

Name of Candidate or Committee Bra	andon Pre	sley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sara Morris Schock	06/01/2023	\$1,000.00
Mailing Address 286 River Rd		
City, State, Zip Code	_	
Hattiesburg, MS 39401-8418		
Name of Employer (Required) Sakalarios, Blackwell & Schock		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilson Golden	06/22/2023	\$50.00
Mailing Address 3136 White Magnolia Chase SW		
City, State, Zip Code Gainesville, GA 30504-5587		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$935.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Raleigh Byars	(Mo., Day, Year)	
Full Name		period
Full Name Raleigh Byars Mailing Address		period
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code		period
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required)		period
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual	06/14/2023	period \$25.00 \$380.00 Amount of each receipt this
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Under (please specify) LLC	Aggregate year-to-date Date	period \$25.00 \$380.00 Amount of each
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual LLC Full Name Strat S.P.A. LLC Mailing Address	Aggregate year-to-date (Mo., Day, Year)	period \$25.00 \$380.00 Amount of each receipt this period
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Uther (please specify) LLC	Aggregate year-to-date (Mo., Day, Year)	period \$25.00 \$380.00 Amount of each receipt this period
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan VOther (please specify) LLC Full Name Strat S.P.A. LLC Mailing Address 3230 Dijon Ave	Aggregate year-to-date (Mo., Day, Year)	period \$25.00 \$380.00 Amount of each receipt this period
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan volter (please specify) LLC Full Name Strat S.P.A. LLC Mailing Address 3230 Dijon Ave City, State, Zip Code	Aggregate year-to-date (Mo., Day, Year)	period \$25.00 \$380.00 Amount of each receipt this period
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employed Occupation (Required) Not Employed Corporation □PAC □Individual □Loan ☑Other (please specify) LLC Full Name Strat S.P.A. LLC Mailing Address 3230 Dijon Ave City, State, Zip Code Ocean Springs, MS 39564-8520	Aggregate year-to-date (Mo., Day, Year)	period \$25.00 \$380.00 Amount of each receipt this period

Name of Candidate or Committee Br	andon Pr	esley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Larry Ward	06/29/2023	\$250.00
Mailing Address 4460 Clairmont Ave S		
City, State, Zip Code Birmingham, AL 35222-3756		
Name of Employer (Required) Raymond James Morgan Keegan		
Occupation (Required) Manager	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Lacavera	06/30/2023	\$50.00
Mailing Address 1459 Forbes Dr		
City, State, Zip Code Byram, MS 39272-9459		
Name of Employer (Required) Eastpointe		
Occupation (Required) Utilization Manager	Aggregate year-to-date	\$225.00
Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Ballard	06/30/2023	\$5.00
Mailing Address		
142 Road 598		
-		
142 Road 598 City, State, Zip Code		
142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required)	Aggregate year-to-date	\$240.00
142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed Occupation (Required)		\$240.00 Amount of each receipt this period
142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual	year-to-date Date	Amount of each receipt this
142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC VIndividual Loan Other (please specify) Full Name Joey Dumas Mailing Address	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name Joey Dumas Mailing Address 14239 Perdido Key Dr City, State, Zip Code	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name Joey Dumas Mailing Address 14239 Perdido Key Dr City, State, Zip Code Pensacola, FL 32507-5236 Name of Employer (Required)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of	Candidate or	Committee	Brandon	Presley
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Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Bry	ant-Angotti			06/04/2023	\$50.00
Mailing Addre					
City, State, Zi					
Name of Emp	oyer (Required) e University				
Occupation (F	• •			Aggregate year-to-date	\$235.00
Source:	Corporation	PAC 🖌 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lynn Dobb	s			06/24/2023	\$25.00
Mailing Addre	SS				
City, State, Zip Columbus,	DCode MS 39701-9619				
Name of Emp Not Emplo	oyer (Required) yed				
Occupation (F				Aggregate year-to-date	\$225.00
Source:		PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please specify)			(period
Full Name Emily Lil				06/15/2023	period \$25.00
Emily Lil Mailing Addre	es				•
Emily Lil Mailing Addre 6346 Nell City, State, Zi	es ss wood Dr				•
Emily Lil Mailing Addre 6346 Nell City, State, Zi Olive Bra	es wood Dr o Code nch, MS 38654-8253 loyer (Required)				•
Emily Lil Mailing Addre 6346 Nell City, State, Zi Olive Bra Name of Emp	es ss wood Dr o Code nch, MS 38654-8253 loyer (Required) yed Required)				•
Emily Lil Mailing Addre 6346 Nell City, State, Zi Olive Bra Name of Emp Not Emplo Occupation (F	es ss wood Dr o Code nch, MS 38654-8253 oyer (Required) yed Required) yed	PAC / Individual	Loan	06/15/2023 Aggregate	\$25.00
Emily Lil Mailing Addre 6346 Nell City, State, Zij Olive Bra Name of Emplo Occupation (F Not Emplo	es ss wood Dr o Code nch, MS 38654-8253 loyer (Required) yed Required) yed Corporation		Loan	06/15/2023 Aggregate year-to-date Date	\$25.00 \$225.00 Amount of each receipt this
Emily Lil Mailing Addre 6346 Nell City, State, Zij Olive Bra Name of Emp Not Emplo Occupation (F Not Emplo Source:	es es wood Dr o Code nch, MS 38654-8253 loyer (Required) yed Required) yed Corporation			Aggregate year-to-date Date (Mo., Day, Year)	\$25.00 \$225.00 Amount of each receipt this period
Emily Lil Mailing Addre 6346 Nell City, State, Zij Olive Bra Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name Jamie Amo Mailing Addre 2109 Ackl City, State, Zij	es es wood Dr code nch, MS 38654-8253 oyer (Required) yed Required) yed Corporation Other (please specify) s ess en Ave		Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$25.00 \$225.00 Amount of each receipt this period
Emily Lil Mailing Addre 6346 Nell City, State, Zij Olive Bra Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name Jamie Amo Mailing Addre 2109 Ackl City, State, Zij Nashville Name of Emp	es es wood Dr code nch, MS 38654-8253 oyer (Required) yed Required) yed Corporation Corporation Cother (please specify) s es en Ave coCode			Aggregate year-to-date Date (Mo., Day, Year)	\$25.00 \$225.00 Amount of each receipt this period
Emily Lil Mailing Addre 6346 Nell City, State, Zij Olive Bra Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name Jamie Amo Mailing Addre 2109 Ackl City, State, Zij Nashville Name of Emp	es wood Dr o Code nch, MS 38654-8253 loyer (Required) yed Required) yed Corporation Other (please specify) s ss en Ave o Code , TN 37212-3501 loyer (Required) ub Pictures			Aggregate year-to-date Date (Mo., Day, Year)	\$25.00 \$225.00 Amount of each receipt this period

Name of Candida	te or Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Billy Atwood	06/07/2023	\$100.00
Mailing Address 714 Old Brock Rd		
City, State, Zip Code Weatherford, TX 76088-8708		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$2,100.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jan F. Gadow	06/28/2023	\$100.00
Mailing Address 144 Brae Burn Dr		
City, State, Zip Code Jackson, MS 39211-2501		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gloria Williamson	06/29/2023	\$1,000.00
Mailing Address 521 Holland Ave		
City, State, Zip Code Philadelphia, MS 39350-2437		
Name of Employer (Required) Not Employed		
	Aggregate year-to-date	\$3,000.00
Not Employed Occupation (Required)		\$3,000.00 Amount of each receipt this period
Not Employed Occupation (Required) Retired Source: Corporation PAC VIndividual Loan	year-to-date Date	Amount of each receipt this
Not Employed Occupation (Required) Retired Source: Corporation PAC Individual Loan Other (please specify) Full Name	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Not Employed Occupation (Required) Retired Source: Corporation PAC Individual Loan Other (please specify) Full Name Robert Carroll Mailing Address 675 Beulah Grove Rd City, State, Zip Code	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Not Employed Occupation (Required) Retired Source: Corporation PAC Individual Loan Other (please specify) Full Name Robert Carroll Mailing Address 675 Beulah Grove Rd	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Not Employed Occupation (Required) Retired Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name Robert Carroll Mailing Address 675 Beulah Grove Rd City, State, Zip Code Pontotoc, MS 38863-7704 Name of Employer (Required)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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ITEMIZED RECEIPTS

Source:	□Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Merrye Ly	nn Brennan	06/02/2023	\$50.00
Mailing Addre	SS		
City, State, Zi Pass Chri	p Code stian, MS 39571-4844		
Name of Emp Not Emplo	loyer (Required) yed		
Occupation (F Retired	Required)	Aggregate year-to-date	\$250.00
Source:	□Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ray Johan	smeier	06/22/2023	\$250.00
Mailing Addre			
City, State, Zi Pass Chri	p Code stian, MS 39571-4613		
Name of Emp Not Emplo	loyer (Required) yed		
Occupation (F Retired	Required)	Aggregate year-to-date	\$250.00
Source:	□Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh B	yars	06/05/2023	\$25.00
Mailing Addre	r Road 229		
City, State, Zi	p Code IS 38655-5800		
Name of Emp Not Emplo	loyer (Required) yed		
Occupation (F Not Emplo		Aggregate year-to-date	\$380.00
Source:	□Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugene Br	amlett	06/16/2023	\$25.00
Mailing Addre	PSS		
City, State, Zi	p Code		
	MS 39701-5810 loyer (Required)		
Occupation (F Minister		Aggregate year-to-date	\$400.00

Name of Candidate or Committee Br	andon Pr	esley
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Source: Corporation PAC Individual Loan Date Amount of receipt Other (please specify)	
	\$25.00
Mailing Address 48 County Road 229	
City, State, Zip Code Oxford, MS 38655-5800	
Name of Employer (Required) Not Employed	
Occupation (Required) Aggregate year-to-date \$	380.00
Source: Corporation PAC Individual Loan Date Amount of receipt Other (please specify)	this
Full Name 06/28/2023 Marc Doyle 06/28/2023	\$25.00
Mailing Address 704 State St	
City, State, Zip Code Natchez, MS 39120-3543	
Name of Employer (Required) Not Employed	
Occupation (Required)Aggregate year-to-date\$Not Employedyear-to-date	350.00
	f each this
Not Employed year-to-date Source: Corporation Other (please specify) Date Full Name Component of the specify	f each this
Not Employed year-to-date Source: Corporation PAC Other (please specify) Date Full Name 06/29/2023 David Z. Scruggs \$1,	f each this d
Not Employed year-to-date Source: Corporation PAC Other (please specify) Date Full Name 06/29/2023 David Z. Scruggs \$1,	f each this d
Not Employed year-to-date Source: Corporation PAC Other (please specify) Date Full Name 06/29/2023 David Z. Scruggs 06/29/2023 Mailing Address 508 Fazio Drive Extended City, State, Zip Code City	f each this d
Not Employed year-to-date Source: Corporation PAC Other (please specify)	f each this d
Not Employed year-to-date Source: Corporation PAC Individual Loan Date Amount of receipt period Other (please specify)	f each this d 000.00 000.00 f each this
Not Employed year-to-date Source: Corporation PAC Individual Loan Date Amount of receipt period Other (please specify) Other (please specify) 06/29/2023 \$1, Full Name David Z. Scruggs 06/29/2023 \$1, Mailing Address 508 Fazio Drive Extended 06/29/2023 \$1, City, State, Zip Code Oxford, MS 38655-2771 Amount of Employer (Required) 2nd Chance MS, Inc Aggregate \$6, Occupation (Required) Executive Director Date Amount of receipt period Amount of receipt period Source: Corporation PAC VIndividual Loan Date Amount of receipt period Other (please specify) Evel Name Date Amount of receipt period	f each this d 000.00 000.00 f each this
Not Employed year-to-date Source: Corporation PAC Individual Loan Date Amount or receipt period Other (please specify) Full Name 06/29/2023 \$1, David Z. Scruggs 06/29/2023 \$1, Mailing Address 508 Fazio Drive Extended 06/29/2023 \$1, City, State, Zip Code Oxford, MS 38655-2771 Name of Employer (Required) And Chance MS, Inc Aggregate \$6, Occupation (Required) Executive Director Qate Amount or receipt period Amount or receipt period Source: Corporation PAC Individual Loan Date Amount or receipt period Source: Corporation PAC Individual Loan Date Amount or receipt period Full Name 06/29/2023 \$5 \$56, \$6, \$6, \$6, \$6,	f each this d 000.00 000.00 f each this d
Not Employed year-to-date Source: Corporation PAC Individual Loan Date Amount or receipt period Gother (please specify)	f each this d 000.00 000.00 f each this d
Not Employed year-to-date Source: Corporation PAC Individual Loan Date Amount or receipt period Gother (please specify)	f each this d 000.00 000.00 f each this d

Name of Candidate or Committee	Brandon	Presley
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Source:	Corporation		✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Emily Lil	les				06/30/2023	\$25.00
Mailing Addre						
City, State, Zi	ip Code					
	anch, MS 38654-	8253				
Name of Emp	bloyer (Required) byed					
Occupation (INOT Emplo					Aggregate year-to-date	\$225.00
Source:	Corporation		✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name	Other (please spe	ecity)			(mol, buy, rour)	period
Philip Mu	unger				06/30/2023	\$15,000.00
Mailing Addre 40 5th Av						
City, State, Zi New York,	ip Code , NY 10011-8843					
Name of Emp Self Empl	bloyer (Required) Loyed					
Occupation (I Investor	Required)				Aggregate year-to-date	\$15,000.00
Source:	Corporation	PAC	🗸 Individual	Loan	Date	Amount of each
						receipt this
	Other (please spe	ecify)			(Mo., Day, Year)	receipt this period
Full Name Reilly Mc		ecify)			(Mo., Day, Year)	
Reilly Mo Mailing Addre	orse	ecify)				period
Reilly Mo Mailing Addre 929 Bridg	orse ess ge St	ecify)				period
Reilly Mc Mailing Addre 929 Bridg City, State, Zi	orse ess ge St					period
Reilly Mo Mailing Addre 929 Bride City, State, Zi Gulfport, Name of Emp	orse ess ge St ip Code , MS 39507-3432 ployer (Required)					period
Reilly Mo Mailing Addre 929 Bridg City, State, Zi Gulfport,	orse ess ge St ip Code , MS 39507-3432 ployer (Required)				06/23/2023	period
Reilly Mo Mailing Addre 929 Bride City, State, Zi Gulfport, Name of Emp	orse ess ge St ip Code , MS 39507-3432 bloyer (Required) byed Required)					period
Reilly Mc Mailing Addre 929 Bridg City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (M	orse ess ge St ip Code , MS 39507-3432 bloyer (Required) byed Required)		✓Individual		06/23/2023 Aggregate year-to-date Date	period \$250.00 \$900.00 Amount of each
Reilly Mo Mailing Addre 929 Bridg City, State, Zi Gulfport, Name of Emplo Occupation (Not Emplo Source:	orse ess ge St ip Code , MS 39507-3432 bloyer (Required) byed Required) byed	PAC	✓Individual		06/23/2023 Aggregate year-to-date	period \$250.00 \$900.00
Reilly Mo Mailing Addre 929 Bridg City, State, Zi Gulfport, Name of Emplo Occupation (Not Emplo Source: Full Name	brse ess ge St ip Code , MS 39507-3432 bloyer (Required) byed Required) byed Corporation	PAC	✓ Individual	Loan	06/23/2023 Aggregate year-to-date Date	period \$250.00 \$900.00 Amount of each receipt this
Reilly Mo Mailing Addre 929 Bridg City, State, Zi Gulfport, Name of Emplo Occupation (Not Emplo Source: Full Name	orse ess ge St ip Code , MS 39507-3432 bloyer (Required) byed Required) byed Corporation Other (please spe 3. Thompson ess	PAC	✓ Individual	Loan	06/23/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$250.00 \$900.00 Amount of each receipt this period
Reilly Mo Mailing Addre 929 Bridg City, State, Zi Gulfport, Name of Emplo Occupation (Not Emplo Occupation (Not Emplo Source: Full Name William E Mailing Addre 4444 Wood City, State, Zi	brse ess ge St ip Code , MS 39507-3432 bloyer (Required) byed Required) byed Corporation Other (please spe 3. Thompson ess dlark Dr ip Code	PAC	✓Individual		06/23/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$250.00 \$900.00 Amount of each receipt this period
Reilly Mo Mailing Addre 929 Bridg City, State, Zi Gulfport, Name of Emplo Occupation (Not Emplo Source: Full Name William E Mailing Addre 4444 Wood City, State, Zi Jackson,	brse ess ge St ip Code , MS 39507-3432 bloyer (Required) byed Corporation Corporation Other (please spe 3. Thompson ess dlark Dr ip Code MS 39211-6226	PAC	✓ Individual		06/23/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$250.00 \$900.00 Amount of each receipt this period
Reilly Mo Mailing Addre 929 Bridg City, State, Zi Gulfport, Name of Emplo Occupation (Not Emplo Source: Full Name William E Mailing Addre 4444 Wood City, State, Zi Jackson,	brse ess ge St ip Code , MS 39507-3432 bloyer (Required) byed Corporation Other (please spe 3. Thompson ess dlark Dr ip Code MS 39211-6226 bloyer (Required)	PAC	✓ Individual		06/23/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$250.00 \$900.00 Amount of each receipt this period
Reilly Mo Mailing Addre 929 Bridg City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (Not Emplo Source: Full Name William E Mailing Addre 4444 Wood City, State, Zi Jackson, Name of Emp	brse ess ge St ip Code , MS 39507-3432 bloyer (Required) byed Corporation Corporation Other (please spe 3. Thompson ess dlark Dr ip Code MS 39211-6226 bloyer (Required) loyed Required)	PAC	✓ Individual		06/23/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$250.00 \$900.00 Amount of each receipt this period

Name of Candidate of	r Committee	Brandon	Presley
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ITEMIZED RECEIPTS

Source:	Corporation PAC Ind	vidual 🗌 Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William L	awhead		06/16/2023	\$10.00
Mailing Addre 718 S 8th				
City, State, Zi Oxford, M	Code S 38655-4306			
Name of Emp Not Emplo	oyer (Required) yed			
Occupation (F			Aggregate year-to-date	\$210.00
Source:	Corporation PAC Ind		Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard R	hoden		06/28/2023	\$25.00
Mailing Addre 778 Gille				
City, State, Zij Jackson ,	OCode MS 39202-1711			
Name of Emp Self Empl	oyer (Required) oyed			
Occupation (F Physician			Aggregate year-to-date	\$450.00
Source:	Corporation PAC Ind		Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda E.	McDaniel		06/30/2023	\$100.00
Mailing Addre	 SS			
City, State, Zi				
	briar Pl			
Hattiesbu	briar Pl Code rg, MS 39402-2532 oyer(Required)			
Hattiesbu Name of Emp	briar Pl code rg, MS 39402-2532 oyer (Required) yed Required)		Aggregate year-to-date	\$600.00
Hattiesbu Name of Emp Not Emplo Occupation (F	briar Pl code rg, MS 39402-2532 oyer (Required) yed Required)	vidual 🗌 Loan		\$600.00 Amount of each receipt this period
Hattiesbu Name of Emp Not Emplo Occupation (F Not Emplo	briar Pl o Code rg, MS 39402-2532 oyer (Required) yed tequired) yed Corporation PAC Ind Other (please specify)	vidual Doan	year-to-date Date	Amount of each receipt this
Hattiesbu Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name Neil W. W Mailing Addre	briar Pl code rg, MS 39402-2532 oyer (Required) yed Corporation PAC Ind Other (please specify) hite III ss	vidual 🗌 Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Hattiesbu Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name Neil W. W Mailing Addre 155 Count City, State, Zi	briar Pl code rg, MS 39402-2532 oyer (Required) yed cequired) yed Corporation PAC VInd Other (please specify) hite III ss y Road 418 code	vidual 🗌 Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Hattiesbu Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name Neil W. W Mailing Addre 155 Count City, State, Zi Oxford, M Name of Emp	briar Pl code rg, MS 39402-2532 oyer (Required) yed tequired) yed Corporation PAC Ind Other (please specify) hite III ss y Road 418	vidual 🗌 Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Hattiesbu Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name Neil W. W Mailing Addre 155 Count City, State, Zi Oxford, M Name of Emp	briar Pl code rg, MS 39402-2532 oyer (Required) yed cequired) yed Corporation PAC Ind Other (please specify) hite III ss y Road 418 o Code S 38655-6831 oyer (Required) Publishing cequired)	vidual Doan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate	or Committee	Brandon	Presley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melissa Scholes	06/22/2023	\$20.00
Mailing Address 2501 Lake Cir		
City, State, Zip Code Jackson, MS 39211-6625		
Name of Employer (Required) University of Mississippi Medical Center		
Occupation (Required) Physician	Aggregate year-to-date	\$370.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stanford Law Firm, PLLC	06/23/2023	\$250.00
Mailing Address 205 S Main St		
City, State, Zip Code Grenada, MS 38901-3213		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Felicia Brown-Williams	(Mo., Day, Year) 06/14/2023	
Full Name		period
Full Name Felicia Brown-Williams Mailing Address		period
Full Name Felicia Brown-Williams Mailing Address 4010 Council Cir City, State, Zip Code		period
Full Name Felicia Brown-Williams Mailing Address 4010 Council Cir City, State, Zip Code Jackson, MS 39206-5813 Name of Employer (Required)		period
Full Name Felicia Brown-Williams Mailing Address 4010 Council Cir City, State, Zip Code Jackson, MS 39206-5813 Name of Employer (Required) David & Lucile Packard Foundation Occupation (Required)	06/14/2023 Aggregate	period \$50.00
Full Name Felicia Brown-Williams Mailing Address 4010 Council Cir City, State, Zip Code Jackson, MS 39206-5813 Name of Employer (Required) David & Lucile Packard Foundation Occupation (Required) Advisor Source: Corporation PAC Individual	Aggregate year-to-date Date	period \$50.00 \$400.00 Amount of each receipt this
Full Name Felicia Brown-Williams Mailing Address 4010 Council Cir City, State, Zip Code Jackson, MS 39206-5813 Name of Employer (Required) David & Lucile Packard Foundation Occupation (Required) Advisor Source: Corporation PAC Individual Loan Other (please specify) Full Name Linda Foshee Mailing Address	Aggregate year-to-date (Mo., Day, Year)	period \$50.00 \$400.00 Amount of each receipt this period
Full Name Felicia Brown-Williams Mailing Address 4010 Council Cir City, State, Zip Code Jackson, MS 39206-5813 Name of Employer (Required) David & Lucile Packard Foundation Occupation (Required) Advisor Source: Corporation Other (please specify) Full Name Linda Foshee Mailing Address Not Employed City, State, Zip Code	Aggregate year-to-date (Mo., Day, Year)	period \$50.00 \$400.00 Amount of each receipt this period
Full Name Felicia Brown-Williams Mailing Address 4010 Council Cir City, State, Zip Code Jackson, MS 39206-5813 Name of Employer (Required) David & Lucile Packard Foundation Occupation (Required) Advisor Source: Corporation Other (please specify) Full Name Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required)	Aggregate year-to-date (Mo., Day, Year)	period \$50.00 \$400.00 Amount of each receipt this period
Full Name Felicia Brown-Williams Mailing Address 4010 Council Cir City, State, Zip Code Jackson, MS 39206-5813 Name of Employer (Required) David & Lucile Packard Foundation Occupation (Required) Advisor Source: Corporation Other (please specify) Full Name Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402	Aggregate year-to-date (Mo., Day, Year)	period \$50.00 \$400.00 Amount of each receipt this period

Name of Candida	te or Committee	Brandon	Presley
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Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George H.	Williams				06/16/2023	\$10.00
Mailing Addre						
City, State, Zig Ridgeland	p Code , MS 39157-3419	9				
Name of Emplo	loyer (Required) yed					
Occupation (F Retired	Required)				Aggregate year-to-date	\$480.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard M	. Douglass				06/27/2023	\$250.00
Mailing Addre						
City, State, Zip Pass Chri	o Code stian, MS 3957:	1-4844				
Name of Emplo	loyer (Required) yed					
Occupation (F Retired	Required)				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC [] PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Full Name David Bus	Other (please spe		✓ Individual	Loan		
Full Name	Other (please spe		✓ Individual	Loan	(Mo., Day, Year)	receipt this period
Full Name David Bus Mailing Addre 4607 Shar City, State, Zij	Other (please spe by man St		✓ Individual		(Mo., Day, Year)	receipt this period
Full Name David Bus Mailing Addre 4607 Shar City, State, Zij Houston, Name of Empl	Other (please spe by man St p Code		✓ Individual		(Mo., Day, Year)	receipt this period
Full Name David Bus Mailing Addre 4607 Shar City, State, Zij Houston, Name of Empl	Other (please spe by ess man St p Code TX 77009-3248 loyer (Required) .ancial Group		✓ Individual		(Mo., Day, Year)	receipt this period
Full Name David Bus Mailing Addre 4607 Shar City, State, Zig Houston, Name of Empl World Fin Occupation (F	Other (please spe by ess man St p Code TX 77009-3248 loyer (Required) .ancial Group	 cify)		Loan	(Mo., Day, Year) 06/30/2023 Aggregate	receipt this period \$100.00
Full Name David Bus Mailing Addre 4607 Shar City, State, Zig Houston, Name of Empl World Fin Occupation (F Agent	Other (please spe by ess man St p Code TX 77009-3248 loyer (Required) ancial Group Required) Corporation	 cify)			(Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date	receipt this period \$100.00 \$600.00 Amount of each receipt this
Full Name David Bus Mailing Addre 4607 Shar City, State, Zig Houston, Name of Empl World Fin Occupation (F Agent Source: Full Name Raleigh B Mailing Addre	Other (please spe by ess man St p Code TX 77009-3248 loyer (Required) ancial Group Required) Corporation Other (please spe	 cify)			(Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$100.00 \$600.00 Amount of each receipt this period
Full Name David Bus Mailing Addre 4607 Shar City, State, Zig Houston, Name of Empl World Fin Occupation (F Agent Source: Full Name Raleigh B Mailing Addre 48 County City, State, Zig	Other (please spe by ess man St p Code TX 77009-3248 loyer (Required) ancial Group Required) Corporation Other (please spe syars ess Road 229	 cify)			(Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$100.00 \$600.00 Amount of each receipt this period
Full Name David Bus Mailing Addre 4607 Shar City, State, Zij Houston, Name of Empl World Fin Occupation (F Agent Source: Full Name Raleigh B Mailing Addre 48 County City, State, Zij Oxford, M	<pre> Other (please spe Dy Dother (please spe Dy Dother (please spe TX 77009-3248 loyer (Required) ancial Group Required) Corporation Other (please spe Dyars Ss Road 229 p Code IS 38655-5800 loyer (Required) </pre>	 cify)			(Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$100.00 \$600.00 Amount of each receipt this period
Full Name David Bus Mailing Addre 4607 Shar City, State, Zij Houston, Name of Empl World Fin Occupation (F Agent Source: Full Name Raleigh B Mailing Addre 48 County City, State, Zij Oxford, M Name of Empl	Other (please spe by ess man St p Code TX 77009-3248 loyer (Required) ancial Group Required) Corporation Other (please spe yars ess Road 229 p Code IS 38655-5800 loyer (Required) eyed Required)	 cify)			(Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$100.00 \$600.00 Amount of each receipt this period

Name of Candida	te or Committee	Brandon	Presley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

ITEMIZED RECEIPTS

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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name A. K. McCarthy	06/27/2023	\$250.00
Mailing Address		
22332 Freddie Frank Rd City, State, Zip Code	_	
Long Beach, MS 39560-9728		
Name of Employer (Required) US Dept of Housing and Urban Development		
Occupation (Required) Investigator	Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cindy Akins	06/08/2023	\$50.00
Mailing Address 86449 Meadowwood Dr		
City, State, Zip Code Yulee, FL 32097-6427		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Emerson B. Robinson Jr	06/19/2023	\$1,000.00
Mailing Address 49 Eastbrooke St		
City, State, Zip Code Jackson, MS 39216-4714	-	
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Geoghegan	06/20/2023	\$100.00
Mailing Address 227 Greenfield Pl		
City, State, Zip Code Brandon, MS 39047-9007		
Name of Employer (Required) Not Employed	1	
Occupation (Required) Retired	Aggregate year-to-date	\$500.00

Name of Candidate or Committee	Brandon	Presley
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Source:	Corporation PAC	C 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Sl	akie			06/16/2023	\$30.00
Mailing Addro 4706 Buck	ess Lingham Dr				
City, State, Zi					
Name of Emp Regal	loyer (Required)				
Occupation (Usher	Required)			Aggregate year-to-date	\$422.60
Source:	Corporation PAC	C 🖌 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roy L. In	rons			06/29/2023	\$1,000.00
Mailing Addro 11352 Pal	ess .m Valley Cv				
City, State, Zi Gulfport,	pCode MS 39503-7911				
Name of Emp Self Empl	loyer (Required) .oyed				
Occupation (Dentist	Required)			Aggregate year-to-date	\$1,500.00
Source:	Corporation PA	C 🗸 Individual	Loan	Date	Amount of each
	Other (please specify)			(Mo., Day, Year)	receipt this period
Full Name Lydia Qua	Other (please specify)				receipt this
Lydia Qua Mailing Addro	Other (please specify)			(Mo., Day, Year)	receipt this period
Lydia Qua Mailing Addro 1016 Loui City, State, Zi	Other (please specify)			(Mo., Day, Year)	receipt this period
Lydia Qua Mailing Addro 1016 Loui City, State, Zi Starkvill	Other (please specify) arles ess sville St p Code .e, MS 39759-3953 loyer (Required)			(Mo., Day, Year)	receipt this period
Lydia Qua Mailing Addro 1016 Loud City, State, Zi Starkvill Name of Emp	Other (please specify) arles ess sville St p Code e, MS 39759-3953 loyer (Required) Quarles			(Mo., Day, Year)	receipt this period
Lydia Qua Mailing Addro 1016 Loui City, State, Zi Starkvill Name of Emp Mozingo (Occupation (□Other (please specify) arles ess .sville St p Code .e, MS 39759-3953 loyer (Required) Quarles Required) □Corporation □PAC		Loan	(Mo., Day, Year) 06/29/2023 Aggregate year-to-date Date	receipt this period \$25.00 \$1,125.00 Amount of each receipt this
Lydia Qua Mailing Addra 1016 Loui City, State, Zi Starkvill Name of Emp Mozingo G Occupation (Attorney Source: Full Name	Other (please specify) arles ess syille St p Code e, MS 39759-3953 loyer (Required) Quarles Required) Other (please specify) Other (please specify)			(Mo., Day, Year) 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25.00 \$1,125.00 Amount of each receipt this period
Lydia Qua Mailing Addra 1016 Loui City, State, Zi Starkvill Name of Emp Mozingo (Occupation (Attorney Source: Full Name Tammy Mun	□Other (please specify) arles ess .sville St p Code .e, MS 39759-3953 loyer (Required) Quarles Required) □Corporation □PAC □Other (please specify)			(Mo., Day, Year) 06/29/2023 Aggregate year-to-date Date	receipt this period \$25.00 \$1,125.00 Amount of each receipt this
Lydia Qua Mailing Addra 1016 Loud City, State, Zi Starkvill Name of Emp Mozingo (Occupation (Attorney Source: Full Name Tammy Mun Mailing Addra	□Other (please specify) arles ess .sville St p Code .e, MS 39759-3953 loyer (Required) Quarles Required) □Corporation □PAC □Other (please specify)			(Mo., Day, Year) 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25.00 \$1,125.00 Amount of each receipt this period
Lydia Qua Mailing Addre 1016 Loui City, State, Zi Starkvill Name of Emp Mozingo (Occupation (Attorney Source: Full Name Tammy Mun Mailing Addre 45 Blosso City, State, Zi	□ Other (please specify) arles ess .sville St p Code .e, MS 39759-3953 loyer (Required) Quarles Required) □ Other (please specify) cphy ess om Cove Rd			(Mo., Day, Year) 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25.00 \$1,125.00 Amount of each receipt this period
Lydia Qua Mailing Addre 1016 Loui City, State, Zi Starkvill Name of Emp Mozingo (C Occupation (Attorney Source: Full Name Tammy Mun Mailing Addre 45 Blosso City, State, Zi Red Bank	<pre></pre>			(Mo., Day, Year) 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25.00 \$1,125.00 Amount of each receipt this period
Lydia Qua Mailing Addro 1016 Loui City, State, Zi Starkvill Name of Emp Mozingo (Occupation (Attorney Source: Full Name Tammy Mun Mailing Addro 45 Blosso City, State, Zi Red Bank, Name of Emp	□ Other (please specify) arles arles ass sville St p Code .e, MS 39759-3953 loyer (Required) Quarles Required) □ Corporation □ PAG □ Other (please specify) Tphy ass bm Cove Rd p Code NJ 07701-6302 loyer (Required) byed Required)			(Mo., Day, Year) 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25.00 \$1,125.00 Amount of each receipt this period

Name of Can	didate or	Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry L. Kelly	06/02/2023	\$500.00
Mailing Address PO Box 100601		
City, State, Zip Code Irondale, AL 35210-0601		
Name of Employer (Required) Kelly Road Builders Inc		
Occupation (Required) President	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Russell Smith	06/23/2023	\$100.00
Mailing Address 158 Arlington Rd		
City, State, Zip Code Beaumont, MS 39423-2617		
Name of Employer (Required) Bentley Systems, Inc.		
Occupation (Required) Software Development Manager	Aggregate year-to-date	\$541.40
Source: Corporation PAC VIndividual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Melvin Warren	(Mo., Day, Year)	
Full Name Melvin Warren Mailing Address		period
Full Name Melvin Warren		period
Full Name Melvin Warren Mailing Address 26 County Road 218 City, State, Zip Code		period
Full Name Melvin Warren Mailing Address 26 County Road 218 City, State, Zip Code Oxford, MS 38655-5868 Name of Employer (Required)		period
Full Name Melvin Warren Mailing Address 26 County Road 218 City, State, Zip Code Oxford, MS 38655-5868 Name of Employer (Required) US Dept of Agriculture Occupation (Required) Scientists Source: Corporation PAC Individual	Aggregate year-to-date	period \$300.00
Full Name Melvin Warren Mailing Address 26 County Road 218 City, State, Zip Code Oxford, MS 38655-5868 Name of Employer (Required) US Dept of Agriculture Occupation (Required) Scientists Source: Corporation PAC Individual Other (please specify)	Aggregate year-to-date	period \$300.00 \$400.00 Amount of each
Full Name Melvin Warren Mailing Address 26 County Road 218 City, State, Zip Code Oxford, MS 38655-5868 Name of Employer (Required) US Dept of Agriculture Occupation (Required) Scientists Source: Corporation PAC Individual	Aggregate year-to-date	period \$300.00 \$400.00 Amount of each receipt this
Full Name Melvin Warren Mailing Address 26 County Road 218 City, State, Zip Code Oxford, MS 38655-5868 Name of Employer (Required) US Dept of Agriculture Occupation (Required) Scientists Source: Corporation PAC Individual Loan Other (please specify)	Aggregate year-to-date (Mo., Day, Year)	period \$300.00 \$400.00 Amount of each receipt this period
Full Name Melvin Warren Mailing Address 26 County Road 218 City, State, Zip Code Oxford, MS 38655-5868 Name of Employer (Required) US Dept of Agriculture Occupation (Required) Scientists Source: Corporation PAC VIndividual Loan Other (please specify) Full Name Janice Jackson Mailing Address	Aggregate year-to-date (Mo., Day, Year)	period \$300.00 \$400.00 Amount of each receipt this period
Full Name Melvin Warren Mailing Address 26 County Road 218 City, State, Zip Code Oxford, MS 38655-5868 Name of Employer (Required) US Dept of Agriculture Occupation (Required) Scientists Source: □Corporation □Other (please specify) Full Name Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code	Aggregate year-to-date (Mo., Day, Year)	period \$300.00 \$400.00 Amount of each receipt this period
Full Name Melvin Warren Mailing Address 26 County Road 218 City, State, Zip Code Oxford, MS 38655-5868 Name of Employer (Required) US Dept of Agriculture Occupation (Required) Scientists Source: Corporation PAC Individual Loan Other (please specify) Full Name Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required)	Aggregate year-to-date (Mo., Day, Year)	period \$300.00 \$400.00 Amount of each receipt this period

Name of Candidate	or Committee	Brandon	Presley
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Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Wil	liams			06/27/2023	\$25.00
Mailing Addre					
City, State, Zij Hattiesbu	Code rg, MS 39402-8339				
	oyer(Required) elicopters				
Occupation (F Pilot	Required)			Aggregate year-to-date	\$575.00
Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karn	У			06/28/2023	\$16.00
Mailing Addre	ss hire Blvd				
City, State, Zij Los Angel	o Code es, CA 90048-5126				
	oyer (Required)				
Occupation (F Clinical	Required) Social Worker			Aggregate year-to-date	\$252.00
Source:	Corporation	PAC 🖌 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joseph O'	Gorman			06/09/2023	\$1,000.00
Mailing Addre 99 Pittma					
City, State, Zi		11			
Name of Emp Self Empl	oyer (Required) oyed				
Occupation (F Physician				Aggregate year-to-date	\$1,000.00
Source:	Corporation	PAC 🖌 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kelly Col				06/30/2023	\$100.00
Mailing Addre	SS				
City, State, Zi	o Code				
	MS 39047-7398 oyer (Required) yed				
Occupation (F Retired	_			Aggregate year-to-date	\$400.00

	<u> </u>		ITEMIZ	ED RECE	IPTS	
Source:	Corporation	PAC	Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Telephone	e Contact Inc				06/01/2023	\$1,000.00
Mailing Addre 7700 Fors						
City, State, Zi Saint Lou	p Code lis, MO 63105-18	19				
Name of Emp	loyer (Required)					
Occupation (F	Required)				Aggregate year-to-date	\$1,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Str	range				06/22/2023	\$25.00
Mailing Addre 69 Henry City, State, Zi	James Rd	1.0				
	loyer (Required)	10				
Occupation (F					Aggregate year-to-date	\$585.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kelly J.	Jacobs				06/28/2023	\$250.00
City, State, Zi Hernando ,	ertson Gin Rd p Code MS 38632-8227 loyer (Required)					
Occupation (F Not Emplo	Required)				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret	Thomas				06/30/2023	\$5.00
Mailing Addre 153 Timbe						
City, State, Zi Hattiesbu	p Code 1rg, MS 39401-82	09				
Name of Emp Not Emplo	loyer (Required) byed					
Occupation (F					Aggregate year-to-date	\$362.00

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Name of Candidate or Committee Brandon Presley

Name of Candida	te or Committee	Brandon	Presley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Len Tao	06/01/2023	\$250.00
Mailing Address 3948 Taney Ave		
City, State, Zip Code Alexandria, VA 22304-2622	-	
Name of Employer (Required) Southwest Power Pool		
Occupation (Required) Director of FERC Policy	Aggregate year-to-date	\$1,250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert H. Hickman	06/03/2023	\$250.00
Mailing Address 412 S Central Ave		
City, State, Zip Code New Albany, MS 38652-3701		
Name of Employer (Required) Self Employed		
Occupation (Required) Producer	Aggregate year-to-date	\$1,500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Thomas	06/13/2023	\$5.00
Mailing Address 153 Timberton Dr		
City, State, Zip Code Hattiesburg, MS 39401-8209	-	
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$362.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald R. Cotten	06/06/2023	\$1,000.00
Mailing Address 24 Grand Bayou Cir		
City, State, Zip Code Hattiesburg, MS 39402-7931		
Name of Employer (Required) Self Employed		
Occupation (Required) Business Development Consultant	Aggregate year-to-date	\$1,000.00

Name of Candidate	or Committee	Brandon	Presley
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ITEMIZED	RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alma Walls	06/26/2023	\$100.00
Mailing Address 3887 Kenton Dr	-	
City, State, Zip Code Southaven, MS 38672-7225	_	
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$925.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary A. Monteith	06/19/2023	\$500.00
Mailing Address 8284 Star Landing Rd	-	
City, State, Zip Code Lake Cormorant, MS 38641-9634		
Name of Employer (Required) Austin Law Firm, P.A.		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Magnum Metals LLC	06/20/2023	\$300.00
Mailing Address PO Box 77		
City, State, Zip Code Nettleton, MS 38858-0077	-	
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$300.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kristy Christen	06/20/2023	\$250.00
Mailing Address 753 E Second St		
City, State, Zip Code Pass Christian, MS 39571-4613		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
	1	

Name of Candidate or Committee	Brandon	Presley
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ITEMIZED RECEIPTS

Source:	Corporation [Other (please specify	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth	Bailey			06/30/2023	\$50.00
Mailing Addre					
City, State, Zip West Poin	Code t, MS 39773-3270				
Name of Emplo	oyer (Required) yed				
Occupation (F Not Emplo				Aggregate year-to-date	\$1,100.00
Source:	Corporation [Other (please specify	PAC 🖌 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles L	acavera			06/14/2023	\$25.00
Mailing Addre 1459 Forb					
City, State, Zip Byram, MS	Code 39272-9459				
Name of Empl Eastpoint	oyer (Required) e				
Occupation (F Utilizati	Required) on Manager			Aggregate year-to-date	\$225.00
Source:	Corporation	PAC 🖌 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Audrey Mc	Bride			06/24/2023	\$25.00
Mailing Addre 1250 E La	ss keshore Dr				
City, State, Zip Starkvill	o Code e, MS 39759-2482				
•	oyer(Required) Co. Real Estate				
Occupation (F Broker	Required)			Aggregate year-to-date	\$290.00
Source:	Corporation [Other (please specify	PAC 🖌 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Ray	mond			06/05/2023	\$100.00
Mailing Addre 3915 Sain	ss t Charles Ave				
City, State, Zip New Orlea	o Code ns, LA 70115-4659				
	oyer (Required)				
Occupation (F Not Emplo				Aggregate year-to-date	\$1,275.00
				•	

Name of Candidate or Committee Bra	andon Pre	sley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Adelman	06/06/2023	\$300.00
Mailing Address 33 Camellia Ct	-	
City, State, Zip Code	_	
Hattiesburg, MS 39402-6112		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$300.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert O'Brien	06/27/2023	\$100.00
Mailing Address 6007 SW 240th St		
City, State, Zip Code Vashon, WA 98070-7247		
Name of Employer (Required) Health Net		
Occupation (Required) COO	Aggregate year-to-date	\$400.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joyce Leech	06/28/2023	\$25.00
Mailing Address	-	
214 Main St S		
City, State, Zip Code Amory, MS 38821-4218		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$425.00
Source: Corporation PAC Individual Loan	Date	Amount of each receipt this
✓ Other (please specify)	(Mo., Day, Year)	period
Full Name Ania Management LLC	06/20/2023	\$25,000.00
Mailing Address 175 Broadway		
City, State, Zip Code	-	
Paterson, NJ 07505-1117		
Name of Employer (Required)	1	
		1
Occupation (Required)	Aggregate year-to-date	\$25,000.00

Name of Candidate of	r Committee	Brandon	Presley
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Reporting Period6/1/2023through6/30/2023

ITEMIZED RECEIPTS

Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martin Da	niel Crump			06/02/2023	\$2,500.00
Mailing Addre					
City, State, Zi Gulfport,	D Code MS 39501-1926				
Name of Emp Davis & C	oyer(Required) rump, PC				
Occupation (F Attorney	Required)			Aggregate year-to-date	\$7,500.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugene Br	amlett			06/05/2023	\$50.00
Mailing Addre					
City, State, Zi Columbus,	D Code MS 39701-5810				
Name of Emp Covenant	oyer (Required) UMC				
Occupation (F Minister	Required)			Aggregate year-to-date	\$400.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eleanor G	ill			06/05/2023	\$5.00
Mailing Addre					
City, State, Zi Hernando ,	D Code MS 38632-2217				
Name of Emp Self Empl	oyer (Required) oyed				
Occupation (F Dentist	Required)			Aggregate year-to-date	\$255.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rheta Joh	nson			06/25/2023	\$25.00
Mailing Addre	ss y Road 259				
City, State, Zi	_				
	oyer (Required)				
Occupation (F	Required)			Aggregate year-to-date	\$675.00

Name of Can	didate or	Committee	Brandon	Presley
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Source: Corporation PAC 🗹 Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathryn York	06/25/2023	\$250.00
Mailing Address 315 Panola St		
City, State, Zip Code Water Valley, MS 38965-2408		
Name of Employer (Required) Teach for America		
Occupation (Required) Non Profit Administration	Aggregate year-to-date	\$850.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan S McNease	06/26/2023	\$500.00
Mailing Address 236 Eastbrooke St		
City, State, Zip Code Jackson, MS 39216-4716		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$700.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Raymond	06/08/2023	\$5.00
Mailing Address 3915 Saint Charles Ave		
-		
3915 Saint Charles Ave City, State, Zip Code		
3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required)	Aggregate year-to-date	\$1,275.00
3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required) Not Employed Occupation (Required)		\$1,275.00 Amount of each receipt this period
3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC VIndividual Loan	year-to-date Date	Amount of each receipt this
3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name William Lawhead Mailing Address 718 S 8th St City, State, Zip Code	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employed (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name William Lawhead Mailing Address 718 S 8th St	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name William Lawhead Mailing Address 718 S 8th St City, State, Zip Code Oxford, MS 38655-4306 Name of Employer (Required)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Can	didate or	Committee	Brandon	Presley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Matthew Beasley	06/29/2023	\$500.00
Mailing Address 1209 Nichol Ln		
City, State, Zip Code Nashville, TN 37205-4419		
Name of Employer (Required) Silicon Ranch Corporation		
Occupation (Required) Chief Commercial Officer	Aggregate year-to-date	\$1,500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Hull	06/30/2023	\$30.00
Mailing Address 1008 Coolidge St		
City, State, Zip Code Tupelo, MS 38801-6231		
Name of Employer (Required) Self Employed		
Occupation (Required) Journalist	Aggregate year-to-date	\$275.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars	06/30/2023	\$25.00
Mailing Address 48 County Road 229		
City, State, Zip Code Oxford, MS 38655-5800		
Name of Employer (Required) Not Employed		
Name of Employer (Required)	Aggregate year-to-date	\$380.00
Name of Employer (Required) Not Employed Occupation (Required)		Amount of each receipt this
Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan	year-to-date Date	Amount of each
Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name Marian Barksdale Mailing Address	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name Marian Barksdale Mailing Address 917 Old Taylor Rd City, State, Zip Code	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name Marian Barksdale Mailing Address 917 Old Taylor Rd City, State, Zip Code Oxford, MS 38655-4637 Name of Employer (Required)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name Marian Barksdale Mailing Address 917 Old Taylor Rd City, State, Zip Code Oxford, MS 38655-4637	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of	Candidate or	Committee	Brandon	Presley
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Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stephen S	chuler			06/12/2023	\$5,000.00
Mailing Addre					
City, State, Zip Oak Park,	OCode IL 60302-2109				
Name of Empl Serenity	oyer (Required) Capital				
Occupation (F Investmen				Aggregate year-to-date	\$5,000.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joyce Lee	ch			06/13/2023	\$50.00
Mailing Addre 214 Main	SS				
City, State, Zip Amory, MS	OCode 38821-4218				
Name of Emplo	oyer (Required) yed				
Occupation (F Not Emplo				Aggregate year-to-date	\$425.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
					ponou
Full Name Monie Hen				06/06/2023	\$200.00
Monie Hen Mailing Addre	derson			06/06/2023	·
Monie Hen Mailing Addre 3845 Maje City, State, Zip	derson ss stic Oaks Dr			06/06/2023	·
Monie Hen Mailing Addre 3845 Maje City, State, Zip Oxford, M	derson ss stic Oaks Dr o Code S 38655-8153 oyer (Required)			06/06/2023	·
Monie Hen Mailing Addre 3845 Maje City, State, Zip Oxford, M Name of Empl	derson ss stic Oaks Dr o Code S 38655-8153 oyer (Required) oks Jr. Required)			06/06/2023 Aggregate year-to-date	·
Monie Hen Mailing Addre 3845 Maje City, State, Zip Oxford, M Name of Empl Square Bo Occupation (F	derson ss stic Oaks Dr o Code S 38655-8153 oyer (Required) oks Jr. Required)	✓ Individual	Loan	Aggregate	\$200.00
Monie Hen Mailing Addre 3845 Maje City, State, Zip Oxford, M Name of Empl Square Bo Occupation (F Bookselle	derson ss stic Oaks Dr o Code S 38655-8153 oyer (Required) oks Jr. tequired) r Corporation PAC Other (please specify)		Loan	Aggregate year-to-date Date	\$200.00 \$900.00 Amount of each receipt this
Monie Hen Mailing Addre 3845 Maje City, State, Zip Oxford, M Name of Empl Square Bo Occupation (F Bookselle Source: Full Name	derson ss stic Oaks Dr o Code S 38655-8153 oyer (Required) oks Jr. Required) r Corporation PAC Other (please specify) iscoll ss			Aggregate year-to-date Date (Mo., Day, Year)	\$200.00 \$900.00 Amount of each receipt this period
Monie Hen Mailing Addre 3845 Maje City, State, Zig Oxford, M Name of Empl Square Bo Occupation (F Bookselle Source: Full Name Lauren Dr Mailing Addre 279 June City, State, Zig	derson ss stic Oaks Dr o Code S 38655-8153 oyer (Required) oks Jr. tequired) r Corporation PAC Other (please specify) iscoll ss Rd		Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$200.00 \$900.00 Amount of each receipt this period
Monie Hen Mailing Addre 3845 Maje City, State, Zip Oxford, M Name of Empl Square Bo Occupation (F Bookselle Source: Full Name Lauren Dr Mailing Addre 279 June City, State, Zip Stamford,	derson ss stic Oaks Dr o Code S 38655-8153 oyer (Required) oks Jr. Required) r Corporation PAC Other (please specify) iscoll ss Rd o Code CT 06903-3734 oyer (Required)		Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$200.00 \$900.00 Amount of each receipt this period
Monie Hen Mailing Addre 3845 Maje City, State, Zig Oxford, M Name of Empl Square Bo Occupation (F Bookselle Source: Full Name Lauren Dr Mailing Addre 279 June City, State, Zig Stamford, Name of Empl	derson ss stic Oaks Dr Code S 38655-8153 oyer (Required) oks Jr. equired) r Corporation PAC Other (please specify) iscoll ss Rd Code CT 06903-3734 oyer (Required) RX equired)		Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$200.00 \$900.00 Amount of each receipt this period

Name of Candidate of	r Committee	Brandon	Presley
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Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rayburn Parks	06/26/2023	\$500.00
Mailing Address 206 Martin Dr		
City, State, Zip Code Houston, MS 38851-9306		
Name of Employer (Required) Parks Well Service		
Occupation (Required) Business Owner	Aggregate year-to-date	\$500.00
Source: Corporation PAC 🖌 Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elvin Sunds	06/30/2023	\$10.00
Mailing Address 4000 W Tidewater Ln		
City, State, Zip Code Madison, MS 39110-8942		
Name of Employer (Required) St. Francis of Assisi Church		
Occupation (Required) Clergy	Aggregate year-to-date	\$305.00
Source: Corporation PAC Individual Loan	Date	Amount of each
✓ Other (please specify) Partnership	(Mo., Day, Year)	receipt this period
✓ Other (please specify) Partnership Full Name Green Hills Farm	(Mo., Day, Year)	
Full Name Green Hills Farm Mailing Address	-	period
Full Name Green Hills Farm	-	period
Full Name Green Hills Farm Mailing Address 1721 Highway 4 W City, State, Zip Code	-	period
Full Name Green Hills Farm Mailing Address 1721 Highway 4 W City, State, Zip Code Ripley, MS 38663-9678	-	period
Full Name Green Hills Farm Mailing Address 1721 Highway 4 W City, State, Zip Code Ripley, MS 38663-9678 Name of Employer (Required)	06/23/2023	period \$150.00
Full Name Green Hills Farm Mailing Address 1721 Highway 4 W City, State, Zip Code Ripley, MS 38663-9678 Name of Employer (Required) Occupation (Required) Source: Corporation PAC Individual	Aggregate year-to-date Date	period \$150.00 \$700.00 Amount of each receipt this
Full Name Green Hills Farm Mailing Address 1721 Highway 4 W City, State, Zip Code Ripley, MS 38663-9678 Name of Employer (Required) Occupation (Required) Source: Corporation Other (please specify) Full Name Merrye Lynn Brennan Mailing Address	Aggregate year-to-date (Mo., Day, Year)	period \$150.00 \$700.00 Amount of each receipt this period
Full Name Green Hills Farm Mailing Address 1721 Highway 4 W City, State, Zip Code Ripley, MS 38663-9678 Name of Employer (Required) Occupation (Required) Source: Corporation Other (please specify) Full Name Merrye Lynn Brennan Mailing Address 151 Least Tern Dr City, State, Zip Code	Aggregate year-to-date (Mo., Day, Year)	period \$150.00 \$700.00 Amount of each receipt this period
Full Name Green Hills Farm Mailing Address 1721 Highway 4 W City, State, Zip Code Ripley, MS 38663-9678 Name of Employer (Required) Occupation (Required) Source: Corporation Other (please specify) Full Name Merrye Lynn Brennan Mailing Address 151 Least Tern Dr City, State, Zip Code Pass Christian, MS 39571-4844 Name of Employer (Required)	Aggregate year-to-date (Mo., Day, Year)	period \$150.00 \$700.00 Amount of each receipt this period
Full Name Green Hills Farm Mailing Address 1721 Highway 4 W City, State, Zip Code Ripley, MS 38663-9678 Name of Employer (Required) Occupation (Required) Source: Corporation Other (please specify) Full Name Merrye Lynn Brennan Mailing Address 151 Least Tern Dr City, State, Zip Code Pass Christian, MS 39571-4844	Aggregate year-to-date (Mo., Day, Year)	period \$150.00 \$700.00 Amount of each receipt this period

Name of Candidate of	r Committee	Brandon	Presley
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Date (Mo., Day, Year)	Amount of each receipt this period
06/30/2023	\$1,000.00
Aggregate year-to-date	\$11,000.00
Date (Mo., Day, Year)	Amount of each receipt this period
06/24/2023	\$1,000.00
-	
-	
Aggregate year-to-date	\$1,000.00
Date (Mo., Day, Year)	Amount of each receipt this period
06/27/2023	\$500.00
-	
_	
Aggregate	AE00.00
year-to-date	\$500.00
	\$500.00 Amount of each receipt this period
year-to-date Date	Amount of each receipt this
year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
	(Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year) 06/24/2023 06/24/2023 Aggregate year-to-date Date (Mo., Day, Year) 06/27/2023

Name of Candidate	or Committee	Brandon	Presley
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Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles P	arrott			06/20/2023	\$100.00
Mailing Addre 9 Abbey N					
City, State, Zip					
	oyer (Required) Reese LLP				
Occupation (F Attorney	equired)			Aggregate year-to-date	\$450.00
Source:	Corporation F Other (please specify)	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brent Smi	th			06/15/2023	\$1,000.00
Mailing Addre 203 Thoma					
City, State, Zip Cleveland	Code , MS 38732-2422				
	oyer(Required) Family Medical Gro	oup			
Occupation (F Physician	equired)			Aggregate year-to-date	\$1,000.00
Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Keith Joh	nson			06/26/2023	\$50.00
Mailing Addre					
PO Box 42					
City, State, Zip	1				
City, State, Zip Nesbit, M	1 Code S 38651-0421 oyer (Required)				
City, State, Zip Nesbit, M Name of Empl	1 Code S 38651-0421 oyer (Required) yed equired)			Aggregate year-to-date	\$550.00
City, State, Zip Nesbit, M Name of Emplo Not Emplo Occupation (F	1 Code S 38651-0421 oyer (Required) yed equired) yed	PAC 🔽 Individual	Loan		\$550.00 Amount of each receipt this period
City, State, Zip Nesbit, M Name of Emplo Not Emplo Occupation (F Not Emplo	1 Code S 38651-0421 oyer (Required) yed equired) yed Corporation F Other (please specify) _	PAC VIndividual	Loan	year-to-date Date	Amount of each receipt this
City, State, Zip Nesbit, M Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Robert Sa Mailing Addre	1 Code S 38651-0421 oyer (Required) yed equired) yed Corporation F Other (please specify) _ lmon ss	PAC V Individual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Nesbit, M Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Robert Sa Mailing Addre 1068 Fact City, State, Zip	1 Code S 38651-0421 oyer (Required) yed equired) yed Corporation F Other (please specify) _ lmon ss pry Dr Code	PAC V Individual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Nesbit, M Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Robert Sa Mailing Addre 1068 Fact City, State, Zip Charlesto	1 Code S 38651-0421 over (Required) yed equired) yed Corporation F Other (please specify) _ lmon ss pry Dr Code n, MS 38921-6620 over (Required)	PAC V Individual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Nesbit, M Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Robert Sa Mailing Addre 1068 Fact City, State, Zip Charlesto Name of Empl	1 Code S 38651-0421 over (Required) yed equired) yed Corporation Cother (please specify) lmon ss ory Dr Code n, MS 38921-6620 over (Required) Shoppe equired)	PAC V Individual	Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of	Candidate or	Committee	Brandon	Presley
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ITEMIZED RECEIPTS

Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Preston H	E. Sullivan	06/28/2023	\$500.00
Mailing Addre 1601 Cour	ess nty Road 410		
City, State, Zi Okolona,	ip Code MS 38860-9330		
Name of Emp	oloyer (Required) byed		
Occupation (Retired	Required)	Aggregate year-to-date	\$1,000.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coler	nan	06/28/2023	\$10.00
Mailing Addre 316 Quail	ess l Creek Dr		
City, State, Zi Oxford, M	ip Code MS 38655-6108		
Name of Emp Not Emplo	oloyer (Required) byed		
Occupation (Aggregate year-to-date	\$285.00
Source:	Corporation PAC Individual Loan	Date	Amount of each receipt this
	Other (please specify)	(Mo., Day, Year)	period
Full Name Michael S		06/30/2023	
	Stroup ess		period
Michael S Mailing Addre 262 Ranch City, State, Zi	Stroup ess nland Rd		period
Michael S Mailing Addre 262 Ranch City, State, Zi Belden, M	Stroup ess nland Rd ip Code MS 38826-9642 oloyer (Required)		period
Michael S Mailing Addre 262 Ranch City, State, Zi Belden, M Name of Emp	Stroup ess nland Rd ip Code MS 38826-9642 bloyer (Required) byed Required)		period
Michael S Mailing Addre 262 Ranch City, State, Zi Belden, M Name of Emp Not Emplo Occupation (Stroup ess nland Rd ip Code MS 38826-9642 bloyer (Required) byed Required)	Aggregate	period \$10.00 \$260.00 Amount of each receipt this
Michael S Mailing Addre 262 Ranch City, State, Zi Belden, M Name of Emplo Occupation (Not Emplo Source: Full Name	Stroup ess nland Rd ip Code MS 38826-9642 oloyer (Required) oyed Required) oyed Corporation PAC Individual Loan	Aggregate year-to-date	period \$10.00 \$260.00 Amount of each
Michael S Mailing Addre 262 Ranch City, State, Zi Belden, M Name of Emplo Occupation (Not Emplo Source: Full Name	Stroup ess hland Rd ip Code MS 38826-9642 bloyer (Required) byed Required) byed Corporation PAC Individual Loan Other (please specify) arey Hearn ess	Aggregate year-to-date (Mo., Day, Year)	period \$10.00 \$260.00 Amount of each receipt this period
Michael S Mailing Addre 262 Ranch City, State, Zi Belden, M Name of Emplo Occupation (Not Emplo Occupation (Not Emplo Source: Full Name Philip Ca Mailing Addre 117 N Mou City, State, Zi	Stroup ess nland Rd ip Code MS 38826-9642 bloyer (Required) byed Required) byed Corporation PAC Individual Loan Other (please specify) arey Hearn ess untain St	Aggregate year-to-date (Mo., Day, Year)	period \$10.00 \$260.00 Amount of each receipt this period
Michael S Mailing Addre 262 Ranch City, State, Zi Belden, M Name of Emplo Occupation (Not Emplo Occupation (Not Emplo Source: Full Name Philip Ca Mailing Addre 117 N Mou City, State, Zi Blue Mour	Stroup ess hland Rd ip Code MS 38826-9642 bloyer (Required) byed Corporation PAC Individual Loan Other (please specify) arey Hearn ess intain St ip Code htain, MS 38610-9441 bloyer (Required)	Aggregate year-to-date (Mo., Day, Year)	period \$10.00 \$260.00 Amount of each receipt this period
Michael S Mailing Addre 262 Ranch City, State, Zi Belden, M Name of Emp Not Emplo Occupation (Not Emplo Source: Full Name Philip Ca Mailing Addre 117 N Mou City, State, Zi Blue Mour Name of Emp	Stroup ess hland Rd ip Code MS 38826-9642 bloyer (Required) byed Corporation PAC VIndividual Loan Other (please specify) arey Hearn ess untain St ip Code htain, MS 38610-9441 bloyer (Required) w Firm	Aggregate year-to-date (Mo., Day, Year)	period \$10.00 \$260.00 Amount of each receipt this period

Name of Candidate	or Committee	Brandon	Presley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

ITEMIZED RECEIPTS

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Source:	Corporation	□PAC ✓Indiv y)	vidual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robbie D.	Fisher				06/02/2023	\$250.00
Mailing Addre 723 W Lee						
City, State, Zij Water Val	cCode ley, MS 38965-14	13				
•	oyer (Required)					
Occupation (F Business	• •				Aggregate year-to-date	\$450.00
Source:	Corporation	□PAC ✓Indiv y)		Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Ale	xander				06/22/2023	\$150.00
Mailing Addre 46 Sagewo						
City, State, Zij Brandon,	o Code MS 39042-2526					
Name of Emp GM	oyer (Required)					
Occupation (F	Required)				Aggregate year-to-date	\$225.00
Source:	Corporation	□PAC ✔Indiv y)		Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Geog	hegan				06/24/2023	\$100.00
Mailing Addre						
City, State, Zij Brandon,	D Code MS 39047-9007					
Name of Emplo	oyer (Required) yed					
Occupation (F Retired	Required)				Aggregate year-to-date	\$500.00
Source:	Corporation	□PAC ✔Indiv y)	vidual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ruth Adam	S				06/26/2023	\$250.00
Mailing Addre 7101 Bell	ss e Fontaine Dr					
City, State, Zip	Code ings, MS 39564-8	486				
	oyer (Required)					
Occupation (F					1	
Not Emplo					Aggregate year-to-date	\$250.00

Name of Candida	te or Committee	Brandon	Presley
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ITEMIZED RECEIF	PTS
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Source:	Corporation	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barry Ber	rtolet			06/30/2023	\$250.00
Mailing Addre 988 Charl	ess Leston Blvd				
City, State, Zi Tupelo, M	p Code 15 38801-8435				
	loyer (Required) yy Associates				
Occupation (I Physiciar				Aggregate year-to-date	\$750.00
Source:	Corporation	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne F	Robinson			06/22/2023	\$25.00
Mailing Addre 206 Wood				-	
City, State, Zi Water Val	p Code ley, MS 38965-260)3			
Name of Emp Not Emplo	loyer (Required) byed				
Occupation (I Not Emplo				Aggregate year-to-date	\$985.00
Courses			□.	Dete	
Source:	Corporation	PAC / Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard E	Other (please specify		Loan		receipt this
Full Name	Other (please specify Ballard		Loan	(Mo., Day, Year)	receipt this period
Full Name Richard E Mailing Addre 142 Road City, State, Zi	Other (please specify Ballard 598)	Loan	(Mo., Day, Year)	receipt this period
Full Name Richard E Mailing Addre 142 Road City, State, Zi Plantersy	Other (please specify Ballard ess 598 p Code rille, MS 38862-49 loyer (Required))	Loan	(Mo., Day, Year)	receipt this period
Full Name Richard E Mailing Addre 142 Road City, State, Zi Plantersy Name of Emp	Other (please specify Ballard ess 598 p Code rille, MS 38862-49 loyer (Required) oyed Required))		(Mo., Day, Year)	receipt this period
Full Name Richard E Mailing Addre 142 Road City, State, Zi Plantersy Name of Emp Not Emplo Occupation (I	Other (please specify Ballard ess 598 p Code rille, MS 38862-49 loyer (Required) oyed Required)	901 PAC Individual		(Mo., Day, Year)	receipt this period \$5.00
Full Name Richard E Mailing Addre 142 Road City, State, Zi Plantersy Name of Emplo Occupation (Not Emplo	Other (please specify Ballard ess 598 p Code rille, MS 38862-49 loyer (Required) byed Required) byed Corporation Other (please specify	901 PAC Individual		(Mo., Day, Year) 06/13/2023 Aggregate year-to-date Date	receipt this period \$5.00 \$240.00 Amount of each receipt this
Full Name Richard E Mailing Addre 142 Road City, State, Zi Plantersy Name of Emp Not Emplo Occupation (Not Emplo Source: Full Name	Other (please specify Ballard ess 598 p Code rille, MS 38862-49 loyer (Required) byed Required) byed Corporation Other (please specify AcClain ess	901 PAC Individual		(Mo., Day, Year) 06/13/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$5.00 \$240.00 Amount of each receipt this period
Full Name Richard E Mailing Addre 142 Road City, State, Zi Plantersy Name of Emplo Occupation (I Not Emplo Occupation (I Not Emplo Source: Full Name L. Carr M Mailing Addre 1011 S 34 City, State, Zi	Other (please specify Ballard Ballard Ballard Ballard Ballard Ballard Ballard Solution Code Corporation Other (please specify McClain Bass Bth Ave	PAC Individual		(Mo., Day, Year) 06/13/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$5.00 \$240.00 Amount of each receipt this period
Full Name Richard E Mailing Addre 142 Road City, State, Zi Plantersy Name of Emp Not Emplo Occupation (Not Emplo Source: Full Name L. Carr M Mailing Addre 1011 S 34 City, State, Zi Hattiesbu	Other (please specify Ballard Ballard Bass 598 p Code rille, MS 38862-49 loyer (Required) byed Corporation Other (please specify AcClain Bass Ath Ave p Code arg, MS 39402-3002 loyer (Required)	PAC Individual		(Mo., Day, Year) 06/13/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$5.00 \$240.00 Amount of each receipt this period
Full Name Richard E Mailing Addre 142 Road City, State, Zi Plantersy Name of Emplo Occupation (I Not Emplo Occupation (I Not Emplo Source: Full Name L. Carr M Mailing Addre 1011 S 34 City, State, Zi Hattiesbu	Other (please specify Ballard Ballard Bass 598 p Code rille, MS 38862-49 loyer (Required) byed Corporation Other (please specify AcClain Bass Ath Ave p Code arg, MS 39402-3002 loyer (Required) Health Required)	PAC Individual		(Mo., Day, Year) 06/13/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$5.00 \$240.00 Amount of each receipt this period

Name of Can	didate or	Committee	Brandon	Presley
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Reporting Period6/1/2023through6/30/2023

ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roy S. Mitchell	06/16/2023	\$250.00
Mailing Address 704 Forest Point Dr		
City, State, Zip Code Brandon , MS 39047-6220		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jon Stryker	06/27/2023	\$5,000.00
Mailing Address 445 5th Ave		
City, State, Zip Code New York, NY 10016-0162		
Name of Employer (Required) Self Employed		
Occupation (Required) Architect	Aggregate year-to-date	\$5,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)		receipt this
Other (please specify) Full Name Matt Brown Mailing Address	(Mo., Day, Year)	receipt this period
	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Matt Brown Mailing Address 149 Fountain Brooke Dr City, State, Zip Code Hendersonville, TN 37075-8629	(Mo., Day, Year)	receipt this period
Conter (please specify) Full Name Matt Brown Mailing Address 149 Fountain Brooke Dr City, State, Zip Code Hendersonville, TN 37075-8629 Name of Employer (Required) Silicon Ranch Occupation (Required)	(Mo., Day, Year)	receipt this period
Conter (please specify)	(Mo., Day, Year)	receipt this period \$500.00
□Other (please specify) Full Name Matt Brown Mailing Address 149 Fountain Brooke Dr City, State, Zip Code Hendersonville, TN 37075-8629 Name of Employer (Required) Silicon Ranch Occupation (Required) Business Development Source: □Corporation	(Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date	receipt this period \$500.00 \$500.00 Amount of each receipt this
□Other (please specify) Full Name Matt Brown Mailing Address 149 Fountain Brooke Dr City, State, Zip Code Hendersonville, TN 37075-8629 Name of Employer (Required) Silicon Ranch Occupation (Required) Business Development Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name	(Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$500.00 \$500.00 Amount of each receipt this period
□ Other (please specify) Full Name Matt Brown Mailing Address 149 Fountain Brooke Dr City, State, Zip Code Hendersonville, TN 37075-8629 Name of Employer (Required) Silicon Ranch Occupation (Required) Business Development Source: □ Other (please specify) Full Name Tim Alford Mailing Address	(Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$500.00 \$500.00 Amount of each receipt this period
□Other (please specify)	(Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$500.00 \$500.00 Amount of each receipt this period
□Other (please specify) Full Name Matt Brown Mailing Address 149 Fountain Brooke Dr City, State, Zip Code Hendersonville, TN 37075-8629 Name of Employer (Required) Silicon Ranch Occupation (Required) Business Development Source: □Corporation □Other (please specify) Full Name Tim Alford Mailing Address 182 Woodbriar Dr City, State, Zip Code Kosciusko, MS 39090-9098 Name of Employer (Required)	(Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$500.00 \$500.00 Amount of each receipt this period

Name of Candidate or Committee Br	andon Pr	esley
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ITEMIZED	RECEIPTS

Source:	□Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh B	Byars	06/29/2023	\$25.00
Mailing Addre	ess 7 Road 229	_	
City, State, Zi		_	
Name of Emp Not Emplo	loyer (Required) byed	_	
Occupation (F		Aggregate year-to-date	\$380.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martha Va	anlandingham	06/20/2023	\$50.00
Mailing Addre 4830 Old	ess West Point Rd	_	
City, State, Zi Starkvill	p Code Le, MS 39759-8190	_	
Name of Emp Not Emplo	loyer (Required) byed		
Occupation (F Retired	Required)	Aggregate year-to-date	\$300.00
Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold Fi	lore	06/01/2023	\$100.00
Mailing Addre	ess fferson Ave	_	
City, State, Zi Greenwood	p Code 1, MS 38930-3536	_	
Name of Emp Not Emplo	loyer (Required) byed	_	
Occupation (F		Aggregate year-to-date	\$450.00
Source:	Corporation PAC ✓Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Al	lexander	06/21/2023	\$50.00
Mailing Addre	ess and Meadows Dr	_	
City, State, Zi Jackson,	p Code MS 39211-5949	_	
Name of Emp	loyer (Required)	1	
Occupation (F Accountar		Aggregate year-to-date	\$550.00

Name of Candidate or Committee	Brandon	Presley
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Source:	Corporation □PAC ✓Individual □Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Ray	mond	06/22/2023	\$5.00
Mailing Addre 3915 Sain	ess t Charles Ave	_	
City, State, Zi New Orlea	p Code ns, LA 70115-4659	_	
Name of Emp Not Emplo	loyer (Required) yed		
Occupation (F		Aggregate year-to-date	\$1,275.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William L	. Ducker	06/03/2023	\$500.00
Mailing Addre PO Box 21			
City, State, Zi Purvis, M	p Code IS 39475-0217	_	
Name of Emp Self Empl	loyer (Required) oyed		
Occupation (F Attorney	Required)	Aggregate year-to-date	\$500.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Natalie B	ernstein	06/09/2023	\$5,000.00
Mailing Addre 2130 E La			
City, State, Zij Atlanta,	p Code GA 30307-1836	_	
Name of Emp Not Emplo	loyer (Required) yed		
Occupation (F Retired	Required)	Aggregate year-to-date	\$6,250.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Hut	to	06/22/2023	\$10.00
Mailing Addre			
City, State, Zi		-	
	loyer (Required)	-	
Occupation (F Education	Required) Consultant	Aggregate year-to-date	\$540.00

Name of Candidate of	r Committee	Brandon	Presley
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Reporting Period6/1/2023through6/30/2023

ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald Sittman	06/23/2023	\$50.00
Mailing Address 1822 Devine St		
City, State, Zip Code Jackson, MS 39202-1317		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,300.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nan Tarlton	06/05/2023	\$100.00
Mailing Address 210 Meadowlane Dr		
City, State, Zip Code Madison, MS 39110-9611		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$725.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Civil Solutions LLC	06/06/2023	\$500.00
Mailing Address PO Box 15039		
City, State, Zip Code Hattiesburg, MS 39404-5039		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Claude Clayton	06/27/2023	\$100.00
Mailing Address PO Box 755		
City, State, Zip Code Tupelo, MS 38802-0755		
Name of Employer (Required) Clayton O'Donnell		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,100.00

Name of Candidate or Committee Bra	andon Presie	У
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Source:	Corporation	□PAC ✓Individual fy)	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name R. H. Dun	lap			06/29/2023	\$10,000.00
Mailing Addre	288				
City, State, Zi)			
•	loyer(Required) Kyle Co, Inc.				
Occupation (F	Required)			Aggregate year-to-date	\$20,000.00
Source:	Corporation	□PAC ✓Individual fy)	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Brom	bacher			06/30/2023	\$50.00
Mailing Addre					
City, State, Zi Madison,	p Code MS 39110-9227				
Name of Emp Not Emplo	loyer (Required) byed				
Occupation (F				Aggregate year-to-date	\$325.00
Source:	Corporation	□PAC ✓Individual fy)	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Wa	lker			06/30/2023	\$25.00
Mailing Addre	ess Colony Blvd				
City, State, Zi Jackson ,	p Code MS 39206-2404				
	loyer (Required) mergency Managen	ment Agency			
Occupation (F Administr	Required) ative Support Sp	pecialist		Aggregate year-to-date	\$250.00
Source:	Corporation	□PAC ✓Individual fy)	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Chris Wil	.son			06/12/2023	\$250.00
Mailing Addre	988				
City, State, Zi					
	loyer (Required)				
Occupation (F Marketing	Required) Consultant			Aggregate year-to-date	\$250.00

Name of Candidate or Committee	Brandon	Presley
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Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny D.	Jones				06/13/2023	\$100.00
Mailing Addre	ess ar Orchard Rd					
City, State, Zi Ridgeland	p Code 1, MS 39157-483	б				
Name of Emp The DELTA	loyer (Required) A Project					
Occupation (I	Required)				Aggregate year-to-date	\$1,253.50
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann J. Ak	badie				06/24/2023	\$100.00
Mailing Addre						
City, State, Zi Oxford, M	p Code 1S 38655-4920					
Name of Emp Not Emplo	loyer (Required) byed					
Occupation (I Retired	Required)				Aggregate year-to-date	\$690.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Watt Bish	юр				06/28/2023	\$100.00
Mailing Addre						
City, State, Zi						
Name of Emp Not Emplo	loyer (Required) byed					
Occupation (I					Aggregate year-to-date	\$300.00
Source:	Corporation	PAC	Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gayle Mas	sey				06/20/2023	\$25.00
Mailing Addre						
City, State, Zi Ridgeland	p Code 1, MS 39157-940	2				
	loyer (Required)					
Occupation (I	Required)				Aggregate year-to-date	\$275.00
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Name of Can	didate or	Committee	Brandon	Presley
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Source:	Corporation PA		Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Peter But	tross Jr			06/02/2023	\$50.00
Mailing Addre 206 S Rar					
City, State, Zi Natchez ,	p Code MS 39120-3536				
Name of Emp Not Emplo	loyer (Required) byed				
Occupation (I Retired	Required)			Aggregate year-to-date	\$325.00
Source:	Corporation PA		Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra B.	Young			06/12/2023	\$200.00
Mailing Addre 27 County	ess 7 Road 3024				
-	IS 38655-9786				
	loyer (Required) cy of Mississippi				
Occupation (I Academic				Aggregate year-to-date	\$450.00
Source:	Corporation PA	C 🗸 Individual	Loan	Date	Amount of each receipt this
	Other (please specify)			(Mo., Day, Year)	period
Full Name Laura Mck				(Mo., Day, Year)	
Laura Mck Mailing Addre	cerns ess				period
Laura Mck Mailing Addre 813 42nd City, State, Zi	erns ess Ave				period
Laura Mck Mailing Addre 813 42nd City, State, Zi Gulfport,	cerns ess Ave p Code MS 39501-1451 loyer (Required)				period
Laura Mck Mailing Addre 813 42nd City, State, Zi Gulfport, Name of Emp	xerns ess Ave p Code MS 39501-1451 loyer (Required) oyed				period
Laura Mck Mailing Addre 813 42nd City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (H	xerns ess Ave p Code MS 39501-1451 loyer (Required) oyed	C VIndividual	Loan	06/05/2023 Aggregate	period \$100.00
Laura Mck Mailing Addre 813 42nd City, State, Zi Gulfport, Name of Emplo Occupation (I Retired	xerns Ave p Code MS 39501-1451 loyer (Required) byed Required) Corporation PA Other (please specify)	C VIndividual	Loan	06/05/2023 Aggregate year-to-date Date	period \$100.00 \$250.00 Amount of each receipt this
Laura Mck Mailing Addre 813 42nd City, State, Zi Gulfport, Name of Emplo Occupation (H Retired Source: Full Name	Ave p Code MS 39501-1451 loyer (Required) byed Required) Corporation PA Other (please specify) Etus Ess	C VIndividual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	period \$100.00 \$250.00 Amount of each receipt this period
Laura Mck Mailing Addre 813 42nd City, State, Zi Gulfport, Name of Emplo Occupation (H Retired Source: Full Name Nancy Lof Mailing Addre 20329 Lor City, State, Zi	cerns ess Ave p Code MS 39501-1451 loyer (Required) byed Required) Corporation PA Other (please specify) Etus ess ngview Rd p Code	C VIndividual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	period \$100.00 \$250.00 Amount of each receipt this period
Laura Mck Mailing Addre 813 42nd City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (I Retired Source: Full Name Nancy Lof Mailing Addre 20329 Lor City, State, Zi Long Beac	cerns Ave p Code MS 39501-1451 loyer (Required) byed Required) Corporation PA Other (please specify) Etus ess ngview Rd	C 🔽 Individual		Aggregate year-to-date Date (Mo., Day, Year)	period \$100.00 \$250.00 Amount of each receipt this period
Laura Mck Mailing Addre 813 42nd City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (R Retired Source: Full Name Nancy Lof Mailing Addre 20329 Lor City, State, Zi Long Beac Name of Emp Catholic	cerns ass Ave p Code MS 39501-1451 loyer (Required) byed Required) Other (please specify) Etus ess ngview Rd p Code ch, MS 39560-9026 loyer (Required) Charities of South M	C 🔽 Individual		Aggregate year-to-date Date (Mo., Day, Year)	period \$100.00 \$250.00 Amount of each receipt this period

Name of Candidate or Committee Br	andon Pr	esley
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Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bruce Dav	is	06/05/2023	\$5.00
Mailing Addre	ess Oaks Cir	-	
City, State, Zi		-	
Name of Emp Not Emplo	loyer (Required) yed		
Occupation (F		Aggregate year-to-date	\$255.00
Source:	Corporation □PAC ✓Individual □Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Sl	akie	06/25/2023	\$30.00
Mailing Addre 4706 Buck	ess ingham Dr	-	
City, State, Zij Chattanoo	p Code ga, TN 37421-1108		
Name of Emp Regal	loyer (Required)		
Occupation (F Usher	Required)	Aggregate year-to-date	\$422.60
Source:	Corporation □ PAC ✓ Individual □ Loan □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Victor Ca	mpbell	06/29/2023	\$1,000.00
Mailing Addre	ess kering Rd		
City, State, Zi Nashville	p Code 2, TN 37215-4521		
Name of Emp Not Emplo	loyer (Required) yed		
Occupation (F Retired	Required)	Aggregate year-to-date	\$1,000.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Duncan M.	Gray III	06/30/2023	\$150.00
Mailing Addre			
City, State, Zi		1	
Name of Emp	loyer (Required) Episcopal Church	1	
Occupation (F		Aggregate year-to-date	\$500.00
<u> </u>		<u>I</u>	

Name of Can	didate or	Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Collins	06/13/2023	\$50.00
Mailing Address 1826 Ray St		
City, State, Zip Code Ocean Springs, MS 39564-2930		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars	06/05/2023	\$5.00
Mailing Address 48 County Road 229		
City, State, Zip Code Oxford, MS 38655-5800		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$380.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name H Scott Ross	(Mo., Day, Year)	receipt this
Full Name		receipt this period
Full Name H Scott Ross Mailing Address PO Box 332 City, State, Zip Code		receipt this period
Full Name H Scott Ross Mailing Address PO Box 332		receipt this period
Full Name H Scott Ross Mailing Address PO Box 332 City, State, Zip Code West Point, MS 39773-0332 Name of Employer (Required)		receipt this period
Full Name H Scott Ross Mailing Address PO Box 332 City, State, Zip Code West Point, MS 39773-0332 Name of Employer (Required) Self Employed Occupation (Required)	06/26/2023	receipt this period \$2,500.00
Full Name H Scott Ross Mailing Address PO Box 332 City, State, Zip Code West Point, MS 39773-0332 Name of Employer (Required) Self Employed Occupation (Required) Attorney Source: Corporation PAC Individual	Aggregate year-to-date	receipt this period \$2,500.00 \$5,000.00 Amount of each receipt this
Full Name H Scott Ross Mailing Address PO Box 332 City, State, Zip Code West Point, MS 39773-0332 Name of Employer (Required) Self Employed Occupation (Required) Attorney Source: Corporation PAC Individual Under (please specify)	Aggregate year-to-date (Mo., Day, Year)	receipt this period \$2,500.00 \$5,000.00 Amount of each receipt this period
Full Name H Scott Ross Mailing Address PO Box 332 City, State, Zip Code West Point, MS 39773-0332 Name of Employer (Required) Self Employed Occupation (Required) Attorney Source: Ocrporation PAC Individual Loan Other (please specify) Full Name Melvin Warren Mailing Address	Aggregate year-to-date (Mo., Day, Year)	receipt this period \$2,500.00 \$5,000.00 Amount of each receipt this period
Full Name H Scott Ross Mailing Address PO Box 332 City, State, Zip Code West Point, MS 39773-0332 Name of Employer (Required) Self Employed Occupation (Required) Attorney Source: □Corporation □Other (please specify) Full Name Melvin Warren Mailing Address 26 County Road 218 City, State, Zip Code	Aggregate year-to-date (Mo., Day, Year)	receipt this period \$2,500.00 \$5,000.00 Amount of each receipt this period
Full Name H Scott Ross Mailing Address PO Box 332 City, State, Zip Code West Point, MS 39773-0332 Name of Employer (Required) Self Employed Occupation (Required) Attorney Source: □Corporation □PAC ✓Individual □Loan □Other (please specify) Full Name Melvin Warren Mailing Address 26 County Road 218 City, State, Zip Code Oxford, MS 38655-5868 Name of Employer (Required)	Aggregate year-to-date (Mo., Day, Year)	receipt this period \$2,500.00 \$5,000.00 Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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Source:	Corporation PAC ✓Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Ray	<i>r</i> mond	06/20/2023	\$25.00
Mailing Addre 3915 Sair	ess nt Charles Ave		
City, State, Zi New Orlea	pCode ans, LA 70115-4659		
Name of Emp Not Emplo	oloyer (Required) byed		
Occupation (I Not Emplo		Aggregate year-to-date	\$1,275.00
Source:	Corporation PAC ✓Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roger Wil	lliams	06/30/2023	\$25.00
Mailing Addre 194 Victo			
City, State, Zi Madison,	p Code MS 39110-5502		
	oloyer (Required) & Eager PLLC		
Occupation (I Attorney	Required)	Aggregate year-to-date	\$525.00
Source:	□Corporation □PAC □Individual □Loan ✓Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name R & L Unl	limited, LLC	06/23/2023	\$500.00
Mailing Addre			
City, State, Zi Jackson ,	p Code MS 39211-2654		
Name of Emp	oloyer (Required)		
Occupation (I	Required)	Aggregate year-to-date	\$500.00
Source:	Corporation PAC ✓Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Cu	unningham	06/30/2023	\$100.00
Mailing Addre 13462 MS	ess Highway 388		
City, State, Zi			
	loyer (Required)		
Occupation (I Farm Work		Aggregate year-to-date	\$500.00

Name of Candida	te or Committee	Brandon	Presley
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Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie We	estbrook				06/24/2023	\$1,000.00
Mailing Addre	ess ege Hill Rd					
City, State, Zi						
	loyer (Required)					
Occupation (F					Aggregate year-to-date	\$1,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jay M. Co	olbert				06/15/2023	\$1,000.00
Mailing Addre PO Box 28						
City, State, Zi Houston,	p Code MS 38851-0284					
•	loyer (Required) Land Services LLC	1				
Occupation (F Business					Aggregate year-to-date	\$1,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh E	Byars				06/25/2023	\$15.00
Mailing Addre	ess 7 Road 229					
City, State, Zi						
Name of Emp Not Emplo	loyer (Required) byed					
Occupation (F					Aggregate year-to-date	\$380.00
Source:	Corporation		✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gary L. S					06/27/2023	\$250.00
Mailing Addre						
965 E Sce City, State, Zi						
-	stian, MS 39571-	4701				
Name of Emp Not Emplo	loyer (Required) byed					
Occupation (F	Required)				Aggregate year-to-date	\$250.00

Name of Candidate of	r Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raburn Coln	06/14/2023	\$22.50
Mailing Address 288 County Road 218		
City, State, Zip Code Corinth, MS 38834-7531		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$247.50
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sandra Ray	06/15/2023	\$200.00
Mailing Address 144 Youngswood Loop		
City, State, Zip Code Pass Christian, MS 39571-2310		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Vivien C. Carver	06/16/2023	\$300.00
Mailing Address 2201 S 40th Ave		
City, State, Zip Code Hattiesburg, MS 39402-2915		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stacey Abrams	06/27/2023	\$500.00
Mailing Address 1180 W Peachtree St NW		
City, State, Zip Code Atlanta, GA 30309-3728		
Name of Employer (Required) Sage Works Productions		
Occupation (Required) CEO	Aggregate year-to-date	\$500.00
690		

Name of	Candidate or	Committee	Brandon	Presley
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Source:					
Course.	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John C. Ro	DSS			06/28/2023	\$300.00
Mailing Addres					
City, State, Zip Corinth, M	Code 4S 38835-1681				
Name of Emplo	oyer (Required) byed				
Occupation (Re Attorney	equired)			Aggregate year-to-date	\$300.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joanna Sho	ows			06/24/2023	\$100.00
Mailing Addres	ss con Hilltop Rd				
City, State, Zip Columbia,	Code MS 39429-8035				
Name of Emplo Keen Sharp	oyer (Required) pening				
Occupation (Re Cutler	equired)			Aggregate year-to-date	\$425.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					
Gratia Kai	rmes			06/05/2023	\$15.00
Gratia Kar Mailing Addres	S			06/05/2023	\$15.00
Gratia Kan Mailing Addres 417 Chapir City, State, Zip	ss n St			06/05/2023	\$15.00
Gratia Kan Mailing Addres 417 Chapir City, State, Zip Starkville	ss 1 St Code 2, MS 39759-2620 oyer (Required)			06/05/2023	\$15.00
Gratia Kan Mailing Addres 417 Chapir City, State, Zip Starkville Name of Emplo	ss n St Code e, MS 39759-2620 over (Required) red equired)			06/05/2023 Aggregate year-to-date	\$15.00 \$265.00
Gratia Kan Mailing Addres 417 Chapir City, State, Zip Starkville Name of Employ Occupation (Re	ss n St Code e, MS 39759-2620 over (Required) red equired)	✓ Individual	Loan	Aggregate	
Gratia Kan Mailing Addres 417 Chapir City, State, Zip Starkville Name of Employ Occupation (Re Not Employ	ss 1 St Code 2, MS 39759-2620 byer (Required) yred equired) yred Corporation PAC Other (please specify)		Loan	Aggregate year-to-date Date	\$265.00 Amount of each receipt this
Gratia Kan Mailing Addres 417 Chapin City, State, Zip Starkville Name of Employ Occupation (Re Not Employ Occupation (Re Not Employ Source: Full Name Johnny D. Mailing Addres	ss St Code (Required) yer (Required) yed equired) yed Corporation PAC Other (please specify) Jones		Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$265.00 Amount of each receipt this period
Gratia Kan Mailing Addres 417 Chapin City, State, Zip Starkville Name of Employ Occupation (Re Not Employ Occupation (Re Not Employ Source: Full Name Johnny D. Mailing Addres 611 S Pean City, State, Zip	ss St Code (Required) yed equired) yed Corporation PAC Other (please specify) Jones ss C Orchard Rd		Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$265.00 Amount of each receipt this period
Gratia Kan Mailing Addres 417 Chapir City, State, Zip Starkville Name of Employ Occupation (Re Not Employ Occupation (Re Not Employ Source: Full Name Johnny D. Mailing Addres 611 S Pean City, State, Zip Ridgeland	ss 1 St Code 2, MS 39759-2620 byer (Required) yed equired) yed Corporation PAC Other (please specify) Jones ss c Orchard Rd Code , MS 39157-4836 byer (Required)		Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$265.00 Amount of each receipt this period
Gratia Kan Mailing Addres 417 Chapir City, State, Zip Starkville Name of Employ Occupation (Re Not Employ Occupation (Re Not Employ Source: Full Name Johnny D. Mailing Addres 611 S Pean City, State, Zip Ridgeland Name of Employ	ss a St Code e, MS 39759-2620 byer (Required) yred equired) yred Corporation PAC Other (please specify) Jones ss c Orchard Rd Code , MS 39157-4836 byer (Required) Project		Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$265.00 Amount of each receipt this period

Name of Candidate or Committee Br	andon Pr	esley
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Reporting Period6/1/2023through6/30/2023

ITEMIZED RECEIPTS

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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Rabalais	06/28/2023	\$15.00
Mailing Address 132 Sara Fox Dr		
City, State, Zip Code Brandon , MS 39047-5526		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$201.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Rankin	06/13/2023	\$25.00
Mailing Address PO Box 219		
City, State, Zip Code Braxton, MS 39044-0219		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Raymond	06/13/2023	\$5.00
Mailing Address 3915 Saint Charles Ave		
City, State, Zip Code New Orleans, LA 70115-4659		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,275.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Miriam Harrington	06/05/2023	\$25.00
Mailing Address 3800 Fairfax Dr		
City, State, Zip Code Arlington, VA 22203-1720		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$218.00

Name of Candidate or Committee Bra	andon Pre	sley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dorothy Roberts	06/27/2023	\$250.00
Mailing Address 252 Handy Ln		
City, State, Zip Code Pass Christian, MS 39571-4426		
Name of Employer (Required) Robin's Nest In The Pass		
Occupation (Required) Business Owner	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny	06/08/2023	\$15.00
Mailing Address 6230 Wilshire Blvd		
City, State, Zip Code Los Angeles, CA 90048-5126		
Name of Employer (Required) Self Employed		
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$252.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Billy Atwood	06/28/2023	\$1,000.00
Mailing Address 714 Old Brock Rd		
City, State, Zip Code Weatherford, TX 76088-8708		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$2,100.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cindy Akins	06/28/2023	\$50.00
Mailing Address 86449 Meadowwood Dr		
City, State, Zip Code Yulee, FL 32097-6427		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00

Name of Candidate of	r Committee	Brandon	Presley
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Source:	Corporation PAC v Other (please specify)	/Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa Stev	ens			06/19/2023	\$25.00
Mailing Addre					
City, State, Zij Boonevill	o Code e, MS 38829-2609				
•	oyer(Required) munity College				
Occupation (F College I	Required) nstructor			Aggregate year-to-date	\$250.00
Source:	Corporation PAC v	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard C	ourtney			06/29/2023	\$250.00
Mailing Addre PO Box 23					
City, State, Zij Jackson,	o Code MS 39225-3126				
	oyer (Required) Elder Law				
Occupation (F Attorney	Required)			Aggregate year-to-date	\$600.00
Source:	Corporation PAC v	Individual	Loan	Date	Amount of each
	Other (please specify)			(Mo., Day, Year)	receipt this period
Full Name Alexe Van				(Mo., Day, Year)	
Alexe Van Mailing Addre	Beuren				period
Alexe Van Mailing Addre 509 Wagne City, State, Zij	Beuren ss r St c Code				period
Alexe Van Mailing Addre 509 Wagne City, State, Zi Water Val Name of Emp	Beuren ss r St				period
Alexe Van Mailing Addre 509 Wagne City, State, Zi Water Val Name of Emp	Beuren ss r St o Code ley, MS 38965-2301 oyer (Required) d-Fashioned Grocery Required)				period
Alexe Van Mailing Addre 509 Wagne City, State, Zi Water Val Name of Emp B.T.C. Ol Occupation (F	Beuren ss r St o Code ley, MS 38965-2301 oyer (Required) d-Fashioned Grocery Required) Owner	ZIndividual	Loan	06/01/2023 Aggregate	period \$250.00
Alexe Van Mailing Addre 509 Wagne City, State, Zij Water Val Name of Emp B.T.C. Ol Occupation (F Business	Beuren ss r St o Code ley, MS 38965-2301 oyer (Required) d-Fashioned Grocery Required) Owner Corporation PAC v Other (please specify)	Individual		06/01/2023 Aggregate year-to-date Date	period \$250.00 \$250.00 Amount of each receipt this
Alexe Van Mailing Addre 509 Wagne City, State, Zij Water Val Name of Emp B.T.C. Ol Occupation (F Business Source: Full Name Karen K. Mailing Addre	Beuren ss r St o Code ley, MS 38965-2301 oyer (Required) d-Fashioned Grocery Required) Owner Corporation PAC v Other (please specify) Sawyer ss	✓Individual		06/01/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$250.00 \$250.00 \$250.00 Amount of each receipt this period
Alexe Van Mailing Addre 509 Wagne City, State, Zij Water Val Name of Emp B.T.C. Ol Occupation (F Business Source: Full Name Karen K. Mailing Addre 150 Spenc City, State, Zij	Beuren ss r St o Code ley, MS 38965-2301 oyer (Required) d-Fashioned Grocery Required) Owner Corporation PAC v Other (please specify) Sawyer ss e Dr o Code	Individual		06/01/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$250.00 \$250.00 \$250.00 Amount of each receipt this period
Alexe Van Mailing Addre 509 Wagne City, State, Zij Water Val Name of Emp B.T.C. Ol Occupation (F Business Source: Full Name Karen K. Mailing Addre 150 Spence City, State, Zij Pass Chri	Beuren ss r St o Code ley, MS 38965-2301 oyer (Required) d-Fashioned Grocery Required) Owner Corporation PAC v Other (please specify) Sawyer ss e Dr o Code stian, MS 39571-4839 oyer (Required)	✓Individual		06/01/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$250.00 \$250.00 \$250.00 Amount of each receipt this period
Alexe Van Mailing Addre 509 Wagne City, State, Zi Water Val Name of Emp B.T.C. Ol Occupation (F Business Source: Full Name Karen K. Mailing Addre 150 Spence City, State, Zi Pass Chri Name of Emp	Beuren ss r St o Code ley, MS 38965-2301 oyer (Required) d-Fashioned Grocery Required) Owner Corporation PAC v Other (please specify) Sawyer ss e Dr o Code stian, MS 39571-4839 oyer (Required) yed Required)	✓Individual		06/01/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$250.00 \$250.00 \$250.00 Amount of each receipt this period

Name of Candidate or Committee Bra	andon Presie	У
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Colleen Haas	06/08/2023	\$500.00
Mailing Address 69 Crecienta Dr		
City, State, Zip Code Sausalito, CA 94965-1882		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Foshee	06/29/2023	\$10.00
Mailing Address Not Employed		
City, State, Zip Code Hattiesburg, MS 39402		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$383.00
Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie	06/20/2023	\$25.00
Mailing Address 4706 Buckingham Dr		
City, State, Zip Code Chattanooga, TN 37421-1108		
Name of Employer (Required) Regal		
Occupation (Required) Usher	Aggregate year-to-date	\$422.60
Source: ☐Corporation ☐PAC ✔Individual ☐Loan ☐Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	06/14/2023	\$1,000.00
Latoya Merritt Mailing Address		
232 Jasmine Dr		
City, State, Zip Code Byram, MS 39212-3282		
Name of Employer (Required) Phelps Dunbar LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00

Name of Candidate or Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Raymond	06/24/2023	\$25.00
Mailing Address 3915 Saint Charles Ave		
City, State, Zip Code New Orleans, LA 70115-4659		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,275.00
Source: Corporation PAC 🖌 Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Richardson	06/05/2023	\$100.00
Mailing Address 6008 Vista Cir	_	
City, State, Zip Code Gulfport, MS 39507-4634		
Name of Employer (Required) Chism Strategies		
Occupation (Required) Consultant	Aggregate year-to-date	\$1,100.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Latham	06/27/2023	\$100.00
Mailing Address 2090 Jefferson Pkwy		
City, State, Zip Code Hernando, MS 38632-5905		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard B. Schwartz	06/28/2023	\$5,000.00
Mailing Address PO Box 3949		
City, State, Zip Code Jackson, MS 39207-3949		
Name of Employer (Required) Schwartz & Associates		
Occupation (Required) Attorney	Aggregate year-to-date	\$20,000.00

Name of Candidate of	r Committee	Brandon	Presley
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ITEMIZED	RECEIPTS

Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martin Da	niel Crump			06/21/2023	\$2,500.00
Mailing Addre 2601 14th					
City, State, Zig Gulfport,	D Code MS 39501-1926				
Name of Emp Davis & C	oyer (Required) rump, PC				
Occupation (F Attorney	Required)			Aggregate year-to-date	\$7,500.00
Source:		PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James A.	Koerber			06/04/2023	\$250.00
Mailing Addre					
City, State, Zij Hattiesbu	o Code rg, MS 39404-8170				
Name of Empl EisnerAmp	oyer (Required) er				
Occupation (F Accountan				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Geog	hegan			06/24/2023	\$100.00
Mailing Addre					
City, State, Zij Brandon,	o Code MS 39047-9007				
Name of Emplo	oyer (Required) yed				
Occupation (F Retired	Required)			Aggregate year-to-date	\$500.00
Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa McCo	llom			06/25/2023	\$25.00
Mailing Addre 201 Hoffm					
City, State, Zig Waveland,	Code MS 39576-4312				
	oyer (Required)				
Occupation (F Flight At				Aggregate year-to-date	\$211.75

Name of Candidate	or Committee	Brandon	Presley
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Source:	□ Corporation □ PAC ✓ Individual □ Loan □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Russell J	olly	06/28/2023	\$500.00
Mailing Addre 369 Highw			
City, State, Zip Houston,	D Code MS 38851-7746		
Name of Emplo	oyer (Required) yed		
Occupation (F Retired	Required)	Aggregate year-to-date	\$500.00
Source:	Corporation □PAC ✓Individual □Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Wa	lker	06/30/2023	\$100.00
Mailing Addre 5950 B N	ss Colony Blvd		
City, State, Zip Jackson,	D Code MS 39206-2404		
	oyer (Required) mergency Management Agency		
Occupation (F		Aggregate year-to-date	\$250.00
Source:	Corporation PAC ✓Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Sl	akie	06/30/2023	\$50.00
Mailing Addre 4706 Buck			
City, State, Zip			
Name of Empl Regal	oyer (Required)		
Occupation (F Usher	Required)	Aggregate year-to-date	\$422.60
Source:	□Corporation □PAC ✓Individual □Loan	Date	Amount of each receipt this
	Other (please specify)	(Mo., Day, Year)	period
Full Name Marian Ku	rz	06/30/2023	\$25.00
Mailing Addre 1300 Cent			
City, State, Zip Evanston,	Code IL 60201-1676		
	oyer (Required)		
Occupation (F Public Re		Aggregate year-to-date	\$210.00

Name of Candidate or Committee Br	randon	Presley
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Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Mck	erns	06/05/2023	\$100.00
Mailing Addre 813 42nd		-	
City, State, Zig Gulfport,	D Code MS 39501-1451		
Name of Emplo	oyer (Required) yed		
Occupation (F Retired	Required)	Aggregate year-to-date	\$250.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lana Rich	ardson	06/25/2023	\$25.00
Mailing Addre	ss nty Road 500	-	
	S 38663-9199		
Name of Emplo	oyer (Required) yed		
Occupation (F Not Emplo		Aggregate year-to-date	\$225.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jimmyle L	istenbee	06/26/2023	\$300.00
Mailing Addre	ss Road 3073		
City, State, Zij Taylor, M	o Code S 38673-4513		
Name of Emplo	oyer (Required) yed		
Occupation (F Not Emplo		Aggregate year-to-date	\$300.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marcus Wa	llace	06/29/2023	\$250.00
Mailing Addre 317 E Cap		-	
City, State, Zi		1	
Name of Emp	oyer (Required) ociates,LLC		
Occupation (F Business	Required)	Aggregate year-to-date	\$250.00
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Name of	Candidate or	Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Russell Smith	06/30/2023	\$100.00
Mailing Address 158 Arlington Rd		
City, State, Zip Code Beaumont, MS 39423-2617		
Name of Employer (Required) Bentley Systems, Inc.		
Occupation (Required) Software Development Manager	Aggregate year-to-date	\$541.40
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard C. Howorth	06/30/2023	\$250.00
Mailing Address 310 N 16th St		
City, State, Zip Code Oxford, MS 38655-3712		
Name of Employer (Required) Square Books		
Occupation (Required) Business Owner	Aggregate year-to-date	\$1,750.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name James Raymond	(Mo., Day, Year) 06/16/2023	
Full Name	_	period
Full Name James Raymond Mailing Address	_	period
Full Name James Raymond Mailing Address 3915 Saint Charles Ave City, State, Zip Code	_	period
Full Name James Raymond Mailing Address 3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required)	_	period
Full Name James Raymond Mailing Address 3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required) Not Employed Occupation (Required)	06/16/2023	period \$25.00
Full Name James Raymond Mailing Address 3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation	Aggregate year-to-date	period \$25.00 \$1,275.00 Amount of each receipt this
Full Name James Raymond Mailing Address 3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Individual Loan Other (please specify) Full Name Kayla Sween Mailing Address		period \$25.00 \$1,275.00 Amount of each receipt this period
Full Name James Raymond Mailing Address 3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation □Other (please specify) Full Name Kayla Sween Mailing Address 1414 Ruby Pt City, State, Zip Code		period \$25.00 \$1,275.00 Amount of each receipt this period
Full Name James Raymond Mailing Address 3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □Other (please specify) Full Name Kayla Sween Mailing Address 1414 Ruby Pt		period \$25.00 \$1,275.00 Amount of each receipt this period
Full Name James Raymond Mailing Address 3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation Other (please specify) Full Name Kayla Sween Mailing Address 1414 Ruby Pt City, State, Zip Code Flowood, MS 39232-5013 Name of Employer (Required)		period \$25.00 \$1,275.00 Amount of each receipt this period

Name of Can	didate or	Committee	Brandon	Presley
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Source:	Corporation F	AC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth	W. Slifer			06/27/2023	\$500.00
Mailing Addre 230 Bridg					
City, State, Zip					
Name of Empl Self Empl	oyer (Required) oyed				
Occupation (R Interior				Aggregate year-to-date	\$500.00
Source:	Corporation F	AC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Tea	sley			06/30/2023	\$100.00
Mailing Addre 100 Aspen					
City, State, Zip Madison,	OCode MS 39110-9712				
Name of Emplo	oyer (Required) yed				
Occupation (R Not Emplo				Aggregate year-to-date	\$275.00
Source:	Corporation	AC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Sl	akie			06/13/2023	\$6.00
Mailing Addre 4706 Buck					
City, State, Zip Chattanoo	o Code ga, TN 37421-1108				
Name of Empl Regal	oyer (Required)				
Occupation (R Usher	equired)			Aggregate year-to-date	\$422.60
Source:	Corporation F	AC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard R	hoden			06/15/2023	\$50.00
Mailing Addre 778 Gille					
City, State, Zip					
	oyer (Required)				
Occupation (R Physician	equired)			Aggregate year-to-date	\$450.00
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Name of Candidate or	Committee	Brandon	Presley
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Reporting Period6/1/2023through6/30/2023

ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Rabalais	06/26/2023	\$25.00
Mailing Address 132 Sara Fox Dr		
City, State, Zip Code Brandon , MS 39047-5526		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$201.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny Wray	06/28/2023	\$25.00
Mailing Address 731 Milam Rd		
City, State, Zip Code Cedarbluff, MS 39741-9021		
Name of Employer (Required) Self Employed		
Occupation (Required)	Aggregate year-to-date	\$325.00
Farmer	, ea. 10 auto	
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC Individual Loan Other (please specify) Full Name	Date	receipt this
Source: Corporation PAC Individual Loan Other (please specify) Full Name John Bradley Mailing Address	Date (Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify) John Bradley Mailing Address 107 Philip Rd City, State, Zip Code	Date (Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify) Full Name John Bradley Mailing Address 107 Philip Rd City, State, Zip Code Oxford, MS 38655-2013 Name of Employer (Required) Not Employed Occupation (Required)	Date (Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify) Full Name John Bradley Mailing Address 107 Philip Rd City, State, Zip Code Oxford, MS 38655-2013 Name of Employer (Required) Not Employed	Date (Mo., Day, Year) 06/22/2023 Aggregate	receipt this period \$500.00
Source: Corporation PAC ✓ Individual Loan Other (please specify)	Date (Mo., Day, Year) 06/22/2023 Aggregate year-to-date Date	receipt this period \$500.00 \$7,000.00 Amount of each receipt this
Source: Corporation PAC Individual Loan Other (please specify) Full Name John Bradley Mailing Address 107 Philip Rd City, State, Zip Code Oxford, MS 38655-2013 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name	Date (Mo., Day, Year) 06/22/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$500.00 \$7,000.00 Amount of each receipt this period
Source: □Corporation □PAC ☑Individual □Loan □Other (please specify)	Date (Mo., Day, Year) 06/22/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$500.00 \$7,000.00 Amount of each receipt this period
Source: Corporation PAC ✓Individual Loan Other (please specify)	Date (Mo., Day, Year) 06/22/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$500.00 \$7,000.00 Amount of each receipt this period

Name of Candidate or Committee Bra	andon Presie	У
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Source:	Corporation	PAC 🖌 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathy Ols	en			06/26/2023	\$15,000.00
Mailing Addre					
City, State, Zip Nashville	Code , TN 37215-0829				
Name of Emplo	oyer (Required) yed				
Occupation (F Retired	Required)			Aggregate year-to-date	\$55,000.00
Source:	Corporation	PAC 🖌 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George H.	Williams			06/08/2023	\$10.00
Mailing Addre 100 Marti	SS				
	, MS 39157-3419				
Name of Emplo	oyer (Required) yed				
Occupation (F Retired	Required)			Aggregate year-to-date	\$480.00
Source:	Corporation	PAC 🗸 Individual	Loan	Date	Amount of each
	Other (please specify)			(Mo., Day, Year)	receipt this period
Full Name Deirdre P				(Mo., Day, Year) 06/09/2023	
	hillips ss				period
Deirdre P Mailing Addre 200 Jeffe City, State, Zip	hillips ss rson Rdg				period
Deirdre P Mailing Addre 200 Jeffe City, State, Zip Ridgeland Name of Empl	hillips ss rson Rdg o Code				period
Deirdre P Mailing Addre 200 Jeffe City, State, Zip Ridgeland Name of Empl	hillips ss rson Rdg o Code , MS 39157-9101 oyer (Required) lth System Required)				period
Deirdre P Mailing Addre 200 Jeffe City, State, Zip Ridgeland Name of Empl Delta Hea Occupation (F	hillips ss rson Rdg o Code , MS 39157-9101 oyer (Required) lth System Required)	PAC VIndividual	Loan	06/09/2023 Aggregate	period \$50.00
Deirdre P Mailing Addre 200 Jeffe City, State, Zig Ridgeland Name of Empl Delta Hea Occupation (F Physician	hillips ss rson Rdg o Code , MS 39157-9101 oyer (Required) lth System Required) Corporation	PAC VIndividual		06/09/2023 Aggregate year-to-date Date	period \$50.00 \$300.00 Amount of each receipt this
Deirdre P Mailing Addre 200 Jeffe City, State, Zip Ridgeland Name of Empl Delta Hea Occupation (F Physician Source: Full Name Susan Wat Mailing Addre	hillips ss rson Rdg o Code , MS 39157-9101 oyer (Required) lth System Required) Corporation	PAC VIndividual		Aggregate year-to-date Date (Mo., Day, Year)	period \$50.00 \$300.00 Amount of each receipt this period
Deirdre P Mailing Addre 200 Jeffe City, State, Zig Ridgeland Name of Empl Delta Hea Occupation (F Physician Source: Full Name Susan Wat Mailing Addre 42 County City, State, Zig	hillips ss rson Rdg o Code , MS 39157-9101 oyer (Required) lth System Required) Corporation Other (please specify) son ss Road 317 o Code	PAC VIndividual		Aggregate year-to-date Date (Mo., Day, Year)	period \$50.00 \$300.00 Amount of each receipt this period
Deirdre P Mailing Addre 200 Jeffe City, State, Zip Ridgeland Name of Empl Delta Hea Occupation (F Physician Source: Full Name Susan Wat Mailing Addre 42 County City, State, Zip Oxford, M	hillips ss rson Rdg o Code , MS 39157-9101 oyer (Required) 1th System Required) Corporation Other (please specify) son ss Road 317 o Code S 38655-5922 oyer (Required)	PAC VIndividual		Aggregate year-to-date Date (Mo., Day, Year)	period \$50.00 \$300.00 Amount of each receipt this period
Deirdre P Mailing Addre 200 Jeffe City, State, Zig Ridgeland Name of Empl Delta Hea Occupation (F Physician Source: Full Name Susan Wat Mailing Addre 42 County City, State, Zig Oxford, M Name of Empl	hillips ss rson Rdg o Code , MS 39157-9101 oyer (Required) lth System Required) Corporation Other (please specify) son ss Road 317 o Code S 38655-5922 oyer (Required) yed Required)	PAC VIndividual		Aggregate year-to-date Date (Mo., Day, Year)	period \$50.00 \$300.00 Amount of each receipt this period

Name of Candidate or Committee Bra	andon Presie	У
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 Reporting Period
 6/1/2023
 through
 6/30/2023

ITEMIZED RECEIPTS

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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Clark	06/21/2023	\$100.00
Mailing Address 167 Rolling Meadows Rd		
City, State, Zip Code Ridgeland, MS 39157-9488		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$700.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Claire Davis	06/05/2023	\$20.00
Mailing Address 44714 Audubon Sq		
City, State, Zip Code Ashburn, VA 20147-6295		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$240.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nancy Loftus	06/16/2023	\$100.00
Mailing Address 20329 Longview Rd		
City, State, Zip Code Long Beach, MS 39560-9026		
Name of Employer (Required) Catholic Charities of South MS		
Occupation (Required) Licensed Social Worker	Aggregate year-to-date	\$726.40
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Jackson	06/17/2023	\$34.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Self Employed		
Occupation (Required)	Aggregate	\$793.00

Name of Candida	te or Committee	Brandon	Presley
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Amount of each receipt this period

\$12,500.00

\$17,500.00

\$250.00

Amount of each receipt this

period

06/23/2023

6/1/2023 Reporting Period

Corporation

Source:

Full Name

6/30/2023 through

	ITEMIZ	ZED RECEIPT	ſS
PAC	🖌 Individual	Loan	Date
y)			(Mo., Day, Year)
			06/28/2023

Other (please specify)	(Mo., Day, Year)
Full Name Crymes G. Pittman	06/28/2023
Mailing Address 410 S President St	
City, State, Zip Code Jackson,MS 39201-5007	
Name of Employer (Required) Pittman, Germany, Roberts & Welsh, LLP	
Occupation (Required) Attorney	Aggregate year-to-date
Source: ☐Corporation ☐PAC ✓Individual ☐Loan ☐Other (please specify)	Date (Mo., Day, Year)

Rita Ann Somers	00/23/2023	\$250.00
Mailing Address 150 Oakhurst Trl		
City, State, Zip Code Ridgeland, MS 39157-8608		
Name of Employer (Required) Not Employed	- 	
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William N. Graham	06/06/2023	\$100.00
Mailing Address 1301 Sandlewood Dr		
City, State, Zip Code Hattiesburg, MS 39402-3042		
Name of Employer (Required) Not Employed	1	
Occupation (Required) Retired	Aggregate year-to-date	\$258.60
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Weaver	06/17/2023	\$200.00
Mailing Address 1320 Belvoir Cir		
City, State, Zip Code Jackson, MS 39202-1268		
Name of Employer (Required) Weaver Architects		
Occupation (Required) Architect	Aggregate year-to-date	\$450.00

Name of	Candidate or	Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Morris	06/27/2023	\$100.00
Mailing Address 2218 Redbud Ln		
City, State, Zip Code Jackson, MS 39212-2349		
Name of Employer (Required) St Dominic Hospital		
Occupation (Required) Respiratory Therapist	Aggregate year-to-date	\$300.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jayne Buttross	06/27/2023	\$250.00
Mailing Address 329 E Mayes St		
City, State, Zip Code Jackson,MS 39206-5718		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$850.00
Source: Corporation PAC 🗸 Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
		receipt this
Other (please specify)	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Ronald Simms Mailing Address	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Ronald Simms Mailing Address 871 N Siwell Rd City, State, Zip Code	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Ronald Simms Mailing Address 871 N Siwell Rd City, State, Zip Code Jackson, MS 39209-9211 Name of Employer (Required)	(Mo., Day, Year)	receipt this period
□Other (please specify) Full Name Ronald Simms Mailing Address 871 N Siwell Rd City, State, Zip Code Jackson, MS 39209-9211 Name of Employer (Required) Stribling Equipment Occupation (Required) Programmer Source: □Corporation □PAC □Individual	(Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date	receipt this period \$10.00 \$260.00 Amount of each receipt this
□Other (please specify) Full Name Ronald Simms Mailing Address 871 N Siwell Rd City, State, Zip Code Jackson, MS 39209-9211 Name of Employer (Required) Stribling Equipment Occupation (Required) Programmer Source: □Corporation □Other (please specify)	(Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$10.00 \$260.00 Amount of each receipt this period
□Other (please specify) Full Name Ronald Simms Mailing Address 871 N Siwell Rd City, State, Zip Code Jackson, MS 39209-9211 Name of Employer (Required) Stribling Equipment Occupation (Required) Programmer Source: □Corporation □Other (please specify) Full Name Andrew Dickson	(Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date	receipt this period \$10.00 \$260.00 Amount of each receipt this
□Other (please specify) Full Name Ronald Simms Mailing Address 871 N Siwell Rd City, State, Zip Code Jackson, MS 39209-9211 Name of Employer (Required) Stribling Equipment Occupation (Required) Programmer Source: □Corporation □Other (please specify) Full Name Andrew Dickson Mailing Address 807STH 19Th Ave	(Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$10.00 \$260.00 Amount of each receipt this period
□Other (please specify) Full Name Ronald Simms Mailing Address 871 N Siwell Rd City, State, Zip Code Jackson, MS 39209-9211 Name of Employer (Required) Stribling Equipment Occupation (Required) Programmer Source: □Other (please specify) Full Name Andrew Dickson Mailing Address	(Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$10.00 \$260.00 Amount of each receipt this period
□Other (please specify) Full Name Ronald Simms Mailing Address 871 N Siwell Rd City, State, Zip Code Jackson, MS 39209-9211 Name of Employer (Required) Stribling Equipment Occupation (Required) Programmer Source: □Corporation □Other (please specify) Full Name Andrew Dickson Mailing Address 807STH 19Th Ave City, State, Zip Code	(Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$10.00 \$260.00 Amount of each receipt this period
□Other (please specify) Full Name Ronald Simms Mailing Address 871 N Siwell Rd City, State, Zip Code Jackson, MS 39209-9211 Name of Employer (Required) Stribling Equipment Occupation (Required) Programmer Source: □Corporation □Other (please specify)	(Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$10.00 \$260.00 Amount of each receipt this period

Name of Candidate or Committee Bra	andon Pre	sley
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ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David van Hoogstraten	06/27/2023	\$1,000.00
Mailing Address 3533 Ordway St NW		
City, State, Zip Code Washington, DC 20016-3173		
Name of Employer (Required) US Peace Corps		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cliff Lawson	06/28/2023	\$250.00
Mailing Address 301 Panola St		
City, State, Zip Code Water Valley, MS 38965-2424		
Name of Employer (Required) US Navy		
Occupation (Required) Writer	Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny	06/29/2023	\$10.00
Mailing Address 6230 Wilshire Blvd	-	
City, State, Zip Code Los Angeles, CA 90048-5126	-	
Name of Employer (Required) Self Employed		
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$252.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martha Vanlandingham	06/20/2023	\$50.00
Mailing Address 4830 Old West Point Rd		
City, State, Zip Code Starkville, MS 39759-8190		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$300.00

Name of Candidate	or Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugene Perrier	06/30/2023	\$25.00
Mailing Address 5540 Gibson Rd		
City, State, Zip Code Vicksburg, MS 39180-6318	-	
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$225.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark C. Wallfisch	06/01/2023	\$200.00
Mailing Address 211 Fairway Dr	-	
City, State, Zip Code Pass Christian, MS 39571-2126		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Thomas	06/03/2023	\$5.00
Mailing Address 153 Timberton Dr	-	
City, State, Zip Code	-	
Hattiesburg, MS 39401-8209		
Hattlesburg, MS 39401-8209 Name of Employer (Required) Not Employed	_	
Name of Employer (Required)	Aggregate year-to-date	\$362.00
Name of Employer (Required) Not Employed Occupation (Required)		\$362.00 Amount of each receipt this period
Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan	year-to-date Date	Amount of each receipt this
Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name Johanna Rice Mailing Address 167 Court St City, State, Zip Code	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name Johanna Rice Mailing Address 167 Court St	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name Johanna Rice Mailing Address 167 Court St City, State, Zip Code West Point, MS 39773-7990 Name of Employer (Required)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candida	te or Committee	Brandon	Presley
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Source:	Corporation	PAC 🗸 Indivi	dual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Denotee N	Martin				06/26/2023	\$100.00
Mailing Addre	ess nty Road 65				-	
City, State, Zi						
Name of Emp Not Emplo	loyer (Required) byed					
Occupation (I Not Emplo					Aggregate year-to-date	\$250.00
Source:	Corporation	PAC 🖌 Indivi	dual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Wat	cson				06/09/2023	\$500.00
Mailing Addre 42 County	ess 7 Road 317					
City, State, Zi Oxford, M	p Code 15 38655-5922					
Name of Emp Not Emplo	oloyer (Required) byed					
Occupation (I Not Emplo					Aggregate year-to-date	\$1,000.00
Source:		PAC Indivi	طبيما	Loan	Date	Amount of each
000100.	Corporation		uuai		(Mo., Day, Year)	receipt this period
Full Name						receipt this
Full Name Brad Morr Mailing Addre	Other (please specify			LUan	(Mo., Day, Year)	receipt this period
Full Name Brad Morr Mailing Addre 1603 Unix City, State, Zi	Other (please specify ris Law Firm PLCC ess versity Ave			LUan	(Mo., Day, Year)	receipt this period
Full Name Brad Morr Mailing Addre 1603 Unix City, State, Zi Oxford, M	Other (please specify cis Law Firm PLCC ess versity Ave p Code				(Mo., Day, Year)	receipt this period
Full Name Brad Morr Mailing Addre 1603 Unix City, State, Zi Oxford, M	Other (please specify cis Law Firm PLCC ess versity Ave p Code AS 38655-4127 loyer (Required)				(Mo., Day, Year)	receipt this period
Full Name Brad Morr Mailing Addre 1603 Unix City, State, Zi Oxford, M Name of Emp	Other (please specify cis Law Firm PLCC ess versity Ave p Code AS 38655-4127 loyer (Required)	D LLC		Loan	(Mo., Day, Year) 06/09/2023 Aggregate	receipt this period \$2,000.00
Full Name Brad Morr Mailing Addre 1603 Unix City, State, Zi Oxford, M Name of Emp Occupation (I	✓ Other (please specify cis Law Firm PLCC ess versity Ave p Code 1S 38655-4127 eloyer (Required) Required) Corporation Other (please specify	D LLC			(Mo., Day, Year) 06/09/2023 Aggregate year-to-date Date	receipt this period \$2,000.00 \$2,000.00 \$2,000.00 Amount of each receipt this
Full Name Brad Morr Mailing Addre 1603 Unix City, State, Zi Oxford, M Name of Emp Occupation (I Source: Full Name Barbara F Mailing Addre	✓ Other (please specify ris Law Firm PLCC ess versity Ave p Code AS 38655-4127 Noyer (Required) Required) Corporation Other (please specify Rankin ess	D LLC			(Mo., Day, Year) 06/09/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,000.00 \$2,000.00 \$2,000.00 Amount of each receipt this period
Full Name Brad Morr Mailing Addre 1603 Unix City, State, Zi Oxford, M Name of Emp Occupation (I Source: Full Name Barbara F Mailing Addre PO Box 21 City, State, Zi	✓ Other (please specify cis Law Firm PLCC ess versity Ave p Code 1S 38655-4127 loyer (Required) Required) Corporation ○ Other (please specify Rankin ess 19 p Code	D LLC			(Mo., Day, Year) 06/09/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,000.00 \$2,000.00 \$2,000.00 Amount of each receipt this period
Full Name Brad Morr Mailing Addre 1603 Unix City, State, Zi Oxford, M Name of Emp Occupation (f Source: Full Name Barbara F Mailing Addre PO Box 21 City, State, Zi Braxton,	✓ Other (please specify cis Law Firm PLCC ess versity Ave p Code AS 38655-4127 loyer (Required) Required) Corporation ☐ Other (please specify Rankin ess 19 p Code MS 39044-0219 loyer (Required)	D LLC			(Mo., Day, Year) 06/09/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,000.00 \$2,000.00 \$2,000.00 Amount of each receipt this period
Full Name Brad Morr Mailing Addre 1603 Unix City, State, Zi Oxford, M Name of Emp Occupation (I Source: Full Name Barbara F Mailing Addre PO Box 21 City, State, Zi Braxton, Name of Emp	✓ Other (please specify cis Law Firm PLCC ess versity Ave p Code AS 38655-4127 Hoyer (Required) Required) Corporation ☐ Other (please specify Rankin ess L9 p Code MS 39044-0219 Hoyer (Required) byed Required)	D LLC			(Mo., Day, Year) 06/09/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,000.00 \$2,000.00 \$2,000.00 Amount of each receipt this period

Name of Candidate or Committee Br	andon Pr	esley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Hudson	06/14/2023	\$500.00
Mailing Address 131 Park Ave	-	
City, State, Zip Code	_	
Oklahoma City, OK 73102-9051		
Name of Employer (Required) Crowe & Dunlevy		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marc Doyle	06/14/2023	\$25.00
Mailing Address 704 State St		
City, State, Zip Code Natchez, MS 39120-3543		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name HCS Trading LLC	06/06/2023	\$1,000.00
Mailing Address PO Box 466	-	
City, State, Zip Code Hattiesburg, MS 39403-0466	-	
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Matlock Properties LLC	06/29/2023	\$10,000.00
Mailing Address 829 N Lamar Blvd		
City, State, Zip Code	1	
Oxford, MS 38655-2858 Name of Employer (Required)	-	
Occupation (Required)	Aggregate year-to-date	\$10,000.00
		1

Name of Can	didate or	Committee	Brandon	Presley
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 6/30/2023

ITEMIZED RECEIPTS

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Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Catherine	P. Edmonson			06/30/2023	\$500.00
Mailing Addre					
City, State, Zip Hattiesbu	OCode rg, MS 39402-3060				
Name of Empl Self Empl	oyer (Required) oyed				
Occupation (R Art Histo				Aggregate year-to-date	\$1,500.00
Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Rus	hing			06/14/2023	\$100.00
Mailing Addre 102 N Sun	ss flower Ave				
City, State, Zip Indianola	Code , MS 38751-2552				
Name of Emplo	oyer (Required) yed				
Occupation (R Not Emplo				Aggregate year-to-date	\$414.60
Source:		PAC 🗸 Individual	Loan	Date	Amount of each receipt this
	Other (please specify)			(Mo., Day, Year)	period
Full Name Judy Corm				06/05/2023	•
	ier ss				period
Judy Corm Mailing Addre 164 E 72n City, State, Zip	ier ss d St				period
Judy Corm Mailing Addre 164 E 72n City, State, Zip New York,	ier ss d St Code NY 10021-4363 oyer (Required)				period
Judy Corm Mailing Addre 164 E 72n City, State, Zip New York, Name of Empl	ier ss d St o Code NY 10021-4363 oyer (Required) oyed required)				period
Judy Corm Mailing Addre 164 E 72n City, State, Zip New York, Name of Empl Self Empl Occupation (R	ier ss d St O Code NY 10021-4363 oyer (Required) oyed Required) Designer]PAC ☑Individual	Loan	06/05/2023 Aggregate	period \$500.00
Judy Corm Mailing Addre 164 E 72n City, State, Zip New York, Name of Empl Self Empl Occupation (R Interior	ier ss d St o Code NY 10021-4363 oyer (Required) oyed required) Designer Corporation]PAC ☑Individual	Loan	06/05/2023 Aggregate year-to-date Date	period \$500.00 \$500.00 Amount of each receipt this
Judy Corm Mailing Addre 164 E 72n City, State, Zip New York, Name of Empl Self Empl Occupation (R Interior Source: Full Name Roger Kli Mailing Addre	ier ss d St O Code NY 10021-4363 oyer (Required) oyed tequired) Designer Corporation]PAC ☑Individual		Aggregate year-to-date Date (Mo., Day, Year)	period \$500.00 \$500.00 Amount of each receipt this period
Judy Corm Mailing Addre 164 E 72n City, State, Zip New York, Name of Empl Self Empl Occupation (R Interior Source: Full Name Roger Kli Mailing Addre 7844 E Sa City, State, Zip	ier ss d St Code NY 10021-4363 oyer (Required) oyed required) Designer Corporation [Other (please specify) ngler ss ndalwood Dr]PAC ☑Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	period \$500.00 \$500.00 Amount of each receipt this period
Judy Corm Mailing Addre 164 E 72n City, State, Zip New York, Name of Empl Self Empl Occupation (R Interior Source: Full Name Roger Kli Mailing Addre 7844 E Sa City, State, Zip Scottsdal	ier ss d St o Code NY 10021-4363 oyer (Required) oyed lequired) Designer Corporation Other (please specify) ngler ss ndalwood Dr o Code e, AZ 85250-7269 oyer (Required)]PAC ☑Individual		Aggregate year-to-date Date (Mo., Day, Year)	period \$500.00 \$500.00 Amount of each receipt this period
Judy Corm Mailing Addre 164 E 72n City, State, Zip New York, Name of Empl Self Empl Occupation (R Interior Source: Full Name Roger Kli Mailing Addre 7844 E Sa City, State, Zip Scottsdal Name of Empl	ier ss d St o Code NY 10021-4363 oyer (Required) oyed lequired) Designer Corporation Other (please specify) ngler ss ndalwood Dr o Code e, AZ 85250-7269 oyer (Required) yed lequired)]PAC ☑Individual		Aggregate year-to-date Date (Mo., Day, Year)	period \$500.00 \$500.00 \$500.00 Amount of each receipt this period

Name of Candidate	or Committee	Brandon	Presley
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Date (Mo., Day, Year)	Amount of each receipt this period
06/25/2023	\$50.00
-	
-	
Aggregate year-to-date	\$925.00
Date (Mo., Day, Year)	Amount of each receipt this period
06/29/2023	\$100.00
-	
_	
Aggregate year-to-date	\$400.00
Date (Mo., Day, Year)	Amount of each receipt this period
06/30/2023	\$500.00
-	
-	
Aggregate year-to-date	\$500.00
Date (Mo., Day, Year)	Amount of each receipt this period
06/14/2023	\$500.00
-	
-	
	(Mo., Day, Year) 06/25/2023 Aggregate year-to-date Date (Mo., Day, Year) 06/29/2023 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year) 06/30/2023

Name of	Candidate or	Committee	Brandon	Presley
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Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Larry O. Vaughn	06/07/2023	\$25.00
Mailing Address 259 Odom Rd		
City, State, Zip Code Steens, MS 39766-9687		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Daniels	06/17/2023	\$100.00
Mailing Address 120 Cascade Ave		
City, State, Zip Code Winston Salem, NC 27127-2027		
Name of Employer (Required) University of North Carolina School of the Arts		
Occupation (Required) Associate Dean	Aggregate year-to-date	\$300.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jamie Amos	06/29/2023	\$5,000.00
Mailing Address 2109 Acklen Ave		
City, State, Zip Code Nashville, TN 37212-3501		
Name of Employer (Required) Coffee Club Pictures		
Occupation (Required) Producer	Aggregate year-to-date	\$10,250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nan Tarlton	06/30/2023	\$100.00
Mailing Address 210 Meadowlane Dr		
City, State, Zip Code Madison, MS 39110-9611		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$725.00
NOC FUELOYED		

Name of Candidate	or Committee	Brandon	Presley
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ITEMIZED RECEIPTS

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Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robbie D.	Fisher				06/30/2023	\$100.00
Mailing Addre						
City, State, Zip Water Val	Code ley, MS 38965-	1413				
	oyer (Required) oductions, LLC					
Occupation (F Business					Aggregate year-to-date	\$450.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Randy Cla	rk				06/23/2023	\$40.10
Mailing Addre 507 Storm	SS					
City, State, Zip Brookhave	Code n, MS 39601-37	75				
Name of Emplo	oyer (Required) yed					
Occupation (F Retired	Required)				Aggregate year-to-date	\$240.10
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gary Melt	Z				06/26/2023	\$750.00
Mailing Addre 5836 Pryt						
City, State, Zip New Orlea	Code ns, LA 70115-4	346				
	oyer (Required) munications					
Occupation (F Business					Aggregate year-to-date	\$750.00
Source:	Corporation	PAC cify)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martin Da	niel Crump				06/07/2023	\$2,500.00
Mailing Addre 2601 14th						
City, State, Zip Gulfport,	Code MS 39501-1926					
	oyer (Required)					
Occupation (F Attorney					Aggregate year-to-date	\$7,500.00

Name of Can	didate or	Committee	Brandon	Presley
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Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Ca	rroll	06/08/2023	\$25.00
Mailing Addre	ss h Grove Rd		
City, State, Zi Pontotoc ,	D Code MS 38863-7704		
	oyer (Required) stribution Services		
Occupation (F Truck Dri		Aggregate year-to-date	\$270.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Fred Kenc	У	06/30/2023	\$100.00
Mailing Addre			
City, State, Zi Brandon,	D Code MS 39047-7827		
Name of Emp Baptist M	oyer (Required) edical		
Occupation (F Physician		Aggregate year-to-date	\$310.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Theresa S	teinberger	06/10/2023	\$25.00
Mailing Addre 909 Eastw			
City, State, Zi Pascagoul	o Code a, MS 39567-7549		
Name of Emp Not Emplo	oyer (Required) yed		
Occupation (F		Aggregate year-to-date	\$350.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann J. Ab	adie	06/20/2023	\$5.00
Mailing Addre			
City, State, Zi			
	oyer (Required)		
Occupation (F	-	Aggregate year-to-date	\$690.00
		1	

Name of Candidate o	r Committee	Brandon	Presley
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 Reporting Period
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 6/30/2023

ITEMIZED RECEIPTS

Source:	Corporation	PAC ecify)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dan Webb					06/30/2023	\$5,000.00
Mailing Addre						
City, State, Zi Tupelo, M	p Code 1S 38802-0496					
•	loyer(Required) lers & Williams	PLLC				
Occupation (F	Required)				Aggregate year-to-date	\$10,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jason Lee	e Shelton				06/22/2023	\$500.00
Mailing Addre 807 India	ess an Oaks Dr					
City, State, Zi Saltillo,	p Code MS 38866-9404					
•	loyer(Required) Services Admini	stration				
Occupation (F Regional	Required) Administrator				Aggregate year-to-date	\$3,086.39
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe				(Mo., Day, Year)	receipt this period
Full Name Patricia	Other (please spender)				(Mo., Day, Year) 06/15/2023	receipt this
Patricia Mailing Addre	M. Brooking					receipt this period
Patricia Mailing Addre 1200 Mead City, State, Zi	M. Brooking ess lowbrook Rd					receipt this period
Patricia Mailing Addre 1200 Mead City, State, Zi Jackson,	M. Brooking ess dowbrook Rd p Code MS 39206-6109 loyer (Required)					receipt this period
Patricia Mailing Addre 1200 Mead City, State, Zi Jackson, Name of Emp	M. Brooking ess lowbrook Rd p Code MS 39206-6109 loyer (Required) oyed Required)					receipt this period
Patricia Mailing Addre 1200 Mead City, State, Zi Jackson, Name of Emp Not Emplo Occupation (f	M. Brooking ess lowbrook Rd p Code MS 39206-6109 loyer (Required) oyed Required)	 ecify)	✓ Individual		06/15/2023 Aggregate	receipt this period \$2,500.00
Patricia Mailing Addre 1200 Mead City, State, Zi Jackson, Name of Emplo Occupation (f Not Emplo	M. Brooking ess lowbrook Rd p Code MS 39206-6109 loyer (Required) byed Required) byed Corporation Other (please spe	 ecify)			06/15/2023 Aggregate year-to-date Date	receipt this period \$2,500.00 \$2,500.00 \$2,500.00 Amount of each receipt this
Patricia Mailing Addre 1200 Mead City, State, Zi Jackson, Name of Emp Not Emplo Occupation (f Not Emplo Source: Full Name Roger Kli Mailing Addre	M. Brooking ess dowbrook Rd p Code MS 39206-6109 loyer (Required) oyed Required) oyed Corporation Other (please spe .ngler	 ecify)			06/15/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,500.00 \$2,500.00 \$2,500.00 Amount of each receipt this period
Patricia Mailing Addre 1200 Mead City, State, Zi Jackson, Name of Emp Not Emplo Occupation (f Not Emplo Source: Full Name Roger Kli Mailing Addre 7844 E Sa City, State, Zi	M. Brooking ess lowbrook Rd p Code MS 39206-6109 loyer (Required) byed Required) byed Corporation Other (please spe ingler ess andalwood Dr p Code	 ecify) ecify)			06/15/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,500.00 \$2,500.00 \$2,500.00 Amount of each receipt this period
Patricia Mailing Addre 1200 Mead City, State, Zi Jackson, Name of Emplo Occupation (f Not Emplo Occupation (f Not Emplo Source: Full Name Roger Kli Mailing Addre 7844 E Sa City, State, Zi Scottsdal	M. Brooking M. Brooking M. Brook Rd p Code MS 39206-6109 loyer (Required) byed Corporation Other (please spe .ngler ess andalwood Dr p Code .e, AZ 85250-72 loyer (Required)	 ecify) ecify)			06/15/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,500.00 \$2,500.00 \$2,500.00 Amount of each receipt this period
Patricia Mailing Addre 1200 Mead City, State, Zi Jackson, Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name Roger Kli Mailing Addre 7844 E Sa City, State, Zi Scottsdal Name of Emp	M. Brooking M. Brooking M. Brook Rd p Code MS 39206-6109 loyer (Required) byed Corporation Other (please spending andalwood Dr p Code e, AZ 85250-72 loyer (Required) byed Required)	 ecify) ecify)			06/15/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$2,500.00 \$2,500.00 \$2,500.00 Amount of each receipt this period

Name of Candidate or Committee Bra	andon Pre	sley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Ashley Easterling	06/27/2023	\$1,000.00
Mailing Address 415 Demontluzin Ave		
City, State, Zip Code Bay Saint Louis, MS 39520-3503		
Name of Employer (Required) Self Employed		
Occupation (Required) Physician	Aggregate year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Francis Springer	06/30/2023	\$500.00
Mailing Address 136 Wildwood Dr	_	
City, State, Zip Code Madison, MS 39110-7044		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,100.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Elvin Sunds	(Mo., Day, Year)	•
Full Name		period
Full Name Elvin Sunds Mailing Address		period
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code		period
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required)		period
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required)	06/21/2023	period \$25.00
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy Source: Corporation PAC Individual	Aggregate year-to-date Date	period \$25.00 \$305.00 Amount of each receipt this
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy Source: Corporation PAC Individual Description PAC Full Name	Aggregate year-to-date (Mo., Day, Year)	period \$25.00 \$305.00 Amount of each receipt this period
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy Source: Corporation PAC VIndividual Loan Other (please specify) Full Name George Butler Mailing Address 2110 Brackenshire Cir City, State, Zip Code	Aggregate year-to-date (Mo., Day, Year)	period \$25.00 \$305.00 Amount of each receipt this period
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy Source: Corporation Other (please specify) Full Name George Butler Mailing Address 2110 Brackenshire Cir	Aggregate year-to-date (Mo., Day, Year)	period \$25.00 \$305.00 Amount of each receipt this period
Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy Source: □Corporation □Other (please specify) Full Name George Butler Mailing Address 2110 Brackenshire Cir City, State, Zip Code Jackson, MS 39211-5836 Name of Employer (Required)	Aggregate year-to-date (Mo., Day, Year)	period \$25.00 \$305.00 Amount of each receipt this period

Name of Candidate of	r Committee	Brandon	Presley
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Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Fos	shee			06/09/2023	\$10.00
Mailing Addre					
City, State, Zi Hattiesbu	pCode urg, MS 39402				
Name of Emp Not Emplo	loyer (Required) byed				
Occupation (F				Aggregate year-to-date	\$383.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Benjamin	Ifshin			06/30/2023	\$100.00
Mailing Addre					
City, State, Zi Water Val	pCode .ley, MS 38965-2404				
•	loyer (Required) acation PBC				
Occupation (F Director	Required)			Aggregate year-to-date	\$350.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dennis Tr	ruax			06/24/2023	\$100.00
Mailing Addre					
City, State, Zi Starkvill	p Code .e, MS 39759-9434				
Name of Emp Self Empl	loyer (Required) .oyed				
Occupation (F Engineer	Required)			Aggregate year-to-date	\$950.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles D	Dunagin			06/05/2023	\$25.00
Mailing Addre					
City, State, Zi					
	loyer (Required)				
Occurrentiere (I	yeu				
Not Emplo	Required)			Aggregate year-to-date	\$275.00

Name of	Candidate or	Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael R. O'Neal	06/06/2023	\$250.00
Mailing Address 1011 Adeline St		
City, State, Zip Code Hattiesburg, MS 39401-5022	_	
Name of Employer (Required) Hattiesburg Clinic		
Occupation (Required) Physician	Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Patton	06/27/2023	\$250.00
Mailing Address 5102 Canton Heights Dr		
City, State, Zip Code Jackson, MS 39211-4515		
Name of Employer (Required) St Catherine's Village		
Occupation (Required)	Aggregate	\$500.00
Medical Director	year-to-date	
Medical Director Source: Corporation PAC Individual Loan Other (please specify)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC Individual Loan	Date	Amount of each receipt this
Source: Corporation PAC VIndividual Loan Other (please specify) Full Name Linda Foshee Mailing Address	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC VIndividual Loan Other (please specify) Full Name Linda Foshee	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC Individual Loan Other (please specify) Full Name Linda Foshee Mailing Address Not Employed City, State, Zip Code	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC ✓ Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC Individual Loan Other (please specify) Full Name Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required) Not Employed Occupation (Required)	Date (Mo., Day, Year) 06/28/2023	Amount of each receipt this period \$10.00
Source: Corporation PAC ✓ Individual Loan Other (please specify)	Date (Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date	Amount of each receipt this period \$10.00 \$383.00 Amount of each receipt this
Source: Corporation PAC Individual Loan Other (please specify) Full Name Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name	Date (Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date (Mo., Day, Year)	Amount of each receipt this period \$10.00 \$383.00 Amount of each receipt this period
Source: Corporation PAC ✓Individual Loan Other (please specify)	Date (Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date (Mo., Day, Year)	Amount of each receipt this period \$10.00 \$383.00 Amount of each receipt this period
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date (Mo., Day, Year)	Amount of each receipt this period \$10.00 \$383.00 Amount of each receipt this period

Name of Can	didate or	Committee	Brandon	Presley
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Reporting Period6/1/2023through6/30/2023

ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Francisco J. Sierra	06/30/2023	\$25.00
Mailing Address 425 Locust Ln		
City, State, Zip Code Tupelo, MS 38801-9457		
Name of Employer (Required) Monroe Hospital		
Occupation (Required) Physician	Aggregate year-to-date	\$2,025.00
Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Ballard	06/13/2023	\$5.00
Mailing Address 142 Road 598		
City, State, Zip Code Plantersville, MS 38862-4901		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$240.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stephen B. Richer	06/27/2023	\$100.00
Mailing Address 62 53rd Cir		
City, State, Zip Code Gulfport, MS 39507-4541		
Name of Employer (Required) Richer Advisors		
Occupation (Required)	Aggregate	\$475.00
Consultant	year-to-date	Ţ1,3 . 00
		Amount of each receipt this period
Consultant Source: Corporation PAC Individual Loan	year-to-date Date	Amount of each receipt this
Consultant Source: Corporation PAC Individual Loan Other (please specify)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Consultant Source: Corporation PAC Individual Loan Other (please specify)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Consultant Source: Corporation PAC Individual Loan Other (please specify)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Consultant Source: Corporation PAC Individual Loan Other (please specify)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ramona Be	ernard				06/28/2023	\$250.00
Mailing Addre 301 Panol						
City, State, Zi Water Val	p Code ley, MS 38965-	2424				
Name of Emp Not Emplo	loyer (Required) byed					
Occupation (I Retired	Required)				Aggregate year-to-date	\$260.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cornelis	Gispen				06/09/2023	\$25.00
Mailing Addre						
City, State, Zi Oxford, M	p Code 1S 38655-4610					
Name of Emp Not Emplo	loyer (Required) byed					
Occupation (I Retired	Required)				Aggregate year-to-date	\$1,075.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe				(Mo., Day, Year)	receipt this period
Full Name Carl Cott	Other (please spe					receipt this
	Other (please spo ingham				(Mo., Day, Year)	receipt this period
Carl Cott Mailing Addre 140 Lela City, State, Zi	Other (please spo ingham ess Ln	ecify)			(Mo., Day, Year)	receipt this period
Carl Cott Mailing Addre 140 Lela City, State, Zi Greenvill	Other (please spo Cingham ess Ln p Code .e, MS 38701-77 loyer (Required)	ecify)			(Mo., Day, Year)	receipt this period
Carl Cott Mailing Addre 140 Lela City, State, Zi Greenvill Name of Emp	Other (please spo Cingham ess Ln p Code .e, MS 38701-77 loyer (Required) am	ecify)			(Mo., Day, Year)	receipt this period
Carl Cott Mailing Addre 140 Lela City, State, Zi Greenvill Name of Emp Cottingha Occupation (H	Other (please spo Cingham ess Ln p Code .e, MS 38701-77 loyer (Required) am	ecify) /60	✓ Individual	Loan	(Mo., Day, Year) 06/10/2023 Aggregate	receipt this period \$250.00
Carl Cott Mailing Addre 140 Lela City, State, Zi Greenvill Name of Emp Cottingha Occupation (I Caterer	Other (please sportspace) Content (please sportspace) Code Code Code Code Code Code Code Code	ecify) /60			(Mo., Day, Year) 06/10/2023 Aggregate year-to-date Date	receipt this period \$250.00 \$500.00 Amount of each receipt this
Carl Cott Mailing Addre 140 Lela City, State, Zi Greenvill Name of Emp Cottingha Occupation (I Caterer Source: Full Name Richard M Mailing Addre	Other (please sport Content of the set of th	ecify) /60			(Mo., Day, Year) 06/10/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$250.00 \$500.00 Amount of each receipt this period
Carl Cott Mailing Addre 140 Lela City, State, Zi Greenvill Name of Emp Cottingha Occupation (f Caterer Source: Full Name Richard M Mailing Addre 25284 Lak City, State, Zi	<pre>Other (please spot Other (please spot </pre>	ecify) /60			(Mo., Day, Year) 06/10/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$250.00 \$500.00 Amount of each receipt this period
Carl Cott Mailing Addre 140 Lela City, State, Zi Greenvill Name of Emp Cottingha Occupation (I Caterer Source: Full Name Richard M Mailing Addre 25284 Lak City, State, Zi Loxley, Z	<pre> Other (please spontset) Other (please spontset) Description Other (please spontset) Other (pleas</pre>	ecify) /60			(Mo., Day, Year) 06/10/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$250.00 \$500.00 Amount of each receipt this period
Carl Cott Mailing Addre 140 Lela City, State, Zi Greenvill Name of Emp Cottingha Occupation (I Caterer Source: Full Name Richard M Mailing Addre 25284 Lak City, State, Zi Loxley, P Name of Emp	<pre>Other (please spot Other (please spot </pre>	ecify) /60			(Mo., Day, Year) 06/10/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$250.00 \$500.00 Amount of each receipt this period

Name of Candidate	or Committee	Brandon	Presley
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ITEMIZED	RECEIPTS

Source: Corporation PAC 🗸 Individual Loan		
Source: Corporation PAC 🗹 Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Reed	06/01/2023	\$250.00
Mailing Address 1854 Legion Lake Rd		
City, State, Zip Code Tupelo, MS 38804-1312		
Name of Employer (Required) Hardy Reed Inc		
Occupation (Required) Financial Advisor	Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Dickson	06/03/2023	\$100.00
Mailing Address 807STH 19Th Ave		
City, State, Zip Code Hattiesburg, MS 39401		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,500.00
Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	06/26/2023	\$100.00
Michael Jefcoat		
Michael Jefcoat Mailing Address 1306 Homewood Dr		
Mailing Address		
Mailing Address 1306 Homewood Dr City, State, Zip Code		
Mailing Address 1306 Homewood Dr City, State, Zip Code Laurel, MS 39440-2260 Name of Employer (Required)	Aggregate year-to-date	\$350.00
Mailing Address 1306 Homewood Dr City, State, Zip Code Laurel, MS 39440-2260 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC VIndividual Loan		Amount of each receipt this
Mailing Address 1306 Homewood Dr City, State, Zip Code Laurel, MS 39440-2260 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC VIndividual Loan Other (please specify) Full Name	year-to-date Date	Amount of each
Mailing Address 1306 Homewood Dr City, State, Zip Code Laurel, MS 39440-2260 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name Jerry Stallings Mailing Address	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Address 1306 Homewood Dr City, State, Zip Code Laurel, MS 39440-2260 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ☑Individual □Loan □Other (please specify) Full Name Jerry Stallings Mailing Address PO Box 1141	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Address 1306 Homewood Dr City, State, Zip Code Laurel, MS 39440-2260 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ☑Individual □Loan □Other (please specify) Full Name Jerry Stallings Mailing Address PO Box 1141 City, State, Zip Code Oxford, MS 38655-1141	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Address 1306 Homewood Dr City, State, Zip Code Laurel, MS 39440-2260 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC VIndividual Loan Other (please specify) Full Name Jerry Stallings Mailing Address PO Box 1141 City, State, Zip Code	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Bra	andon Presie	У
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Source:	Corporation	 ✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mack Lowe	ery			06/29/2023	\$50.00
Mailing Addre					
City, State, Zi					
Name of Emp	oloyer (Required) ansmission				
Occupation (Business				Aggregate year-to-date	\$300.00
Source:	Corporation	 ✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Denise Pi	ilgrim			06/30/2023	\$50.00
Mailing Addre	ingham Dr				
City, State, Zi Madison,	p Code MS 39110-8524				
Name of Emp Not Emplo	oloyer (Required) byed				
Occupation (Aggregate year-to-date	\$417.90
Source:	Corporation	 ✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Randy Wad	lkins			06/01/2023	\$50.00
Mailing Addro 1605 Pier	ess cce Avenue Ext				
City, State, Zi Oxford, M	ip Code 4S 38655-4459				
	oloyer (Required) Cy of Mississippi				
Occupation (Professor				Aggregate year-to-date	\$250.00
Source:	Corporation	 /Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael N	Morris			06/06/2023	\$100.00
Mailing Addro 2218 Redk					
City, State, Zi					
Name of Emp	Nover (Required)	 			
Occupation (]
Respirato	ory Therapist			Aggregate year-to-date	\$300.00

Name of Candidate or Committee Bra	andon Presie	У
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Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James N.	Butts	06/16/2023	\$500.00
Mailing Addre			
City, State, Zi Laurel, M	p Code 15 39440-3468		
Name of Emp Sanderson	loyer (Required) 1 Farms		
Occupation (F Manager	Required)	Aggregate year-to-date	\$1,500.00
Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Str	ange	06/26/2023	\$10.00
Mailing Addre			
City, State, Zi New Augus	p Code sta, MS 39462-9710		
Name of Emp Not Emplo	loyer (Required) byed		
Occupation (F		Aggregate year-to-date	\$585.00
Source:	Corporation PAC Individual Loan	Date	Amount of each
	Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name American	Other (please specify) Clean Power Assoc	(Mo., Day, Year)	
	Clean Power Assoc		period
American Mailing Addre 1501 M St City, State, Zi	Clean Power Assoc		period
American Mailing Addre 1501 M St City, State, Zi Washingto	Clean Power Assoc ess NW p Code		period
American Mailing Addre 1501 M St City, State, Zi Washingto	Clean Power Assoc ess c NW p Code on, DC 20005-1700 loyer (Required)		period
American Mailing Addre 1501 M St City, State, Zi Washingto Name of Emp	Clean Power Assoc ess c NW p Code on, DC 20005-1700 loyer (Required)	06/29/2023	period \$1,000.00
American Mailing Addre 1501 M St City, State, Zi Washingto Name of Emp Occupation (F Source:	Clean Power Assoc ess S NW p Code on , DC 20005-1700 loyer (Required) Required) □Corporation □PAC ☑Individual □Loan □Other (please specify)	Aggregate year-to-date	period \$1,000.00 \$1,000.00 Amount of each receipt this
American Mailing Addre 1501 M St City, State, Zi Washingto Name of Emp Occupation (F Source: Full Name Roy Campb Mailing Addre	Clean Power Assoc	06/29/2023 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$1,000.00 \$1,000.00 \$1,000.00 Amount of each receipt this period
American Mailing Addre 1501 M St City, State, Zi Washingto Name of Emp Occupation (F Source: Full Name Roy Campb Mailing Addre 835 Avond City, State, Zi	Clean Power Assoc ess : NW p Code on, DC 20005-1700 loyer (Required) Required) □ Corporation □ PAC ☑ Individual □ Loan □ Other (please specify) pell ess dale St p Code	06/29/2023 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$1,000.00 \$1,000.00 \$1,000.00 Amount of each receipt this period
American Mailing Addre 1501 M St City, State, Zi Washingto Name of Emp Occupation (F Source: Full Name Roy Campb Mailing Addre 835 Avond City, State, Zi Jackson, Name of Emp	Clean Power Assoc	06/29/2023 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$1,000.00 \$1,000.00 \$1,000.00 Amount of each receipt this period
American Mailing Addre 1501 M St City, State, Zi Washingto Name of Emp Occupation (F Source: Full Name Roy Campb Mailing Addre 835 Avond City, State, Zi Jackson, Name of Emp	Clean Power Assoc ess : NW p Code on, DC 20005-1700 loyer (Required) Required) Corporation □PAC ☑Individual □Loan □Other (please specify) coll ess lale St p Code MS 39216-3316 loyer (Required) arant Boult Cummings LLP	06/29/2023 06/29/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$1,000.00 \$1,000.00 \$1,000.00 Amount of each receipt this period

Name of Candidate or Committee Bra	andon Presie	У
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Source:	Corporation	PAC ecify)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janet Sco	ott				06/21/2023	\$2,500.00
Mailing Addre						
City, State, Zi						
Name of Emp Not Emplo	oloyer (Required)					
Occupation (I Retired	Required)				Aggregate year-to-date	\$7,500.00
Source:	Corporation	PAC ecify)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Hask	cell				06/25/2023	\$50.00
Mailing Addre	ess ng Horse Dr					
City, State, Zi Lexingtor	p Code n, MA 02421-633	39				
Name of Emp Not Emplo	bloyer (Required) byed					
Occupation (I					Aggregate year-to-date	\$250.00
Source:	Corporation	PAC ecify)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Han	nilton				06/25/2023	\$25.00
Mailing Addre 707 Rando	ess olph Ave SE					
City, State, Zi Huntsvill	p Code Le, AL 35801-36	506				
Name of Emp Not Emplo	oloyer (Required) byed					
Occupation (I					Aggregate year-to-date	\$222.51
Source:	Corporation	PAC ecify)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Tho	omas				06/26/2023	\$500.00
Mailing Addre						
City, State, Zi Houston,	p Code MS 38851-2307					
	loyer (Required)					
Occupation (I	Inds CPAS					
Accountar	Required)				Aggregate year-to-date	\$500.00

Name of Candidate or Committee Bra	andon Presie	У
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jean Fenwick	06/07/2023	\$100.00
Mailing Address 208 S Madison St		
City, State, Zip Code Kosciusko, MS 39090-3946		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Simms	06/29/2023	\$250.00
Mailing Address 871 N Siwell Rd		
City, State, Zip Code Jackson,MS 39209-9211		
Name of Employer (Required) Stribling Equipment		
Occupation (Required) Programmer	Aggregate year-to-date	\$260.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas Neyhart	06/29/2023	\$100.00
Mailing Address 1301 N Rampart St		
City, State, Zip Code New Orleans, LA 70116-2658		
Name of Employer (Required) PosiGen		
Occupation (Required) Manager	Aggregate year-to-date	\$5,100.00
Source: Corporation PAC Individual Loan	Date	Amount of each receipt this
Other (please specify)	(Mo., Day, Year)	period
Other (please specify) Full Name Walter Taylor	06/30/2023	period \$100.00
Full Name		
Full Name Walter Taylor Mailing Address 1054 County Road 36 City, State, Zip Code		
Full Name Walter Taylor Mailing Address 1054 County Road 36		
Full Name Walter Taylor Mailing Address 1054 County Road 36 City, State, Zip Code Thaxton, MS 38871-9507 Name of Employer (Required)		-

Name of Candidate	or Committee	Brandon	Presley
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Reporting Period6/1/2023through6/30/2023

ITEMIZED RECEIPTS

Source:					
	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Shirley G	ray			06/12/2023	\$500.00
Mailing Addre	ss ge Hill Rd				
City, State, Zip Oxford, M	Code 5 38655-2000				
Name of Employ	oyer (Required) Yed				
Occupation (R Retired	equired)			Aggregate year-to-date	\$650.00
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny D.	Jones			06/17/2023	\$100.00
Mailing Addre	ss r Orchard Rd				
	, MS 39157-4836				
Name of Empl The DELTA	oyer (Required) Project				
Occupation (R COO	equired)			Aggregate year-to-date	\$1,253.50
Source:	Corporation PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Sl				06/29/2023	\$50.00
Granam Sr	akie				\$50.00
	ŝŝ				\$50.00
Mailing Addre 4706 Buck City, State, Zip	ss ingham Dr				\$50.00
Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl	ss ingham Dr Code				Ş30.00
Mailing Addre 4706 Buck City, State, Zip Chattanoo	ss ingham Dr Code ga, TN 37421-1108 oyer (Required)			Aggregate year-to-date	\$422.60
Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl Regal Occupation (R	ss ingham Dr Code ga, TN 37421-1108 oyer (Required)	✓Individual	Loan		
Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl Regal Occupation (R Usher Source:	ss ingham Dr Code ga, TN 37421-1108 over (Required) equired) Corporation PAC Other (please specify)	✓ Individual	Loan	year-to-date Date	\$422.60 Amount of each receipt this
Mailing Addres 4706 Buck City, State, Zip Chattanoo Name of Empl Regal Occupation (R Usher Source: Full Name John Jopl Mailing Addres	ss ingham Dr Code ga, TN 37421-1108 over (Required) equired) Corporation PAC Other (please specify) ing ss	[√] Individual	Loan	year-to-date Date (Mo., Day, Year)	\$422.60 Amount of each receipt this period
Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl Regal Occupation (R Usher Source: Full Name John Jopl Mailing Addre 276 Santi: City, State, Zip	ss ingham Dr Code ga, TN 37421-1108 over (Required) equired) Corporation PAC Other (please specify) ing ss ni St Code		Loan	year-to-date Date (Mo., Day, Year)	\$422.60 Amount of each receipt this period
Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl Regal Occupation (R Usher Source: Full Name John Jopl Mailing Addre 276 Santi: City, State, Zip Biloxi, M Name of Empl	ss ingham Dr Code ga, TN 37421-1108 over (Required) equired) Corporation PAC Other (please specify) ing ss ni St Code S 39530-2946 over (Required)	[√] Individual	Loan	year-to-date Date (Mo., Day, Year)	\$422.60 Amount of each receipt this period
Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl Regal Occupation (R Usher Source: Full Name John Jopl Mailing Addre 276 Santi: City, State, Zip Biloxi, M Name of Empl	ss ingham Dr Code ga, TN 37421-1108 over (Required) equired) Corporation PAC Other (please specify) ing ss ni St Code S 39530-2946 over (Required) for Justice	[✔] Individual	Loan	year-to-date Date (Mo., Day, Year)	\$422.60 Amount of each receipt this period

Name of Ca	ndidate or	Committee	Brandon	Presley
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Reporting Period6/1/2023through6/30/2023

ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas U. Reynolds II	06/30/2023	\$200.00
Mailing Address 1720 N Main St	_	
City, State, Zip Code Water Valley, MS 38965-9024	-	
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$300.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Richardson	06/26/2023	\$250.00
Mailing Address 6008 Vista Cir	-	
City, State, Zip Code Gulfport, MS 39507-4634		
Name of Employer (Required) Chism Strategies		
Occupation (Required) Consultant	Aggregate year-to-date	\$1,100.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Risser	06/30/2023	\$100.00
Mailing Address 377 County Road 653B	-	
City, State, Zip Code Saltillo, MS 38866-5716	-	
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Helen R. Meek	06/30/2023	\$1,000.00
Mailing Address 1 Oak Pl	_	
City, State, Zip Code Oxford, MS 38655-2519	1	
Name of Employer (Required) None		
Occupation (Required) Homemaker	Aggregate year-to-date	\$1,000.00

Name of Can	didate or	Committee	Brandon	Presley
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Name of Candidate	or Committee	Brandon	Presley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

ITEMIZED RECEIPTS

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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Dabbs	06/10/2023	\$50.00
Mailing Address 5 Turnbury Dr		
City, State, Zip Code Hattiesburg, MS 39401-8229		
Name of Employer (Required) South Central Regional Medical Center		
Occupation (Required) CIO	Aggregate year-to-date	\$300.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Clark	06/23/2023	\$200.00
Mailing Address 167 Rolling Meadows Rd		
City, State, Zip Code Ridgeland, MS 39157-9488		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$700.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nora Brownell	06/15/2023	\$100.00
Mailing Address 105 Pommander Walk		
City, State, Zip Code Alexandria, VA 22314-3844		
Name of Employer (Required) ESPY Energy Solutions, LLC		
Occupation (Required) Consultant	Aggregate year-to-date	\$1,100.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carl G. Brooking	06/15/2023	\$2,500.00
Mailing Address PO Box 4974		
City, State, Zip Code Jackson, MS 39296-4974		
Name of Employer (Required) Empyrean Solutions		
Occupation (Required) Consultant	Aggregate year-to-date	\$2,500.00

Name of Candidate or Committee	Brandon	Presley
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Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Duncan M.	Gray III	06/17/2023	\$50.00
Mailing Addre			
City, State, Zip		_	
	oyer (Required) Episcopal Church		
Occupation (R Clergy	Required)	Aggregate year-to-date	\$500.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dustin Ma	rkle	06/27/2023	\$1,000.00
Mailing Addre 624 N Mad		_	
City, State, Zip Tupelo, M	Code S 38804-2016		
	oyer(Required) sissippi Health Services		
Occupation (R Physician		Aggregate year-to-date	\$1,000.00
Courses		_	
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Sl	Other (please specify)		receipt this
Full Name Graham Sl Mailing Addre	Other (please specify)akie	(Mo., Day, Year)	receipt this period
Full Name Graham Sl Mailing Addre 4706 Buck	Other (please specify) akie ss ingham Dr	(Mo., Day, Year)	receipt this period
Full Name Graham Sl Mailing Addre 4706 Buck City, State, Zip	Other (please specify) akie ss ingham Dr	(Mo., Day, Year)	receipt this period
Full Name Graham Sl Mailing Addre 4706 Buck City, State, Zip Chattanoo	Other (please specify) akie ss ingham Dr o Code	(Mo., Day, Year)	receipt this period
Full Name Graham Sl Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl	Other (please specify) akie ss ingham Dr o Code ga, TN 37421-1108 oyer (Required)	(Mo., Day, Year)	receipt this period
Full Name Graham Sl Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl Regal Occupation (R	Other (please specify) akie ss ingham Dr o Code ga, TN 37421-1108 oyer (Required) Required) Corporation PAC ✓ Individual Loan	(Mo., Day, Year) 06/08/2023 Aggregate year-to-date Date	receipt this period \$6.00
Full Name Graham Sl. Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl Regal Occupation (R Usher Source:	Cother (please specify) akie ss ingham Dr o Code ga, TN 37421-1108 oyer (Required) Required)	(Mo., Day, Year) 06/08/2023 Aggregate year-to-date	receipt this period \$6.00 \$422.60 Amount of each
Full Name Graham Sl. Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl Regal Occupation (R Usher	Other (please specify) akie ss ingham Dr o Code ga, TN 37421-1108 oyer (Required) Required) Corporation PAC ✓ Individual Loan Other (please specify)	(Mo., Day, Year) 06/08/2023 Aggregate year-to-date Date	receipt this period \$6.00 \$422.60 Amount of each receipt this
Full Name Graham Sl. Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl Regal Occupation (R Usher Source:	Other (please specify) akie ss ingham Dr O Code ga, TN 37421-1108 oyer (Required) Required) Corporation PAC ✓ Individual Loan Other (please specify) asterson ss	(Mo., Day, Year) 06/08/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$6.00 \$422.60 Amount of each receipt this period
Full Name Graham Sl. Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl Regal Occupation (R Usher Source: Full Name Douglas M Mailing Addre 43 Palm T City, State, Zip	Other (please specify) akie ss ingham Dr o Code ga, TN 37421-1108 over (Required) Required) Corporation □PAC ✓Individual □Loan Other (please specify) asterson ss ree Loop o Code	(Mo., Day, Year) 06/08/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$6.00 \$422.60 Amount of each receipt this period
Full Name Graham Sl. Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl Regal Occupation (R Usher Source: Full Name Douglas M Mailing Addre 43 Palm T City, State, Zip Petal, MS Name of Empl	Other (please specify) akie ss ingham Dr Ocode ga, TN 37421-1108 over (Required) Required) Required) Corporation □PAC ☑Individual □Loan Other (please specify) asterson ss ree Loop o Code 39465-9251 over (Required)	(Mo., Day, Year) 06/08/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$6.00 \$422.60 Amount of each receipt this period
Full Name Graham Sl. Mailing Addre 4706 Buck City, State, Zip Chattanoo Name of Empl Regal Occupation (R Usher Source: Full Name Douglas M Mailing Addre 43 Palm T City, State, Zip Petal, MS Name of Empl	□ Other (please specify) akie ss ingham Dr o Code ga, TN 37421-1108 oyer (Required) Required) Required) Corporation □PAC ☑ Individual □Loan □ Other (please specify) asterson ss ree Loop o Code 39465-9251 oyer (Required) y of Southern Mississippi	(Mo., Day, Year) 06/08/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$6.00 \$422.60 Amount of each receipt this period

Name of Candidate or Committee Br	andon Pr	esley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mike Kerce	06/29/2023	\$25.00
Mailing Address 245 Hidden Creek Dr		
City, State, Zip Code Ridgeland, MS 39157-6601		
Name of Employer (Required) Deposit Alternatives, LLC		
Occupation (Required) CEO	Aggregate year-to-date	\$275.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Rifkind	06/30/2023	\$500.00
Mailing Address 825 8th Ave		
City, State, Zip Code New York, NY 10019-7416		
Name of Employed (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Jeffrey Hunt	(Mo., Day, Year) 06/30/2023	
Full Name		period
Full Name Jeffrey Hunt Mailing Address		period
Full Name Jeffrey Hunt Mailing Address 299 W Main St City, State, Zip Code		period
Full Name Jeffrey Hunt Mailing Address 299 W Main St City, State, Zip Code Westminster, MD 21158-4329 Name of Employer (Required)		period
Full Name Jeffrey Hunt Mailing Address 299 W Main St City, State, Zip Code Westminster, MD 21158-4329 Name of Employer (Required) Not Employed Occupation (Required)	06/30/2023	period \$1,000.00
Full Name Jeffrey Hunt Mailing Address 299 W Main St City, State, Zip Code Westminster, MD 21158-4329 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual	Aggregate year-to-date	period \$1,000.00 \$2,000.00 Amount of each receipt this
Full Name Jeffrey Hunt Mailing Address 299 W Main St City, State, Zip Code Westminster, MD 21158-4329 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name Claire Davis Mailing Address	 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$1,000.00 \$2,000.00 Amount of each receipt this period
Full Name Jeffrey Hunt Mailing Address 299 W Main St City, State, Zip Code Westminster, MD 21158-4329 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: Corporation PAC VIndividual Loan Other (please specify) Full Name Claire Davis Mailing Address 44714 Audubon Sq City, State, Zip Code	 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$1,000.00 \$2,000.00 Amount of each receipt this period
Full Name Jeffrey Hunt Mailing Address 299 W Main St City, State, Zip Code Westminster, MD 21158-4329 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □Other (please specify) Full Name Claire Davis Mailing Address 44714 Audubon Sq	 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$1,000.00 \$2,000.00 Amount of each receipt this period
Full Name Jeffrey Hunt Mailing Address 299 W Main St City, State, Zip Code Westminster, MD 21158-4329 Name of Employed Occupation (Required) Not Employed Coccupation (Required) Not Employed Source: Corporation PAC Individual Loan Other (please specify) Full Name Claire Davis Mailing Address 44714 Audubon Sq City, State, Zip Code Ashburn, VA 20147-6295 Name of Employer (Required)	 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year)	period \$1,000.00 \$2,000.00 Amount of each receipt this period

Name of Candidate or	Committee	Brandon	Presley
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Source:					
	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Un	z			06/22/2023	\$100.00
Mailing Addre 2535 Wrig					
City, State, Zip Steens, M	Code S 39766-9129				
	oyer(Required) pi State University	<i>Į</i>			
Occupation (R Scientist	equired)			Aggregate year-to-date	\$220.00
Source:		PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Colem	an			06/29/2023	\$25.00
Mailing Addre 316 Quail					
City, State, Zip Oxford, M	Code S 38655-6108				
Name of Emplo	oyer (Required) yed				
Occupation (R Not Emplo				Aggregate year-to-date	\$285.00
Source:	Corporation	PAC 🗸 Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Howard O'	Leary			06/30/2023	\$250.00
Mailing Addre 420 Kent	SS				
420 Kent City, State, Zip	ss Ave				
420 Kent City, State, Zip Brooklyn, Name of Empl	ss Ave o Code				
420 Kent City, State, Zip Brooklyn, Name of Empl	ss Ave Code NY 11249-5601 oyer (Required) inental Exchange			Aggregate year-to-date	\$350.00
420 Kent City, State, Zip Brooklyn, Name of Empl Intercont Occupation (F	ss Ave Code NY 11249-5601 oyer (Required) inental Exchange equired)	PAC VIndividual	Loan		Amount of each receipt this
420 Kent City, State, Zip Brooklyn, Name of Empl Intercont Occupation (F Developer Source:	ss Ave Code NY 11249-5601 oyer (Required) inental Exchange equired) Corporation		Loan	year-to-date Date	Amount of each
420 Kent City, State, Zip Brooklyn, Name of Empl Intercont Occupation (F Developer Source: Full Name Lauren Le Mailing Addre	ss Ave Code NY 11249-5601 oyer (Required) inental Exchange equired) Corporation		Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
420 Kent City, State, Zip Brooklyn, Name of Empl Intercont Occupation (F Developer Source: Full Name Lauren Le Mailing Addre 328 S Mai City, State, Zip	ss Ave Code NY 11249-5601 oyer (Required) inental Exchange equired) Corporation		Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
420 Kent City, State, Zip Brooklyn, Name of Empl Intercont Occupation (F Developer Source: Full Name Lauren Le Mailing Addre 328 S Mai City, State, Zip Grenada, Name of Empl	ss Ave Code NY 11249-5601 oyer (Required) inental Exchange equired) Corporation		Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
420 Kent City, State, Zip Brooklyn, Name of Empl Intercont Occupation (R Developer Source: Full Name Lauren Le Mailing Addre 328 S Mai City, State, Zip Grenada,	ss Ave Code NY 11249-5601 oyer (Required) inental Exchange equired) Corporation Other (please specify) _ slie ss n St Code MS 38901-3215 oyer (Required) yed equired)		Loan	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate of	r Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alma Walls	06/24/2023	\$100.00
Mailing Address 3887 Kenton Dr		
City, State, Zip Code Southaven, MS 38672-7225		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$925.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Sullivan	06/27/2023	\$250.00
Mailing Address 253 County Road 325		
City, State, Zip Code Oxford, MS 38655-9566		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
		receipt this
Other (please specify)	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Elvin Sunds Mailing Address	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required)	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required)	(Mo., Day, Year)	receipt this period \$25.00
□Other (please specify) Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy Source: □Corporation □PAC ✓Individual	(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date	receipt this period \$25.00 \$305.00 Amount of each receipt this
□Other (please specify) Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy Source: □Corporation □PAC ☑Individual □Loan □Other (please specify) Full Name Barbara Casey Mailing Address	(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25.00 \$305.00 Amount of each receipt this period
□Other (please specify) Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy Source: □Corporation □Other (please specify) Full Name Barbara Casey Mailing Address 229 Peachtree Hills Ave NE City, State, Zip Code	(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25.00 \$305.00 Amount of each receipt this period
□Other (please specify) Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy Source: □Corporation □Other (please specify) Full Name Barbara Casey Mailing Address 229 Peachtree Hills Ave NE	(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25.00 \$305.00 Amount of each receipt this period
□Other (please specify) Full Name Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy Source: □Corporation □Other (please specify) Full Name Barbara Casey Mailing Address 229 Peachtree Hills Ave NE City, State, Zip Code Atlanta, GA 30305-4413 Name of Employer (Required)	(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$25.00 \$305.00 Amount of each receipt this period

Name of Candidate or Committee Bra	andon Pre	sley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Ray	mond	06/28/2023	\$10.00
Mailing Addre 3915 Sain	ss t Charles Ave		
City, State, Zij New Orlea	o Code ns, LA 70115-4659		
Name of Emplo	oyer (Required) yed		
Occupation (F Not Emplo		Aggregate year-to-date	\$1,275.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tiffany B	ensen	06/20/2023	\$50.00
Mailing Addre			
City, State, Zip Oxford, M	Code S 38655-5851		
	oyer (Required) y of Mississippi		
Occupation (F Educator	Required)	Aggregate year-to-date	\$250.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charlotte	Williams	06/30/2023	\$250.00
Mailing Addre PO Box 33			
City, State, Zip Fulton, M	Code S 38843-0337		
Name of Emplo	oyer (Required) yed		
Occupation (F Not Emplo		Aggregate year-to-date	\$250.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frances M	. Coleman	06/03/2023	\$5.00
Mailing Addre	ss Garden Ter		
City, State, Zi	o Code		
Name of Emplo	MS 39110-7637		
Occupation (F Not Emplo	yed Required)	Aggregate year-to-date	\$330.00

Name of Candidate or Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara L. Hamilton	06/06/2023	\$500.00
Mailing Address 1900 Fuller St		
City, State, Zip Code Hattiesburg, MS 39401-7544		
Name of Employer (Required) William Carey University		
Occupation (Required) Executive Assistant	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dave Rozier	06/27/2023	\$1,500.00
Mailing Address 303 Woodland Hills Dr		
City, State, Zip Code Oxford, MS 38655-8429		
Name of Employer (Required) MGC Law		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,500.00
Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patsy R. Brumfield	06/20/2023	\$25.00
Mailing Address 128 Woodland Ridge Dr		
City, State, Zip Code Mccomb, MS 39648-6338		
Name of Employer (Required) Not Employed		
Occupation (Required)	Aggregate	\$233.30
Not Employed	year-to-date	+ 200.00
Not Employed Source: Corporation PAC VIndividual Loan Other (please specify)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this
Source: Corporation PAC Individual Loan	Date	Amount of each
Source: Corporation PAC Individual Loan Other (please specify) Full Name Betty D. Williams Mailing Address	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC Individual Loan Other (please specify) Full Name Betty D. Williams Mailing Address 254 Harding Pl City, State, Zip Code	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC Individual Loan Other (please specify) Full Name Betty D. Williams Mailing Address 254 Harding Pl	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC Individual Loan Other (please specify) Full Name Betty D. Williams Mailing Address 254 Harding Pl City, State, Zip Code Nashville, TN 37205-3727 Name of Employer (Required)	Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Br	andon Pr	esley
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Source:	□Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martha Ha	rper	06/22/2023	\$10.00
Mailing Addre 341 Macar		-	
City, State, Zi Biloxi, M	p Code IS 39531-2807		
Name of Emp Not Emplo	loyer (Required) byed		
Occupation (F		Aggregate year-to-date	\$260.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard R	lhoden	06/04/2023	\$100.00
Mailing Addre 778 Gille			
City, State, Zi Jackson ,	p Code MS 39202-1711		
Name of Emp Self Empl	loyer (Required) .oyed		
Occupation (F Physician		Aggregate year-to-date	\$450.00
Source:	□Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia Y	/ap	06/30/2023	\$25.00
Mailing Addre	ess S Ferry Rd		
City, State, Zi Biloxi, M	p Code IS 39532-2029		
Name of Emp Not Emplo	loyer (Required) byed		
Occupation (F		Aggregate year-to-date	\$360.00
Source:	□Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William W	Valler	06/21/2023	\$500.00
Mailing Addre 404 6th A			
City, State, Zi Hattiesbu	p C ode urg, MS 39401-4241	1	
Name of Emp	loyer (Required) arg Clinic	-	
Occupation (F	Required)	Aggregate year-to-date	\$1,000.00

Name of Candidate or Committee	Brandon	Presley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

ITEMIZED RECEIPTS

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Source:	Corporation	PAC ecify)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charel Hu	lsey				06/03/2023	\$250.00
Mailing Addre						
City, State, Zi						
	urg, MS 39402-2	313				
	loyer (Required) General Hospita	ıl				
Occupation (P Physician					Aggregate year-to-date	\$250.00
Source:	Corporation	PAC ecify)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Fr	reeman				06/13/2023	\$250.00
Mailing Addre 1631 Arab						
City, State, Zi New Orlea	pCode ans, LA 70115-5	025				
Name of Emp Barrasso	loyer (Required) Usdin					
Occupation (F Attorney	Required)				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC ecify)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard R	Rhoden				06/24/2023	\$25.00
Mailing Addre						
City, State, Zi Jackson,	p Code MS 39202-1711					
Name of Emp Self Empl	loyer (Required) .oyed					
Occupation (F					Aggregate year-to-date	\$450.00
Source:	Corporation	PAC ecify)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas A.	Blanton				06/06/2023	\$1,000.00
Mailing Addre 707 Hardy						
City, State, Zi		666				
	loyer (Required)					
Occupation (F	Required)				Aggregate year-to-date	\$1,000.00

Name of Can	didate or	Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne Robinson	06/08/2023	\$5.00
Mailing Address 206 Wood St		
City, State, Zip Code		
Water Valley, MS 38965-2603		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$985.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cliff Heaton	06/29/2023	\$5,000.00
Mailing Address PO Box 158		
City, State, Zip Code Lyon, MS 38645-0158		
Name of Employer (Required) Self Employed		
Occupation (Required) Farmer	Aggregate year-to-date	\$5,000.00
Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Ballard	06/30/2023	\$50.00
Mailing Address 5488 Turningleaf Cv		
City, State, Zip Code Tupelo, MS 38801-9516		
Name of Employer (Required) Cardinal Health		
Occupation (Required) Pharmacist	Aggregate year-to-date	\$400.00
Source: ☐Corporation ☐PAC ✓Individual ☐Loan ☐Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elvin Sunds	06/30/2023	\$10.00
Mailing Address 4000 W Tidewater Ln		
City, State, Zip Code Madison, MS 39110-8942		
Name of Employer (Required) St. Francis of Assisi Church		
Occupation (Required) Clergy	Aggregate year-to-date	\$305.00

Name of Can	didate or	Committee	Brandon	Presley
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ITEMIZED	RECEIPTS

Source:	□Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Hi	gginbotham	06/30/2023	\$250.00
Mailing Addre	285	-	
City, State, Zi		-	
Name of Emp Not Emplo	loyer (Required) byed		
Occupation (I Retired	Required)	Aggregate year-to-date	\$1,750.00
Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bert Ehrh	lardt	06/24/2023	\$1,000.00
Mailing Addre 200 Winds		-	
City, State, Zi Oxford, M	p Code IS 38655-6265		
Name of Emp Not Emplo	loyer (Required) byed		
Occupation (I Retired	Required)	Aggregate year-to-date	\$1,000.00
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Ro	berts	06/08/2023	\$100.00
Mailing Addre 709 North			
City, State, Zi Brandon ,	p Code MS 39047-5110		
Name of Emp Not Emplo	loyer (Required) byed	-	
Occupation (I Not Emplo		Aggregate year-to-date	\$450.00
Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard F	. Scruggs	06/29/2023	\$2,500.00
Mailing Addre 700 Faulk	ess mer Woods Pl		
City, State, Zi Oxford, M	p Code IS 38655-4620	1	
Name of Emp	loyer (Required) se MS, Inc		
Occupation (I Philanthr		Aggregate year-to-date	\$12,500.00

Name of Candidate or Committee Bra	andon Pre	sley
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Source: Corporation PAC 🗸 Individual Loan		
Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton	06/20/2023	\$21.17
Mailing Address 707 Randolph Ave SE	-	
City, State, Zip Code Huntsville, AL 35801-3606	-	
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$222.51
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marc Doyle	06/30/2023	\$25.00
Mailing Address 704 State St	-	
City, State, Zip Code Natchez, MS 39120-3543		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Evel Marca		
Full Name Quinn Delaney	06/30/2023	\$25,000.00
	06/30/2023	\$25,000.00
Quinn Delaney Mailing Address	06/30/2023	\$25,000.00
Quinn Delaney Mailing Address 436 14th St City, State, Zip Code	06/30/2023	\$25,000.00
Quinn Delaney Mailing Address 436 14th St City, State, Zip Code Oakland, CA 94612-2716 Name of Employer (Required)	Aggregate year-to-date	\$25,000.00 \$25,000.00
Quinn Delaney Mailing Address 436 14th St City, State, Zip Code Oakland, CA 94612-2716 Name of Employer (Required) Not Employed Occupation (Required)	Aggregate	
Quinn Delaney Mailing Address 436 14th St City, State, Zip Code Oakland, CA 94612-2716 Name of Employer (Required) Not Employed Occupation (Required) Retired Source: Corporation PAC Individual Loan	Aggregate year-to-date Date	\$25,000.00 Amount of each receipt this
Quinn Delaney Mailing Address 436 14th St City, State, Zip Code Oakland, CA 94612-2716 Name of Employer (Required) Not Employed Occupation (Required) Retired Source: Corporation PAC Individual Loan Other (please specify) Full Name	Aggregate year-to-date Date (Mo., Day, Year)	\$25,000.00 Amount of each receipt this period
Quinn Delaney Mailing Address 436 14th St City, State, Zip Code Oakland, CA 94612-2716 Name of Employer (Required) Not Employed Occupation (Required) Retired Source: □Corporation □PAC ☑Individual □Loan □Other (please specify) Full Name James Raymond Mailing Address 3915 Saint Charles Ave City, State, Zip Code	Aggregate year-to-date Date (Mo., Day, Year)	\$25,000.00 Amount of each receipt this period
Quinn Delaney Mailing Address 436 14th St City, State, Zip Code Oakland, CA 94612-2716 Name of Employer (Required) Not Employed Occupation (Required) Retired Source: □Corporation □PAC ☑Individual □Loan □Other (please specify) Full Name James Raymond Mailing Address 3915 Saint Charles Ave	Aggregate year-to-date Date (Mo., Day, Year)	\$25,000.00 Amount of each receipt this period
Quinn Delaney Mailing Address 436 14th St City, State, Zip Code Oakland, CA 94612-2716 Name of Employer (Required) Not Employed Occupation (Required) Retired Source: Corporation PAC Individual Loan Other (please specify) Full Name James Raymond Mailing Address 3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required)	Aggregate year-to-date Date (Mo., Day, Year)	\$25,000.00 Amount of each receipt this period

Name of	Candidate or	Committee	Brandon	Presley
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Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rickey T.	Moore				06/15/2023	\$250.00
Mailing Addre						
City, State, Zi						
	loyer (Required)					
Occupation (F Not Emplo					Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles E	Buchanan				06/26/2023	\$45.71
Mailing Addre 155 Bryan						
City, State, Zi Palo Alto	p Code), CA 94301-110	4				
Name of Emp Not Emplo	loyer (Required) byed					
Occupation (F					Aggregate year-to-date	\$564.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Ca	arroll				06/28/2023	\$25.00
Mailing Addre	ess ah Grove Rd					
City, State, Zi Pontotoc,	p Code MS 38863-7704					
•	loyer (Required) stribution Ser	vices				
Occupation (F Truck Dri					Aggregate year-to-date	\$270.00
Source:	Corporation	PAC ecify)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rachel Wa	lide				06/29/2023	\$2,500.00
Mailing Addre						
City, State, Zi	p Code				-	
	IS 38804-1914 loyer (Required)	A				
	IS 38804-1914 loyer(Required) l Associates, P	A			Aggregate year-to-date	\$5,000.00

Name of Candidate or Committee Bra	andon Presie	У
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Source:	□ Corporation □ PAC ✓ Individual □ Loan □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Rabal	lais	06/30/2023	\$10.00
Mailing Addre			
City, State, Zi Brandon,	p Code MS 39047-5526		
Name of Emp Not Emplo	oloyer (Required) byged		
Occupation (Aggregate year-to-date	\$201.00
Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Clyde V.	Williams	06/15/2023	\$500.00
Mailing Addro 105 Granc	ess 1 Ridge Rd		
City, State, Zi Starkvill	pCode Le, MS 39759-4111		
Name of Emp Not Emplo	oloyer (Required) byed		
Occupation (Aggregate year-to-date	\$500.00
Source:	Corporation □PAC ✓Individual □Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this
		(, , , , , , , , , , , , , , , , , , ,	period
Full Name Tomie Gre		06/16/2023	period \$10.00
Tomie Gre Mailing Addre	een		•
Tomie Gre Mailing Addre 114 Pine City, State, Zi	een ess Island Dr		•
Tomie Gre Mailing Addre 114 Pine City, State, Zi Jackson,	een ess Island Dr ip Code MS 39206-3234 oloyer (Required)		•
Tomie Gre Mailing Addre 114 Pine City, State, Zi Jackson, Name of Emp	een ess Island Dr pCode MS 39206-3234 bloyer (Required) of State		·
Tomie Gre Mailing Addre 114 Pine City, State, Zi Jackson, Name of Emp US Dept of Occupation (een ess Island Dr pCode MS 39206-3234 bloyer (Required) of State	06/16/2023	\$10.00
Tomie Gre Mailing Addre 114 Pine City, State, Zi Jackson, Name of Emp US Dept of Occupation (Attorney	een ess Island Dr p Code MS 39206-3234 bloyer (Required) of State Required) Corporation PAC VIndividual Loan Other (please specify)	Aggregate year-to-date	\$10.00 \$245.00 Amount of each receipt this
Tomie Gre Mailing Addre 114 Pine City, State, Zi Jackson, Name of Emp US Dept of Occupation (Attorney Source: Full Name Cliff Joh Mailing Addre	een ess Island Dr ip Code MS 39206-3234 eloyer (Required) ef State Required) Corporation PAC Individual Loan Other (please specify) enson ess	Aggregate year-to-date (Mo., Day, Year)	\$10.00 \$245.00 Amount of each receipt this period
Tomie Gre Mailing Addre 114 Pine City, State, Zi Jackson, Name of Emp US Dept of Occupation (Attorney Source: Full Name Cliff Joh Mailing Addre 1275 High City, State, Zi	een ess Island Dr ip Code MS 39206-3234 bloyer (Required) of State Required) Corporation PAC VIndividual Loan Other (please specify) mnson ess hway 7 S ip Code	Aggregate year-to-date (Mo., Day, Year)	\$10.00 \$245.00 Amount of each receipt this period
Tomie Gre Mailing Addre 114 Pine City, State, Zi Jackson, Name of Emp US Dept of Occupation (Attorney Source: Full Name Cliff Joh Mailing Addre 1275 High City, State, Zi Water Val	een ess Island Dr ip Code MS 39206-3234 bloyer (Required) of State Required) Corporation PAC VIndividual Loan Other (please specify) Inson ess Iway 7 S	Aggregate year-to-date (Mo., Day, Year)	\$10.00 \$245.00 Amount of each receipt this period
Tomie Gre Mailing Addre 114 Pine City, State, Zi Jackson, Name of Emp US Dept of Occupation (Attorney Source: Full Name Cliff Joh Mailing Addre 1275 High City, State, Zi Water Val	een ess Island Dr ip Code MS 39206-3234 iloyer (Required) of State Required) □ Corporation □ PAC ☑ Individual □ Loan □ Other (please specify) Inson ess hway 7 S ip Code Lley, MS 38965-3758 iloyer (Required) c. Justice Center	Aggregate year-to-date (Mo., Day, Year)	\$10.00 \$245.00 Amount of each receipt this period

Name of Can	didate or	Committee	Brandon	Presley
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Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Gal	loway	06/08/2023	\$25.00
Mailing Addre			
_			
	MS 39110-9179		
Name of Emplo	loyer (Required) byed		
Occupation (FNOT Emplo		Aggregate year-to-date	\$633.60
Source:	Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles B		06/11/2023	\$25.00
Mailing Addre	285		
City, State, Zip Palo Alto	p Code o, CA 94301-1104		
Name of Emplo	loyer (Required) byed		
Occupation (F		Aggregate year-to-date	\$564.00
Source:		Date	
Source.	Corporation PAC ✓Individual Loan	(Mo., Day, Year)	Amount of each receipt this period
Full Name	Other (please specify)		
Full Name Lisa J. S	Other (please specify)	_ (Mo., Day, Year)	receipt this period
Full Name Lisa J. S Mailing Addre	Other (please specify)	_ (Mo., Day, Year)	receipt this period
Full Name Lisa J. S Mailing Addre 130 Sunny City, State, Zij	Other (please specify)	_ (Mo., Day, Year)	receipt this period
Full Name Lisa J. S Mailing Addre 130 Sunny City, State, Zij Moorevill	Other (please specify) Sutton Sutton p Code .e, MS 38857-7033 loyer (Required)	_ (Mo., Day, Year)	receipt this period
Full Name Lisa J. S Mailing Addre 130 Sunny City, State, Zij Moorevill Name of Emp	Other (please specify) Gutton Sutton Solution Dess r Ln p Code .e, MS 38857-7033 loyer (Required) Desc Required)	_ (Mo., Day, Year)	receipt this period
Full Name Lisa J. S Mailing Addre 130 Sunny City, State, Zig Moorevill Name of Emplo Occupation (F	Other (please specify) Sutton Sutton Sutton Sutton PCode See, MS 38857-7033 Ioyer (Required) Syed Required Syed Corporation PAC Individual Loan	_ (Mo., Day, Year) _ 06/15/2023 _ Aggregate year-to-date Date	receipt this period \$300.00 \$300.00 Amount of each
Full Name Lisa J. S Mailing Addre 130 Sunny City, State, Zig Moorevill Name of Emplo Not Emplo Occupation (F Not Emplo	Other (please specify)	_ (Mo., Day, Year) Aggregate year-to-date	receipt this period \$300.00 \$300.00
Full Name Lisa J. S Mailing Addre 130 Sunny City, State, Zig Moorevill Name of Emplo Not Emplo Occupation (F Not Emplo	Other (please specify) Sutton Sutton Sess Sutton Sutton Sutton Sutton Sutton Sutton Sutton Sutton Sutton	_ (Mo., Day, Year) _ 06/15/2023 _ Aggregate year-to-date Date	receipt this period \$300.00 \$300.00 Amount of each receipt this
Full Name Lisa J. S Mailing Addre 130 Sunny City, State, Zip Moorevill Name of Emplo Not Emplo Occupation (F Not Emplo Source:	Other (please specify) Sutton Sutton Sutton Sutton PSS T Ln P Code Se, MS 38857-7033 Ioyer (Required) Soyed Required Soyed Corporation PAC Individual Loan Other (please specify) Sutton PAC Support Support PAC	_ (Mo., Day, Year) _ 06/15/2023 _ Aggregate year-to-date _ Date (Mo., Day, Year)	receipt this period \$300.00 \$300.00 \$300.00 Amount of each receipt this period
Full Name Lisa J. S Mailing Addre 130 Sunny City, State, Zip Moorevill Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Daniel Pa Mailing Addre 968 Road City, State, Zip	Other (please specify) Sutton Sess Sutton Ses Sutton Sess Code .e., MS 38857-7033 loyer (Required) Soyed Required) Soyed Corporation □PAC ☑Individual □Loan Other (please specify)	_ (Mo., Day, Year) _ 06/15/2023 _ Aggregate year-to-date _ Date (Mo., Day, Year)	receipt this period \$300.00 \$300.00 \$300.00 Amount of each receipt this period
Full Name Lisa J. S Mailing Addre 130 Sunny City, State, Zij Moorevill Name of Emplo Occupation (F Not Emplo Occupation (F Not Emplo Source: Full Name Daniel Pa Mailing Addre 968 Road City, State, Zij Tupelo, M	□Other (please specify) Sutton Sutton Sutton Sutton PCode See, MS 38857-7033 Soyed Soyed Sequired Soyed Corporation PAC Individual Loan Other (please specify) Sutton Dess 261 p Code	_ (Mo., Day, Year) _ 06/15/2023 _ Aggregate year-to-date _ Date (Mo., Day, Year)	receipt this period \$300.00 \$300.00 \$300.00 Amount of each receipt this period
Full Name Lisa J. S Mailing Addre 130 Sunny City, State, Zij Moorevill Name of Emplo Occupation (F Not Emplo Occupation (F Not Emplo Source: Full Name Daniel Pa Mailing Addre 968 Road City, State, Zij Tupelo, M	Other (please specify) Sutton Sutton Sutton Sutton Sutton Sutton Superior Super	_ (Mo., Day, Year) _ 06/15/2023 _ Aggregate year-to-date _ Date (Mo., Day, Year)	receipt this period \$300.00 \$300.00 \$300.00 Amount of each receipt this period

Name of Can	didate or	Committee	Brandon	Presley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

Date (Mo., Day, Year)	Amount of each receipt this period
06/28/2023	\$1,000.00
Aggregate year-to-date	\$1,000.00
Date (Mo., Day, Year)	Amount of each receipt this period
06/30/2023	\$500.00
Aggregate year-to-date	\$550.00
	\$550.00 Amount of each receipt this period
year-to-date Date	Amount of each receipt this
year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
year-to-date Date (Mo., Day, Year) 06/21/2023 Aggregate	Amount of each receipt this period \$25.00 \$210.00 Amount of each receipt this
year-to-date Date (Mo., Day, Year) 06/21/2023 06/21/2023 Aggregate year-to-date Date	Amount of each receipt this period \$25.00 \$210.00 Amount of each
year-to-date Date (Mo., Day, Year) 06/21/2023 06/21/2023 Aggregate year-to-date Date (Mo., Day, Year)	Amount of each receipt this period \$25.00 \$25.00 \$210.00 Amount of each receipt this period
year-to-date Date (Mo., Day, Year) 06/21/2023 06/21/2023 Aggregate year-to-date Date (Mo., Day, Year)	Amount of each receipt this period \$25.00 \$25.00 \$210.00 Amount of each receipt this period
year-to-date Date (Mo., Day, Year) 06/21/2023 06/21/2023 Aggregate year-to-date Date (Mo., Day, Year)	Amount of each receipt this period \$25.00 \$25.00 \$210.00 Amount of each receipt this period
year-to-date Date (Mo., Day, Year) 06/21/2023 06/21/2023 Aggregate year-to-date Date (Mo., Day, Year)	Amount of each receipt this period \$25.00 \$25.00 \$210.00 Amount of each receipt this period
	(Mo., Day, Year) 06/28/2023 Aggregate year-to-date Date (Mo., Day, Year)

Parks & Parks Water Well Service Inc. Mailing Address PO Box 32 Gity, State, Zip Code Houston, MS 38851-0032 Name of Employer (Required) Occupation (Required) Source: Corporation Other (please specify) Full Name Other (please specify) Mailing Address 108 Coachmans Rd City, State, Zip Code Mailing Address 108 Coachmans Rd City, State, Zip Code Madison, MS 39110-9227 Name of Employer (Required) Not Employed Cocupation (Required) Not Employed Sucrea: Corporation Optor (please specify) Surget Aggregate Vear-to-date \$325.01 Mailing Address Aggregate Occupation (Required) Aggregate Not Employed Aggregate Surget Odde Surget Odde Maing Address 06/23/2023 426 Mannsdale Rd City, State, Zip Code	Reporting Period $6/1/2023$ through $6/30/2023$	Pa	age <u>137</u> of <u>180</u>
Source: Corporation PAC Individual Loan Date (Mo., Day, Year) Amount of each receipt this period Full Name 06/26/2023 \$1,000.0 Mailing Address 06/26/2023 \$1,000.0 Po Box 32 0 0 \$1,000.0 City, State, Zip Code 0 Amount of each receipt this \$1,000.0 Name of Employer (Required) Aggregate \$1,000.0 Occupation (Required) PAC Individual Loan Date Amount of each receipt this Source: Corporation PAC Individual Loan Date Amount of each receipt this John Brombacher 06/22/2023 \$25.0 \$25.0 \$25.0 Mailing Address 108 Coachmans Rd \$25.0 \$25.0 Mail of explored Not Employed Pate Amount of each receipt this Not Employed Occupation (Required) Aggregate \$325.00 Not Employed Occupation (Required) Aggregate \$325.00 Not Employed Occupation (PAC Individual Loan Date Source: Corporation <td></td> <td></td> <td></td>			
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	-		
Madison, MS Syllo-7575	City, State, Zip Code Madison, MS 39110-7575		
Name of Employer (Required)		-	
Mississippi Hospital Association			
Occupation (Required) Aggregate \$2,000,00			
President year-to-date 32,000.00	Mississippi Hospital Association Occupation (Required)	Aggregate year-to-date	\$2,000.00
President year-to-date Source: Corporation PAC Individual Loan Date Amount of each	Mississippi Hospital Association Occupation (Required) President	year-to-date	Amount of each
President year-to-date 52,000.00	Mississippi Hospital Association Occupation (Required) President Source: Corporation PAC Individual Loan	year-to-date Date	Amount of each receipt this
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	Mississippi Hospital Association	Angregate	*** ***
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	Mississippi Hospital Association Occupation (Required)		\$2,000.00
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Occupation (Required)	Mississippi Hospital Association	A	
Mississippi Hospital Association Aggregate \$2,000,00 Occupation (Required) Aggregate \$2,000,00	Name of Employer (Required)		
Name of Employer (Required)		-	
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Madiaon MG 20110 7575	City, State, Zip Code	-	
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	426 Mannsdale Rd	_	
City, State, Zip Code	-	_	
426 Mannsdale Rd City, State, Zip Code	Timothy H. Moore	06/23/2023	\$2,000.00
Timothy H. Moore Mailing Address 426 Mannsdale Rd City, State, Zip Code	Full Name		•
Timothy H. Moore Mailing Address 426 Mannsdale Rd City, State, Zip Code	Full Name		•
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City, State, Zip Code Aggregate Aggregate Houston, MS 38851-0032 Aggregate \$1,000.01 Name of Employer (Required) Aggregate \$1,000.01 Cocupation (Required) Date Amount of each receipt this period Source: Corporation PAC Individual Loan Date Amount of each receipt this period Full Name 06/22/2023 \$25.01 06/22/2023 \$25.01 John Brombacher 06/22/2023 \$25.01 \$25.01 Mailing Address 0 Aggregate \$325.01 Not Employed Queres specify) Amount of each receipt this period Source: Corporation PAC Aggregate Not Employed Source: Corporation PAC Source: Corporation PAC Amount of each receipt this period Full Name Other (please specify) Mount of each receipt this period Full Name Other (please specify) Source: Corporation PAC Full Name Other (please specify) Ge/23/2023 \$2,000.01 Full Name Other (please specify) Source	-		
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Reporting Period	—	Pa	ade 137 of 180

Name of Candidate or Committee	Brandon	Presley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie-Bu	rl McLemore				06/16/2023	\$100.00
Mailing Addre 7900 Mich						
City, State, Zip Lake Corm	o Code orant, MS 38641	-8211				
Name of Emplo	oyer (Required) yed					
Occupation (F Retired	Required)				Aggregate year-to-date	\$550.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Glenn Tay	lor				06/17/2023	\$50.00
Mailing Addre	ss Canton Rd					
City, State, Zip Jackson,	D Code MS 39216-3313					
	oyer(Required) Cook, Taylor &	a Bush				
Occupation (F Attorney	Required)				Aggregate year-to-date	\$275.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Reilly Mo	rse				06/27/2023	\$250.00
Mailing Addre 929 Bridg						
City, State, Zip						
Name of Emplo	oyer (Required) yed					
Occupation (F Not Emplo					Aggregate year-to-date	\$900.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny Sn	eed				06/28/2023	\$1,000.00
Mailing Addre 4303 Ambr						
City, State, Zip Los Angel	o Code es, CA 90027-21	12				
	oyer (Required)					
Occupation (F	Required)				Aggregate year-to-date	\$1,250.00

Name of Candidate or Committee	Brandon	Presley
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 Reporting Period
 6/1/2023
 through
 6/30/2023

ITEMIZED RECEIPTS

Date (Mo., Day, Year)	Amount of each receipt this period
06/30/2023	\$250.00
Aggregate year-to-date	\$350.00
Date (Mo., Day, Year)	Amount of each receipt this period
06/03/2023	\$1,250.00
Aggregate year-to-date	\$8,850.00
Date (Mo., Day, Year)	Amount of each receipt this period
06/13/2023	\$25.00
Aggregate year-to-date	\$400.00
Date (Mo., Day, Year)	Amount of each receipt this period
06/24/2023	\$250.00
-	
	 (Mo., Day, Year) 06/30/2023 Aggregate year-to-date Date (Mo., Day, Year) 06/03/2023 Aggregate year-to-date Date (Mo., Day, Year) 06/13/2023 06/13/2023 Aggregate year-to-date

Name of	Candidate or	Committee	Brandon	Presley
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ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Katelan J. Bennett	06/06/2023	\$250.00
Mailing Address 298 Moss Ln		
City, State, Zip Code Petal, MS 39465-8925		
Name of Employer (Required) Cadence Bank		
Occupation (Required) Talent Acquisition	Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Howard Catchings	06/16/2023	\$1,000.00
Mailing Address PO Box 2509		
City, State, Zip Code Jackson, MS 39207-2509		
Name of Employer (Required) PFL Life		
Occupation (Required) Insurance Agent	Aggregate year-to-date	\$1,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
		receipt this
Other (please specify) Full Name Donald Scott Mailing Address	(Mo., Day, Year)	receipt this period
Image: Content of the specify Full Name Donald Scott	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Donald Scott Mailing Address 24536 Arcadia Farm Rd City, State, Zip Code	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Donald Scott Mailing Address 24536 Arcadia Farm Rd City, State, Zip Code Pass Christian, MS 39571-5904 Name of Employer (Required)	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Donald Scott Mailing Address 24536 Arcadia Farm Rd City, State, Zip Code Pass Christian, MS 39571-5904 Name of Employer (Required) Not Employed Occupation (Required)	(Mo., Day, Year)	receipt this period \$250.00
□Other (please specify) Full Name Donald Scott Mailing Address 24536 Arcadia Farm Rd City, State, Zip Code Pass Christian, MS 39571-5904 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC ☑ Individual	(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date	receipt this period \$250.00 \$250.00 \$250.00 Amount of each receipt this
□Other (please specify) Full Name Donald Scott Mailing Address 24536 Arcadia Farm Rd City, State, Zip Code Pass Christian, MS 39571-5904 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □Other (please specify)	(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$250.00 \$250.00 \$250.00 Amount of each receipt this period
□Other (please specify) Full Name Donald Scott Mailing Address 24536 Arcadia Farm Rd City, State, Zip Code Pass Christian, MS 39571-5904 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Other (please specify) Full Name Watt Bishop Mailing Address	(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$250.00 \$250.00 \$250.00 Amount of each receipt this period
□Other (please specify) Full Name Donald Scott Mailing Address 24536 Arcadia Farm Rd City, State, Zip Code Pass Christian, MS 39571-5904 Name of Employer (Required) Not Employed Occupation (Required) Not Employed Source: □Corporation □PAC □Individual □Loan □Other (please specify) Full Name Watt Bishop Mailing Address 714 N 14th St City, State, Zip Code	(Mo., Day, Year) 06/27/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$250.00 \$250.00 \$250.00 Amount of each receipt this period

Name of Candida	te or Committee	Brandon	Presley
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Source:	□Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Rc	berts	06/28/2023	\$50.00
Mailing Addre 709 North			
City, State, Zi Brandon ,	p Code MS 39047-5110	_	
Name of Emp Not Emplo	loyer (Required) byed		
Occupation (F		Aggregate year-to-date	\$450.00
Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sammy Fow	ler	06/20/2023	\$500.00
Mailing Addre 282 Main			
City, State, Zi Nettleton	p Code 1, MS 38858-6012		
	loyer (Required)		
Occupation (F Construct		Aggregate year-to-date	\$1,500.00
Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this
		-	period
Full Name Viva Wils		06/03/2023	\$1,000.00
Viva Wils Mailing Addre	son ess	06/03/2023	·
Viva Wils Mailing Addre 140 Hampt City, State, Zi	son ess con Rdg p Code	06/03/2023	·
Viva Wils Mailing Addre 140 Hampt City, State, Zi Madison,	son ess con Rdg p Code MS 39110-4538 loyer (Required)	06/03/2023	·
Viva Wils Mailing Addre 140 Hampt City, State, Zi Madison, Name of Emp	son ess con Rdg p Code MS 39110-4538 loyer (Required) byed	Aggregate year-to-date	·
Viva Wils Mailing Addre 140 Hampt City, State, Zi Madison, Name of Emp Not Emplo Occupation (F	son ess con Rdg p Code MS 39110-4538 loyer (Required) byed	Aggregate	\$1,000.00
Viva Wils Mailing Addre 140 Hampt City, State, Zi Madison, Name of Emp Not Emplo Occupation (F Retired Source:	son ess con Rdg p Code MS 39110-4538 loyer (Required) byed Required) Corporation PAC Individual Loan Other (please specify)	Aggregate year-to-date Date	\$1,000.00 \$1,000.00 Amount of each receipt this
Viva Wils Mailing Addre 140 Hampt City, State, Zi Madison, Name of Emp Not Emplo Occupation (F Retired Source: Full Name James Ray Mailing Addre	son ess con Rdg p Code MS 39110-4538 loyer (Required) oyed Required) □ Corporation □ PAC ☑ Individual □ Loan □ Other (please specify)	Aggregate year-to-date Date (Mo., Day, Year)	\$1,000.00 \$1,000.00 Amount of each receipt this period
Viva Wils Mailing Addre 140 Hampt City, State, Zi Madison, Name of Emp Not Emplo Occupation (F Retired Source: Full Name James Ray Mailing Addre 3915 Sain City, State, Zi	son ess con Rdg p Code MS 39110-4538 loyer (Required) byed Required) □ Corporation □ PAC ☑ Individual □ Loan □ Other (please specify) rmond ess at Charles Ave p Code	Aggregate year-to-date Date (Mo., Day, Year)	\$1,000.00 \$1,000.00 Amount of each receipt this period
Viva Wils Mailing Addre 140 Hampt City, State, Zi Madison, Name of Emp Not Emplo Occupation (F Retired Source: Full Name James Ray Mailing Addre 3915 Saim City, State, Zi New Orlea	son ess con Rdg p Code MS 39110-4538 loyer (Required) oyed Required) Corporation PAC Individual Loan Other (please specify) rmond ess at Charles Ave p Code ans, LA 70115-4659 loyer (Required)	Aggregate year-to-date Date (Mo., Day, Year)	\$1,000.00 \$1,000.00 Amount of each receipt this period
Viva Wils Mailing Addre 140 Hampt City, State, Zi Madison, Name of Emp Not Emplo Occupation (F Retired Source: Full Name James Ray Mailing Addre 3915 Sain City, State, Zi New Orlea	son sss son Rdg p Code MS 39110-4538 loyer (Required) oyed Required) Corporation PAC Individual Loan Other (please specify) mond sss at Charles Ave p Code ans, LA 70115-4659 loyer (Required) oyed Required)	Aggregate year-to-date Date (Mo., Day, Year)	\$1,000.00 \$1,000.00 Amount of each receipt this period

Name of	Candidate or	Committee	Brandon	Presley
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Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lavora C. Blake	06/29/2023	\$240.00
Mailing Address PO Box 27		
City, State, Zip Code Waterford, MS 38685-0027		
Name of Employer (Required) myEcon Inc		
Occupation (Required) Executive Vice President	Aggregate year-to-date	\$240.00
Source: Corporation PAC VIndividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Cocke	06/21/2023	\$3,000.00
Mailing Address 2 Oak Knoll Dr		
City, State, Zip Code Clarksdale, MS 38614-1951		
Name of Employer (Required) Not Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$3,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Benvenutti	06/14/2023	\$250.00
Mailing Address PO Box 2639		
City, State, Zip Code Bay Saint Louis, MS 39521-2639		
Name of Employer (Required) AVL CPA Firm		
	Aggragata	+= 0 0 0 0
Occupation (Required) Accountant	Aggregate year-to-date	\$500.00
		\$500.00 Amount of each receipt this period
Accountant Source: Corporation PAC Individual Loan	year-to-date Date	Amount of each receipt this
Accountant Source: Corporation PAC Individual Loan Other (please specify)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Accountant Source: Corporation PAC Individual Loan Other (please specify)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Accountant Source: Corporation PAC Individual Loan Other (please specify)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period
Accountant Source: Corporation PAC Individual Loan Other (please specify)	year-to-date Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candida	te or Committee	Brandon	Presley
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ITEMIZED	RECEIPTS

Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeff Rich	nardson	06/24/2023	\$500.00
Mailing Addre		-	
City, State, Zi		-	
	loyer (Required)		
Occupation (I Executive		Aggregate year-to-date	\$1,000.00
Source:	Corporation □PAC ✓Individual □Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carrol H.	Ingram	06/06/2023	\$500.00
Mailing Addre PO Box 15		-	
City, State, Zi Hattiesbu	p Code urg, MS 39404-5039		
Name of Emp Not Emplo	loyer (Required) byed	-	
Occupation (I Not Emplo		Aggregate year-to-date	\$500.00
Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tomie Gre	een	06/07/2023	\$10.00
Mailing Addre	ess Island Dr		
City, State, Zi Jackson,	p Code MS 39206-3234	-	
Name of Emp US Dept of	loyer (Required) of State		
Occupation (I Attorney	Required)	Aggregate year-to-date	\$245.00
Source:	Corporation □PAC ✓Individual □Loan □Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stefan Ma	assong	06/27/2023	\$100.00
Mailing Addre 307 Wiste			
City, State, Zi Ocean Spr	p Code rings, MS 39564-2840	-	
	loyer (Required)	1	
Occupation (I Psycholog	Required)	Aggregate year-to-date	\$600.00
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Name of Candida	te or Committee	Brandon	Presley
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ITEMIZED	RECEIPTS

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sumati Thomas	06/28/2023	\$25.00
Mailing Address 4146 Crestview Pl		
City, State, Zip Code		
Jackson, MS 39211-6404		
Name of Employer (Required) Change Research		
Occupation (Required) Analyst	Aggregate year-to-date	\$283.60
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frances M. Coleman	06/28/2023	\$25.00
Mailing Address 108 Royal Garden Ter		
City, State, Zip Code Madison, MS 39110-7637		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$330.00
Source: Corporation PAC 🗸 Individual Loan	_	
Source: Corporation PAC 🖌 Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
		receipt this
Other (please specify)	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Benjamin Griffith Mailing Address	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Benjamin Griffith Mailing Address 162 Oxford Creek Dr City, State, Zip Code	(Mo., Day, Year)	receipt this period
Other (please specify) Full Name Benjamin Griffith Mailing Address 162 Oxford Creek Dr City, State, Zip Code Oxford, MS 38655-2242 Name of Employer (Required)	(Mo., Day, Year)	receipt this period
□Other (please specify) Full Name Benjamin Griffith Mailing Address 162 Oxford Creek Dr City, State, Zip Code Oxford, MS 38655-2242 Name of Employer (Required) Griffith Law Firm Occupation (Required) Attorney Source: □Corporation □PAC ☑ Individual	(Mo., Day, Year) 06/22/2023 Aggregate year-to-date Date	receipt this period \$100.00 \$425.00 Amount of each receipt this
□Other (please specify) Full Name Benjamin Griffith Mailing Address 162 Oxford Creek Dr City, State, Zip Code Oxford, MS 38655-2242 Name of Employer (Required) Griffith Law Firm Occupation (Required) Attorney Source: □Corporation □Other (please specify)	(Mo., Day, Year) 06/22/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$100.00 \$425.00 Amount of each receipt this period
□Other (please specify) Full Name Benjamin Griffith Mailing Address 162 Oxford Creek Dr City, State, Zip Code Oxford, MS 38655-2242 Name of Employer (Required) Griffith Law Firm Occupation (Required) Attorney Source: □Corporation □PAC ☑ Individual	(Mo., Day, Year) 06/22/2023 Aggregate year-to-date Date	receipt this period \$100.00 \$425.00 Amount of each receipt this
□Other (please specify) Full Name Benjamin Griffith Mailing Address 162 Oxford Creek Dr City, State, Zip Code Oxford, MS 38655-2242 Name of Employer (Required) Griffith Law Firm Occupation (Required) Attorney Source: □Corporation □Other (please specify) Full Name Janice Jackson Mailing Address	(Mo., Day, Year) 06/22/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$100.00 \$425.00 Amount of each receipt this period
□Other (please specify) Full Name Benjamin Griffith Mailing Address 162 Oxford Creek Dr City, State, Zip Code Oxford, MS 38655-2242 Name of Employer (Required) Griffith Law Firm Occupation (Required) Attorney Source: □Corporation □Other (please specify) Full Name Janice Jackson	(Mo., Day, Year) 06/22/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$100.00 \$425.00 Amount of each receipt this period
□Other (please specify) Full Name Benjamin Griffith Mailing Address 162 Oxford Creek Dr City, State, Zip Code Oxford, MS 38655-2242 Name of Employer (Required) Griffith Law Firm Occupation (Required) Attorney Source: □Corporation □Other (please specify) Full Name Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050	(Mo., Day, Year) 06/22/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$100.00 \$425.00 Amount of each receipt this period
□Other (please specify) Full Name Benjamin Griffith Mailing Address 162 Oxford Creek Dr City, State, Zip Code Oxford, MS 38655-2242 Name of Employer (Required) Griffith Law Firm Occupation (Required) Attorney Source: □Corporation □Other (please specify) Full Name Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code	(Mo., Day, Year) 06/22/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$100.00 \$425.00 Amount of each receipt this period
□Other (please specify) Full Name Benjamin Griffith Mailing Address 162 Oxford Creek Dr City, State, Zip Code Oxford, MS 38655-2242 Name of Employer (Required) Griffith Law Firm Occupation (Required) Attorney Source: □Corporation □PAC ☑Individual □Loan □Other (please specify) Full Name Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required)	(Mo., Day, Year) 06/22/2023 Aggregate year-to-date Date (Mo., Day, Year)	receipt this period \$100.00 \$425.00 Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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Reporting Period6/1/2023through6/30/2023

			U	
Source: Corporation	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Buchanan			06/25/2023	\$30.00
Mailing Address 155 Bryant St				
City, State, Zip Code Palo Alto, CA 94301-110)4			
Name of Employer (Required) Not Employed				
Occupation (Required) Not Employed			Aggregate year-to-date	\$564.00
Source: Corporation	PAC 🖌 Individual ecify)	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Francis Gresock			06/07/2023	\$25.00
Mailing Address 609 Washington St				
City, State, Zip Code Natchez, MS 39120-3526				
Name of Employer (Required) Not Employed				
Occupation (Required) Not Employed			Aggregate year-to-date	\$400.00
Source: Corporation	□PAC ✓Individual ecify)	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alicia Margolis			06/08/2023	\$100.00
Mailing Address 1474 Dover Rd				
City, State, Zip Code Bentonia, MS 39040-9162	2			
Name of Employer (Required) Bradley Arant Boult Cur	mings LLP			
Occupation (Required) Attorney			Aggregate year-to-date	\$450.00
Source: Corporation	PAC 🖌 Individual ecify)	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilson Golden			06/30/2023	\$100.00
Mailing Address 3136 White Magnolia Cha	ase SW			
City, State, Zip Code Gainesville, GA 30504-5				
Name of Employer (Required) Not Employed				
Occupation (Required) Not Employed			Aggregate year-to-date	\$935.00

Name of	Candidate or	Committee	Brandon	Presley
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Reporting Period6/1/2023through6/30/2023

Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tammy Taylor-Bufford	06/30/2023	\$150.00
Mailing Address 335 Hotophia Hill Dr		
City, State, Zip Code Batesville, MS 38606-5724		
Name of Employer (Required) Delta Gastro		
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$473.40
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Danny E. Cupit	06/30/2023	\$5,000.00
Mailing Address PO Box 22929		
City, State, Zip Code Jackson, MS 39225-2929		
Name of Employer (Required) Law Offices of Danny E. Cupit PC		
Occupation (Required) Attorney	Aggregate year-to-date	\$5,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Theresa Steinberger	06/05/2023	\$50.00
Mailing Address 909 Eastwood St		
City, State, Zip Code Pascagoula, MS 39567-7549		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne Robinson	06/05/2023	\$5.00
Mailing Address 206 Wood St		
City, State, Zip Code Water Valley, MS 38965-2603	_	
Name of Employer (Required) Not Employed	—	
Occupation (Required)	Aggregate	\$985.00
Not Employed	year-to-date	

Name of Candidate of	r Committee	Brandon	Presley
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Reporting Period6/1/2023through6/30/2023

ITEMIZED RECEIPTS

10	
Date (Mo., Day, Year)	Amount of each receipt this period
06/25/2023	\$250.00
Aggregate year-to-date	\$844.25
Date (Mo., Day, Year)	Amount of each receipt this period
06/26/2023	\$300.00
-	
Aggregate year-to-date	\$300.00
Date (Mo., Day, Year)	Amount of each receipt this period
06/17/2023	\$100.00
-	
-	
Aggregate year-to-date	\$500.00
Date (Mo., Day, Year)	Amount of each receipt this period
06/29/2023	\$5,000.00
-	
-	
	<pre>(Mo., Day, Year) O6/25/2023 O6/25/2023 Aggregate year-to-date Date (Mo., Day, Year) O6/26/2023 O6/26/2023 Aggregate year-to-date Date (Mo., Day, Year) O6/17/2023 Aggregate year-to-date Date (Mo., Day, Year) O6/17/2023 Aggregate year-to-date</pre>

Reporting Period

6/1/2023	

through 6/30/2023

ITEMIZED DISBURSEMENTS

 Disbursements from contributions accumulated
 Prior to January 1, 2018 or
 Image: On or After January 1, 2018

 Full Name
 Date
 Amount of each

 Comfort Inn
 (Mo., Day, Year)
 disbursement this period

	(-) -) ,)	
Mailing Address		
10750 Columbia Pike	06/15/2023	\$105.33
City, State, Zip Code		
Silver Spring, MD 20901-4402		
Purpose of Disbursement (Optional)	Aggregate	\$473.27
Travel	year-to-date	Q1/3.2/
Full Name	Date	Amount of each
Lexis Nexis	(Mo., Day, Year)	disbursement this period
Mailing Address		
230 Park Ave	06/12/2023	\$670.00
City, State, Zip Code		
New York, NY 10169-0935		
Purpose of Disbursement (Optional)	Aggregate	\$1,469.68
Software Subscription	year-to-date	Ģ1,109.00
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	06/01/2023	\$1,532.00
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$35,305.46
Credit Card Processing	year-to-date	<i>\$33,303</i> .10
Full Name	Date	Amount of each
Hampton Inn	(Mo., Day, Year)	disbursement this period
Mailing Address		
	06/22/2023	\$178.08
City, State, Zip Code		
T		
Purpose of Disbursement (Optional)	Aggregate	\$725.64
Travel	year-to-date	Q723.04
Full Name	Date	Amount of each
Jada Barnes	(Mo., Day, Year)	disbursement this period
Mailing Address		
395 Lampton Hilltop Rd	06/15/2023	\$970.98
City, State, Zip Code		
Columbia, MS 39429-9189		
Purpose of Disbursement (Optional)	Aggregate	\$970.98
Salary	year-to-date	56.0176

Reporting Period

6/1/2023

6/30/2023

through ITEMIZED DISBURSEMENTS Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018 Full Name Date Amount of each United States Postal Service (Mo., Day, Year) disbursement this period Mailing Address 475 Lenfant Plz SW 06/29/2023 \$28.75 City, State, Zip Code Washington, DC 20260-0004 Purpose of Disbursement (Optional) Aggregate \$293.40 year-to-date Shipping & Postage Full Name Date Amount of each Abby O'Keefe (Mo., Day, Year) disbursement this period Mailing Address 1404 Highland Valley Cir 06/01/2023 \$2,811.60 City, State, Zip Code Wildwood, MO 63005-4259 Purpose of Disbursement (Optional) Aggregate \$17,184.43 year-to-date Salary Full Name Date Amount of each Numero (Mo., Day, Year) disbursement this period Mailing Address 200 Spectrum Center Dr 06/02/2023 \$102.92 City, State, Zip Code Irvine, CA 92618-5004 Purpose of Disbursement (Optional) Aggregate \$35,305.46 year-to-date Credit Card Processing Full Name Date Amount of each Walmart (Mo., Day, Year) disbursement this period Mailing Address 702 SW 8th St 06/22/2023 \$11.37 City, State, Zip Code Bentonville, AR 72716-6209 Purpose of Disbursement (Optional) Aggregate \$520.04 year-to-date Office Supplies Full Name Amount of each Date

Katharine Kurz (Mo., Day, Year) disbursement this period Mailing Address 634 W Main St 06/15/2023 \$1,994.23 City, State, Zip Code Tupelo, MS 38804-3745 Purpose of Disbursement (Optional) Aggregate \$4,198.34 year-to-date Salary

Reporting Period

6/1/2023

through 6/30/2023

ITEMIZED DISBURSEMENTS

 Disbursements from contributions accumulated
 Prior to January 1, 2018 or
 On or After January 1, 2018

 Full Name
 Date
 Amount of each

Payroll Data Processing	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
3501 E Frontage Rd	06/01/2023	\$94.48
City, State, Zip Code		+>1110
Tampa, FL 33607-1723		
Purpose of Disbursement (Optional)	Aggregate	
Payroll Fees	year-to-date	\$96,972.07
Full Name		
Jacob Smith	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
4100 N Gloster St	06/15/2023	\$1,994.23
City, State, Zip Code		
Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional)	Aggregate	\$10,607.47
Salary	year-to-date	Ş10,007.47
Full Name	Date	Amount of each
Mississippi Public Service Commission	(Mo., Day, Year)	disbursement this period
Mailing Address		
501 N West St	06/05/2023	\$483.01
City, State, Zip Code		
Jackson, MS 39201-1001		
Purpose of Disbursement (Optional)	Aggregate	\$483.01
Public Records Request	year-to-date	Q103.01
Full Name	Date	Amount of each
Juneteenth Tupelo	(Mo., Day, Year)	disbursement this period
Mailing Address		
2434 W Main St	06/13/2023	\$300.00
City, State, Zip Code		
Tupelo, MS 38801-3148		
Purpose of Disbursement (Optional)	Aggregate	\$300.00
Event Sponsorship	year-to-date	Ŷ300100
Full Name	Date	Amount of each
Payroll Data Processing		disbursement this period
Mailing Address		
3501 E Frontage Rd	06/15/2023	\$137.23
City, State, Zip Code		
Tampa, FL 33607-1723		
Purpose of Disbursement (Optional)	Aggregate	\$96,972.07
Payroll Fees	year-to-date	φυτ, στ <u>2</u> .01

	Name of	Candidate or	Committee	Brandon	Presley
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Reporting Period 6/1/2023 through

6/30/2023

ITEMIZED DISBURSEMENTS

Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	(WO., Day, Tear)	
-	06/00/0000	¢011_00
200 Spectrum Center Dr	06/28/2023	\$211.90
City, State, Zip Code		
Irvine, CA 92618-5004	A	
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$35,305.46
Credit Card Processing	,	
Full Name	Date	Amount of each
CCS Parking Inc	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 1010	06/01/2023	\$1,380.00
City, State, Zip Code		
Eatontown, NJ 07724-1010		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,380.00
Event Parking	year-to-date	
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	06/19/2023	\$560.22
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$35,305.46
Credit Card Processing	year-to-date	
Full Name	Date	Amount of each
Avid Hotel	(Mo., Day, Year)	disbursement this period
Mailing Address		
3 Ravinia Dr	06/29/2023	\$134.81
City, State, Zip Code		
Atlanta, GA 30346-2121		
Purpose of Disbursement (Optional)	Aggregate	\$545.74
Travel	year-to-date	ŞJIJ./I
Full Name	Date	Amount of each
ActBlue Technical Services	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 382110	06/12/2023	\$438.03
City, State, Zip Code	1	
Cambridge, MA 02238-2110		
	1	
Purpose of Disbursement (Optional)	Aggregate	\$14,522.78

Reporting Period

6/1	/2023	

through 6/30/2023

ITEMIZED DISBURSEMENTS

 Disbursements from contributions accumulated
 Prior to January 1, 2018 or
 Image: On or After January 1, 2018

 Full Name
 Date
 Amount of each

 Comfort Inn
 (Mo., Day, Year)
 disbursement this period

Comfort Inn	(Mo., Day, Year)	disbursement this period
Mailing Address		
10750 Columbia Pike	06/15/2023	\$145.59
City, State, Zip Code		
Silver Spring, MD 20901-4402		
Purpose of Disbursement (Optional)	Aggregate	\$473.27
Travel	year-to-date	Ţ 1/0 / 2/
Full Name	Date	Amount of each
The Strategy Group LLC	(Mo., Day, Year)	disbursement this period
Mailing Address		
500 W Madison St	06/12/2023	\$6,000.00
City, State, Zip Code		
Chicago, IL 60661-2559		
Purpose of Disbursement (Optional)	Aggregate	\$6,000.00
Printing of Campaign Materials	year-to-date	+ - ,
Full Name	Date	Amount of each
Adam Beyer	(Mo., Day, Year)	disbursement this period
Mailing Address		
4288 N Gloster St	06/01/2023	\$2,974.48
City, State, Zip Code		
Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional)	Aggregate	\$18,805.82
Salary	year-to-date	
Full Name	Date	Amount of each
Hampton Inn	(Mo., Day, Year)	disbursement this period
Mailing Address		
	06/22/2023	\$178.08
City, State, Zip Code		
<u>'</u>		
Purpose of Disbursement (Optional)	Aggregate	\$725.64
Travel	year-to-date	·
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	06/05/2023	\$427.27
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$35,305.46
Credit Card Processing	year-to-date	

Reporting Period

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6/30/2023 rough

ITEMIZED DISBURSEMENTS Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018 Full Name Date Amount of each (Mo., Day, Year) disbursement this period Morgan Benjamin Mailing Address 4212 28th St 06/15/2023 \$1,812.30 City, State, Zip Code Long Island City, NY 11101-6258 Purpose of Disbursement (Optional) Aggregate \$1,812.30 year-to-date Salary Full Name Date Amount of each (Mo., Day, Year) Lowe's disbursement this period Mailing Address 3354 N Gloster St 06/16/2023 \$329.88 City, State, Zip Code Tupelo, MS 38804-9704 Purpose of Disbursement (Optional) Aggregate \$1,173.41 year-to-date Office Supplies Full Name Date Amount of each Ron Owens (Mo., Day, Year) disbursement this period Mailing Address 3545 Mitchell Rd 06/01/2023 \$3,935.75 City, State, Zip Code Tupelo, MS 38801-9616 Purpose of Disbursement (Optional) Aggregate \$41,681.71 year-to-date Salary Full Name Date Amount of each Walmart (Mo., Day, Year) disbursement this period Mailing Address 702 SW 8th St 06/22/2023 \$75.12 City, State, Zip Code Bentonville, AR 72716-6209 Purpose of Disbursement (Optional) Aggregate \$520.04 year-to-date Office Supplies Full Name Amount of each Date Silly Sisters, LLC (Mo., Day, Year) disbursement this period Mailing Address 310 County Road 640 06/05/2023 \$900.00 City, State, Zip Code Baldwyn, MS 38824-8680 Purpose of Disbursement (Optional) Aggregate \$4,500.00

year-to-date

Name of	Candidate or	Committee	Brandon	Presley
		Committee	Dranaon	I I CDICJ

6/1/2023	through

6/30/2023

ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018 Full Name Date Amount of each (Mo., Day, Year) disbursement this period Issac Lampner Mailing Address 06/15/2023 \$2,798.60 City, State, Zip Code Tupelo, MS 38804 Purpose of Disbursement (Optional) Aggregate \$32,769.58 year-to-date Salary Full Name Date Amount of each Shalonda Spencer (Mo., Day, Year) disbursement this period Mailing Address 1509 Hawthorne Pl 06/15/2023 \$2,811.60 City, State, Zip Code Clinton, MS 39056-3910 Purpose of Disbursement (Optional) Aggregate \$15,545.07 year-to-date Salary Full Name Date Amount of each MBA Consulting Group (Mo., Day, Year) disbursement this period Mailing Address 611 Pennsylvania Ave SE 06/01/2023 \$5,100.00 City, State, Zip Code Washington, DC 20003-4303 Purpose of Disbursement (Optional) Aggregate \$30,120.00 year-to-date Compliance Consulting Full Name Date Amount of each Best Western Hotel (Mo., Day, Year) disbursement this period Mailing Address 6201 N 24th Pkwy 06/12/2023 \$305.76 City, State, Zip Code Phoenix, AZ 85016-2023 Purpose of Disbursement (Optional) Aggregate \$602.74 year-to-date Travel Full Name Amount of each Date Ethan Cox (Mo., Day, Year) disbursement this period Mailing Address 3614 N Fremont St 06/12/2023 \$1,151.78 City, State, Zip Code Chicago, IL 60613-4372 Purpose of Disbursement (Optional) Aggregate \$9,722.54 year-to-date Reimbursement - Staff Travel and Meals

Name of	Candidate or	Committee	Brandon	Presley
	oundrate of	001111111100		

Salary

6/1/2023

through 6/30/2023

ITEMIZED DISBURSEMENTS Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018 Full Name Date Amount of each (Mo., Day, Year) The Kroger Co. disbursement this period Mailing Address 1014 Vine St 06/06/2023 \$73.28 City, State, Zip Code Cincinnati, OH 45202-1141 Purpose of Disbursement (Optional) Aggregate \$1,025.51 year-to-date Office Supplies Full Name Date Amount of each Lowe's (Mo., Day, Year) disbursement this period Mailing Address 3354 N Gloster St 06/20/2023 \$368.73 City, State, Zip Code Tupelo, MS 38804-9704 Purpose of Disbursement (Optional) Aggregate \$1,173.41 year-to-date Office Supplies Full Name Date Amount of each Ethan Cox (Mo., Day, Year) disbursement this period Mailing Address 3614 N Fremont St 06/01/2023 \$1,623.42 City, State, Zip Code Chicago, IL 60613-4372 Purpose of Disbursement (Optional) Aggregate \$9,722.54 year-to-date Salary Full Name Date Amount of each Hilton Hotels (Mo., Day, Year) disbursement this period Mailing Address 7930 Jones Branch Dr 06/14/2023 \$132.84 City, State, Zip Code Mclean, VA 22102-3388 Purpose of Disbursement (Optional) Aggregate \$1,737.54 year-to-date Travel Full Name Amount of each Date Adam Beyer (Mo., Day, Year) disbursement this period Mailing Address 4288 N Gloster St 06/15/2023 \$2,974.48 City, State, Zip Code Tupelo, MS 38804-7249 Purpose of Disbursement (Optional) Aggregate \$18,805.82 year-to-date

Name of	Candidate or	Committee	Brandon	Presley
Name or	Canuluate of	Committee	Dranaon	TTCDTC

6/1/2023

6/30/2023 through

ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or ✓ On or After January 1, 2018 Full Name Date Amount of each Shawn Patterson (Mo., Day, Year) disbursement this period Mailing Address 1160 1st St NE 06/01/2023 \$2,974.48 City, State, Zip Code Washington, DC 20002-4799 Purpose of Disbursement (Optional) Aggregate \$18,182.44 year-to-date Salary Full Name Amount of each Date Jake Laves (Mo., Day, Year) disbursement this period Mailing Address 699 Nation Hills Dr 06/15/2023 \$2,974.48 City, State, Zip Code Tupelo, MS 38804-6063

Purpose of Disbursement (Optional)	Aggregate year-to-date	\$18,610.56
Salary	year-to-tate	
Full Name	Date	Amount of each
Amalgamated Bank	(Mo., Day, Year)	disbursement this period
Mailing Address		
275 7th Ave	06/26/2023	\$91.25
City, State, Zip Code		
New York, NY 10001-6708		
Purpose of Disbursement (Optional)	Aggregate	\$335.95
Bank Fee	year-to-date	+000170
Full Name	Date	Amount of each
Walmart	(Mo., Day, Year)	disbursement this period
Mailing Address		
702 SW 8th St	06/26/2023	\$4.55
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate	\$520.04
Office Supplies	year-to-date	Ç 5 2 0 1 0 1
Full Name	Date	Amount of each
Michael Waller	(Mo., Day, Year)	disbursement this period
Mailing Address		
103 Redbud Dr	06/15/2023	\$2,081.03
City, State, Zip Code		
Hendersonville, TN 37075-3982		
Purpose of Disbursement (Optional)	Aggregate	\$4,075.26
Salary	year-to-date	Q1,073.20

Name of	Candidate or	Committee	Brandon	Presley
	Canalate of	Committee	Dranaon	TTCDTC

through 6/30/2023

ITEMIZED DISBURSEMENTS

 Disbursements from contributions accumulated
 Prior to January 1, 2018 or
 Image: On or After January 1, 2018

 Full Name
 Date (Mo., Day, Year)
 Amount of each disbursement this period

 Mailing Address
 06/26/2023
 \$2,152.23

PO BOX 362110	00/20/2023	32,132.23
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate	\$14,522.78
Credit Card Processing	year-to-date	Q11,322.70
Full Name	Date	Amount of each
Shell Oil Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 2463	06/16/2023	\$45.00
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate	\$967.96
Travel	year-to-date	Ş 9 0 7 . 9 0
Full Name	Date	Amount of each
IP Casino Resort & Spa	(Mo., Day, Year)	disbursement this period
Mailing Address		
850 Bayview Ave	06/07/2023	\$95.19
City, State, Zip Code		
Biloxi, MS 39530-1701		
Purpose of Disbursement (Optional)	Aggregate	\$945.35
Travel	year-to-date	ŶŸ 13.33
Full Name	Date	Amount of each
ActBlue Technical Services	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 382110	06/19/2023	\$567.50
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate	\$14,522.78
Credit Card Processing	year-to-date	· · · · · · · · · · · · · · · · · · ·
Full Name	Date	Amount of each
Woodmont Public Strategies, LLC	(Mo., Day, Year)	disbursement this period
Mailing Address		
2018 Medical Center Pkwy	06/22/2023	\$9,521.02
City, State, Zip Code		
Murfreesboro, TN 37129-3265		
Purpose of Disbursement (Optional)	Aggregate	\$20,709.72
Political Strategy Consultant	year-to-date	ΥΔU, ΙUΣ.ΙΔ

Reporting Period

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through 6/30/2023

ITEMIZED DISBURSEMENTS

 Disbursements from contributions accumulated
 Prior to January 1, 2018 or
 On or After January 1, 2018

 Full Name
 Date
 Amount of each

 Chate
 Date
 Amount of each

Mailing Address06/07/21 State Farm Plz06/07/2City, State, Zip Code06/07/2Bloomington, IL 61710-0001Aggreg year-to-cPurpose of Disbursement (Optional)Aggreg year-to-cInsuranceDate (Mo., Day, Mailing Address10750 Columbia Pike06/15/2City, State, Zip Code06/15/2Silver Spring, MD 20901-440206/15/2Purpose of Disbursement (Optional)Aggreg year-to-cTravelDate (Mo., Day, Mailing Address601 Baptist Dr City, State, Zip Code06/12/2601 Baptist Dr City, State, Zip Code06/12/2Mailson, MS 39110-2003Aggreg year-to-cPurpose of Disbursement (Optional)Aggreg year-to-cTravel06/12/2Full Name Courtyard by Marriott06/12/2Full Name City, State, Zip Code06/12/2Mailson, MS 39110-2003Aggreg year-to-cPurpose of Disbursement (Optional)Aggreg year-to-cFull Name06/12/2Full Name06/12/2Full Name06/12/2Full Name06/12/2Full Name06/12/2	gate date e, Year) 2023 gate	\$102.52 \$512.60 Amount of each disbursement this period \$117.02
City, State, Zip CodeBloomington, IL 61710-0001Purpose of Disbursement (Optional)InsuranceFull NameComfort InnComfort InnMailing Address10750 Columbia PikeCity, State, Zip CodeSilver Spring, MD 20901-4402Purpose of Disbursement (Optional)TravelFull NameCourtyard by MarriottGold Baptist DrCity, State, Zip CodeMailing AddressGourtyard by MarriottMailing AddressGourtyard by MarriottMailing AddressGourty State, Zip CodeMailing AddressGourtyard by MarriottMailing AddressGourty State, Zip CodeMadison, MS 39110-2003Purpose of Disbursement (Optional)TravelFull NameCity, State, Zip CodeMadison, MS 39110-2003Purpose of Disbursement (Optional)TravelFull Name	gate date e, Year) 2023 gate	\$512.60 Amount of each disbursement this period \$117.02
Bloomington, IL 61710-0001 Purpose of Disbursement (Optional) Insurance Full Name Comfort Inn Mailing Address 10750 Columbia Pike City, State, Zip Code Silver Spring, MD 20901-4402 Purpose of Disbursement (Optional) Travel Full Name Courtyard by Marriott Mailing Address 601 Baptist Dr City, State, Zip Code Mailing Address 601 Baptist Dr City, State, Zip Code Mailing Address 601 Baptist Dr City, State, Zip Code Madison, MS 39110-2003 Purpose of Disbursement (Optional) Travel	date , Year) 2023 gate	Amount of each disbursement this period \$117.02
Purpose of Disbursement (Optional)Aggreg year-to-dInsuranceDate (Mo., Day, Mailing AddressDate (Mo., Day, Mailing Address10750 Columbia Pike06/15/2City, State, Zip Code06/15/2Silver Spring, MD 20901-4402Aggreg year-to-dPurpose of Disbursement (Optional)Aggreg year-to-dTravelDate (Mo., Day, Mailing Address601 Baptist Dr06/12/2City, State, Zip Code06/12/2Full NameDate (Mo., Day, Mailing Address601 Baptist Dr06/12/2City, State, Zip Code06/12/2Madison, MS 39110-2003Aggreg year-to-dPurpose of Disbursement (Optional)Aggreg year-to-dTravelDate (Mo., Day, Mailing AddressFull Name06/12/2Eull NameAggreg year-to-dFull NameDate (Optional)Full NameAggreg year-to-d	date , Year) 2023 gate	Amount of each disbursement this period \$117.02
Purpose of Disbursement (Optional)Aggreg year-to-dInsuranceDate (Mo., Day, Mailing AddressDate (Mo., Day, Mailing Address10750 Columbia Pike06/15/2City, State, Zip Code06/15/2Silver Spring, MD 20901-4402Aggreg year-to-dPurpose of Disbursement (Optional)Aggreg year-to-dTravelDate (Mo., Day, Mailing Address601 Baptist Dr06/12/2City, State, Zip Code06/12/2Full NameDate (Mo., Day, Mailing Address601 Baptist Dr06/12/2City, State, Zip Code06/12/2Madison, MS 39110-2003Aggreg year-to-dPurpose of Disbursement (Optional)Aggreg year-to-dTravelDate (Mo., Day, Mailing AddressFull Name06/12/2Eull NameAggreg year-to-dFull NameDate (Optional)Full NameAggreg year-to-d	date , Year) 2023 gate	Amount of each disbursement this period \$117.02
Insurance Press Full Name Date Comfort Inn (Mo., Day, Mailing Address 06/15/2 10750 Columbia Pike 06/15/2 City, State, Zip Code 06/15/2 Silver Spring, MD 20901-4402 Aggreg Purpose of Disbursement (Optional) Aggreg Travel Date Full Name Date Courtyard by Marriott (Mo., Day, Mailing Address 06/12/2 601 Baptist Dr 06/12/2 City, State, Zip Code 06/12/2 Madison, MS 39110-2003 Aggreg Purpose of Disbursement (Optional) Aggreg Travel Date	e , Year) 2023 gate	Amount of each disbursement this period \$117.02
Comfort Inn(Mo., Day,Mailing Address06/15/210750 Columbia Pike06/15/2City, State, Zip Code06/15/2Silver Spring, MD 20901-4402AggregPurpose of Disbursement (Optional)AggregTravelDateFull NameDateCourtyard by Marriott(Mo., Day,Mailing Address06/12/2601 Baptist Dr06/12/2City, State, Zip Code06/12/2Madison, MS 39110-2003AggregPurpose of Disbursement (Optional)AggregTravelEull Name	, Year) 2023 gate	disbursement this period \$117.02
Comfort Inn(Mo., Day, Mailing Address10750 Columbia Pike06/15/2City, State, Zip Code06/15/2Silver Spring, MD 20901-4402Aggreg year-to-dPurpose of Disbursement (Optional)Aggreg year-to-dTravelDate (Mo., Day, Mailing Address601 Baptist Dr City, State, Zip Code06/12/2Madison, MS 39110-2003Aggreg year-to-dPurpose of Disbursement (Optional)Aggreg year-to-dTravelEull Name06/12/2	, Year) 2023 gate	disbursement this period \$117.02
10750 Columbia Pike06/15/2City, State, Zip CodeSilver Spring, MD 20901-4402Purpose of Disbursement (Optional)Aggreg year-to-displayTravelDate (Mo., Day, (Mailing Address601 Baptist Dr06/12/2City, State, Zip Code06/12/2Madison, MS 39110-2003Aggreg year-to-displayPurpose of Disbursement (Optional)Aggreg year-to-displayTravelEull Name	jate	
City, State, Zip CodeSilver Spring, MD 20901-4402Purpose of Disbursement (Optional)TravelFull NameCourtyard by MarriottMailing Address601 Baptist DrCity, State, Zip CodeMadison, MS 39110-2003Purpose of Disbursement (Optional)Travel	jate	
Silver Spring, MD 20901-4402Aggreg year-to-dPurpose of Disbursement (Optional)Aggreg year-to-dTravelDate (Mo., Day, Mailing AddressDate (Mo., Day, O6/12/2601 Baptist Dr City, State, Zip Code06/12/2Madison, MS 39110-2003Aggreg year-to-dPurpose of Disbursement (Optional)Aggreg year-to-dTravelEull NameAggreg 		
Purpose of Disbursement (Optional)Aggreg year-to-displayTravelFull NameDate (Mo., Day, (Mo., Day, Mailing Address601 Baptist Dr06/12/2601 Baptist Dr06/12/2City, State, Zip Code06/12/2Madison, MS 39110-2003Aggreg year-to-displayPurpose of Disbursement (Optional)Aggreg year-to-displayTravelEull NameAggreg		
Travelyear-to-decodeFull NameDateCourtyard by Marriott(Mo., Day,Mailing Address06/12/2601 Baptist Dr06/12/2City, State, Zip Code06/12/2Madison, MS 39110-2003AggregPurpose of Disbursement (Optional)AggregTravelEull Name		
Iravel Date Full Name Date Courtyard by Marriott (Mo., Day, Mailing Address 06/12/2 601 Baptist Dr 06/12/2 City, State, Zip Code 06/12/2 Madison, MS 39110-2003 Aggreg Purpose of Disbursement (Optional) Aggreg Travel Eull Name	date	\$473.27
Courtyard by Marriott (Mo., Day, Mailing Address (Mo., Day, 601 Baptist Dr 06/12/2 City, State, Zip Code 06/12/2 Madison, MS 39110-2003 Aggreg Purpose of Disbursement (Optional) Aggreg Travel Eull Name		φ1/ 3. 2/
Courtyard by Marriott(Mo., Day,Mailing Address06/12/2601 Baptist Dr06/12/2City, State, Zip Code06/12/2Madison, MS 39110-2003AggregPurpose of Disbursement (Optional)AggregTravelYear-to-c	<u>ب</u>	Amount of each
601 Baptist Dr 06/12/2 City, State, Zip Code 06/12/2 Madison, MS 39110-2003 Aggreg Purpose of Disbursement (Optional) Aggreg Travel Year-to-optional		disbursement this period
City, State, Zip Code Madison, MS 39110-2003 Purpose of Disbursement (Optional) Travel Eull Name		
Madison, MS 39110-2003 Purpose of Disbursement (Optional) Travel Full Name	2023	\$191.53
Purpose of Disbursement (Optional) Aggreg Travel Year-to-o		
Travel year-to-		
Full Name		\$590.05
Full Name	date	Ç320.03
Date		Amount of each
Aaron Facio-Cortes (Mo., Day,		disbursement this period
Mailing Address		
27006 Fordham Dr 06/01/2	2023	\$1,994.23
City, State, Zip Code		
Wesley Chapel, FL 33544-8730		
Purpose of Disbursement (Optional) Aggreg		\$4,162.06
Salary year-to-	date	Q1,102.00
Full Name Date		Amount of each
The Law Office of Michael Winfield (Mo., Day,		disbursement this period
Mailing Address		
106 S President St 06/02/2		\$1,500.00
City, State, Zip Code	2023	
Jackson, MS 39201-3601	2023	
Purpose of Disbursement (Optional) Aggreg	2023	
Rent year-to-	jate	\$3,000.00

Reporting Period 6

through 6/30/2023

ITEMIZED DISBURSEMENTS

Hilton Hotels (Mo., Day, Year) disbursement this period Maling Address 06/14/2023 \$143.94 (Mo., Day, Year) disbursement this period Maling Address 06/14/2023 \$143.94 (Mo., Day, Year) disbursement this period Maling Address 06/14/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/12/2023 (Mo., Day, Year) disbursement this period Maling Address 06/28/2023 (Mo., Day, Year) disbursement this period Maling Address 06/28/2023 (Mo., Day, Year) disbursement (Dptional) (Maling Address 06/28/2023 (Mo., Day, Year) disbursement (Dptional) (Maling Address 06/28/2023 (Mo., Day, Year) disbursement (Dptional) (Maling Address 06/28/2023 (Mo., Day, Year) disbursement this period Maling Address 06/28/2023 (Mo., Day, Year) disbursement (Dptional) (Maling Address 06/28/2023 (Mo., Day, Year) disbursement this period Maling Address 06/28/2023 (Mo., Day, Year) disbursement this period Maling Address 06/28/2023 (Mo., Day, Year) disbursement this period Maling Address 06/28/2023 (Mo., Day, Year) disbursement this period Maling Address 06/28/2023 (Mo., Day, Year) disbursement this period Ma	Full Name	Date	Amount of each
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SalaryYear to dateFull NameDate (Mo., Day, Year)Amount of each disbursement this periodMailing Address06/28/2023\$23.76702 SW 8th St06/28/2023\$23.76City, State, Zip Code06/28/2023\$23.76Bentonville, AR 72716-6209Aggregate year-to-date\$520.04Purpose of Disbursement (Optional)Aggregate year-to-date\$520.04Office SuppliesDate (Mo., Day, Year)Amount of each disbursement this periodFull NameDate (Mo., Day, Year)Amount of each disbursement this periodPo Box 246306/20/2023\$69.21City, State, Zip Code06/20/2023\$69.21Houston, TX 77252-2463Aggregate yearto-date\$967.96	Purpose of Disbursement (Optional)		\$17,184,43
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Walmart(Mo., Day, Year)disbursement this periodMailing Address06/28/2023\$23.76702 SW 8th St06/28/2023\$23.76City, State, Zip CodeAggregate year-to-date\$2520.04Purpose of Disbursement (Optional)Aggregate year-to-date\$520.04Office SuppliesDate (Mo., Day, Year)Amount of each disbursement this periodFull NameDate (Mo., Day, Year)Amount of each disbursement this periodShell Oil Co06/20/2023\$69.21Mailing Address06/20/2023\$69.21PO Box 246306/20/2023\$69.21City, State, Zip CodeAggregate year-to-date\$967.96	Full Name	Date	Amount of each
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Purpose of Disbursement (Optional) Office SuppliesAggregate year-to-date\$520.04Full Name Shell Oil CoDate (Mo., Day, Year)Amount of each disbursement this periodMailing Address PO Box 2463 City, State, Zip Code Houston, TX 77252-246306/20/2023\$69.21Purpose of Disbursement (Optional)Aggregate year-to-date\$967.96	City, State, Zip Code		
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DateDateAmount of eachShell Oil Co(Mo., Day, Year)disbursement this periodMailing Address06/20/2023\$69.21PO Box 246306/20/2023\$69.21City, State, Zip Code1000000000000000000000000000000000000	Office Supplies	year-to-date	Ç520.04
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City, State, Zip Code Houston, TX 77252-2463 Purpose of Disbursement (Optional) Aggregate year-to-date \$967.96	Mailing Address		
Houston, TX 77252-2463 Aggregate Purpose of Disbursement (Optional) \$967.96	PO Box 2463	06/20/2023	\$69.21
Houston, TX 77252-2463 Aggregate Purpose of Disbursement (Optional) \$967.96	City, State, Zip Code		
Purpose of Disbursement (Optional) Aggregate \$967.96			
vear to date \$967.96		Aggregate	4007 00
			\$967.96

Reporting Period

6/1/2023	

through 6/30/2023

ITEMIZED DISBURSEMENTS

 Disbursements from contributions accumulated
 Prior to January 1, 2018 or
 Image: On or After January 1, 2018

 Full Name
 Date
 Amount of each

 Felicia Yearwood
 (Mo., Day, Year)
 disbursement this period

Felicia Yearwood	(Mo., Day, Year)	disbursement this period
Mailing Address		
5206 Lakeview Dr	06/15/2023	\$2,124.43
City, State, Zip Code		
Moss Point, MS 39563-2128		
Purpose of Disbursement (Optional)	Aggregate	\$4,118.66
Salary	year-to-date	+ 1 / 110100
Full Name	Date	Amount of each
IP Casino Resort & Spa	(Mo., Day, Year)	disbursement this period
Mailing Address		
850 Bayview Ave	06/07/2023	\$95.19
City, State, Zip Code		
Biloxi, MS 39530-1701		
Purpose of Disbursement (Optional)	Aggregate	\$945.35
Travel	year-to-date	Ç713.33
Full Name	Date	Amount of each
Living Free Ministries	(Mo., Day, Year)	disbursement this period
Mailing Address		
2024 US-72	06/21/2023	\$250.00
City, State, Zip Code		
Corinth, MS 38834		
Purpose of Disbursement (Optional)	Aggregate	\$250.00
Event Sponsorship	year-to-date	φ 2 50.00
Full Name	Date	Amount of each
NGP VAN	(Mo., Day, Year)	disbursement this period
Mailing Address		
1101 15th St NW	06/22/2023	\$1,783.44
City, State, Zip Code		
Washington, DC 20005-5006		
Purpose of Disbursement (Optional)	Aggregate	\$10,225.32
Database Services	year-to-date	Q10,223.32
Full Name	Date	Amount of each
Begley Law Firm	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 287	06/12/2023	\$9,087.50
City, State, Zip Code		
Jackson, MS 39205-0287		
Purpose of Disbursement (Optional)	Aggregate	\$14,087.50
Legal Services	year-to-date	γ ₁ 4,007.50
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Reporting Period

6/1/2023

through 6/30/2023

ITEMIZED DISBURSEMENTS

 Disbursements from contributions accumulated
 Prior to January 1, 2018 or
 Image: On or After January 1, 2018

 Full Name
 Date
 Amount of each

 Chevron Stations
 (Mo., Day, Year)
 disbursement this period

	(- , - , , - , ,	
Mailing Address		
6001 Bollinger Canyon Rd	06/09/2023	\$56.44
City, State, Zip Code		
San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional)	Aggregate	\$395.26
Travel	year-to-date	+070120
Full Name	Date	Amount of each
ActBlue Technical Services	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 382110	06/05/2023	\$617.59
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate	\$14,522.78
Credit Card Processing	year-to-date	<i>Q117022170</i>
Full Name	Date	Amount of each
Declaration Media Group	(Mo., Day, Year)	disbursement this period
Mailing Address		
1152 15th St NW	06/15/2023	\$62,509.00
City, State, Zip Code		
Washington, DC 20005-1723		
Purpose of Disbursement (Optional)	Aggregate	\$99,720.51
Video Production	year-to-date	<i>QJJ</i> ,720.31
Full Name	Date	Amount of each
Courtyard by Marriott	(Mo., Day, Year)	disbursement this period
Mailing Address		
601 Baptist Dr	06/30/2023	\$132.84
City, State, Zip Code		
Madison, MS 39110-2003		
Purpose of Disbursement (Optional)	Aggregate	\$590.05
Travel	year-to-date	¢550.05
Full Name	Date	Amount of each
Shinitra Russell	(Mo., Day, Year)	disbursement this period
Mailing Address		
1185 Collier Rd NW	06/15/2023	\$2,367.50
City, State, Zip Code		
Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional)	Aggregate	\$9,395.44
Salary	year-to-date	דד.ככנ,כק

Reporting Period

6/1/2023

through 6/30/2023

ITEMIZED DISBURSEMENTS

Full NameDate (Mo., Day, Year)Amount of each disbursement this pPastlane Gas Stations06/20/2023\$158Mailing Address06/20/2023\$158220 W Government St06/20/2023\$158City, State, Zip CodePurpose of Disbursement (Optional)Aggregate year-to-date\$292TravelDate (Mo., Day, Year)Amount of each disbursement (No., Day, Year)Amount of each disbursement this pFull NameDate (Mo., Day, Year)Amount of each disbursement this pSilo S Broadway St06/01/2023\$2,167City, State, Zip Code06/01/2023\$2,167Tupelo, MS 38804-483206/01/2023\$2,167Full NameDate (Mo., Day, Year)Aggregate year-to-date\$11,297Full NameDate (Mo., Day, Year)Amount of each disbursement this pIng Address06/23/2023\$11,297SalarySalarySalaryAggregate year-to-dateFull NameDate (Mo., Day, Year)Amount of each disbursement this pIng Address06/23/2023\$312City, State, Zip Code06/23/2023\$312Tupelo, MS 38804-9704Aggregate year-to-date\$1,173Purpose of Disbursement (Optional)Aggregate year-to-date\$1,173Office SuppliesDate (Mo., Day, Year)Amount of each disbursement this pFull NameDate year-to-dateAmount of each disbursement this pPurpose of Disbursement (Optional)Aggregate year-to-date\$	
Mailing Address06/20/2023\$158320 W Government St06/20/2023\$158City, State, Zip CodePurpose of Disbursement (Optional)Aggregate year-to-date\$292Full NameDate (Mo., Day, Year)Amount of eact disbursement this pMailing Address06/01/2023\$2,167City, State, Zip Code06/01/2023\$2,167Full Name06/01/2023\$2,167Purpose of Disbursement (Optional)Aggregate year-to-date\$11,297Salary06/01/2023\$11,297Full NameDate (Mo., Day, Year)Amount of eact disbursement this pLowe 'sMailing Address06/23/2023\$312Tupelo, MS 38804-970406/23/2023\$312Purpose of Disbursement (Optional)Aggregate year-to-date\$11,173Office Supplies06/23/2023\$312Full NameDate (Mo., Day, Year)Aggregate year-to-date\$11,173Mailing Address06/23/2023\$312Office SuppliesDate (Mo., Day, Year)Amount of eact disbursement this pMailing Address06/14/2023\$156Mailing Address06/14/2023\$156	-
320 W Government St06/20/2023\$158City, State, Zip CodeBrandon, MS 39042-3146Aggregate year-to-date\$292Purpose of Disbursement (Optional)Aggregate year-to-date\$292Full NameDate (Mo., Day, Year)Amount of each disbursement this pMailing Address06/01/2023\$2,167Silo S Broadway St06/01/2023\$2,167City, State, Zip Code06/01/2023\$2,167Tupelo, MS 38804-4832Aggregate year-to-date\$11,297SalarySalaryAggregate (Mo., Day, Year)\$11,297Full NameDate (Mo., Day, Year)Amount of each disbursement this pMailing Address06/23/2023\$11,297SalaryOfSalary\$11,297Full NameDate (Mo., Day, Year)Amount of each disbursement this pMailing Address06/23/2023\$312City, State, Zip CodeOf\$11,737Tupelo, MS 38804-9704Of\$1,173Purpose of Disbursement (Optional)Aggregate year-to-date\$1,173Office SuppliesOde\$1,173Full NameDate (Mo., Day, Year)Amount of each disbursement this pFull NameDate year-to-date\$1,173Office SuppliesDate (Mo., Day, Year)Amount of each disbursement this pFull NameDate year-to-dateAmount of each disbursement this pFull NameDate year-to-dateAggregate year-to-dateFull NameDate year-to-date <td></td>	
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Lowe'sDateAmount of each disbursement this pMailing Address(Mo., Day, Year)disbursement this p3354 N Gloster St06/23/2023\$312City, State, Zip Code06/23/2023\$312Tupelo, MS 38804-9704Aggregate year-to-date\$1,173Office SuppliesDate (Mo., Day, Year)Amount of each disbursement this pFull NameDate (Mo., Day, Year)Amount of each disbursement this pHilton HotelsMailing Address06/14/2023\$1567930 Jones Branch Dr06/14/2023\$156	1.25
Lowe's(Mo., Day, Year)disbursement this pMailing Address3354 N Gloster St06/23/2023\$3123354 N Gloster St06/23/2023\$312City, State, Zip Code11\$312Tupelo, MS 38804-970411\$312Purpose of Disbursement (Optional)Aggregate year-to-date\$1,173Office SuppliesDate (Mo., Day, Year)Amount of each disbursement this pFull NameDate (Mo., Day, Year)Amount of each disbursement this pHilton Hotels06/14/2023\$156	
Mailing Address06/23/2023\$3123354 N Gloster St06/23/2023\$312City, State, Zip Code106/23/2023\$312Tupelo, MS 38804-9704Aggregate year-to-date\$1,173Purpose of Disbursement (Optional) Office SuppliesAggregate year-to-date\$1,173Full NameDate (Mo., Day, Year)Amount of each disbursement this pHilton Hotels06/14/2023\$156	-
City, State, Zip CodeAggregateTupelo, MS 38804-9704AggregatePurpose of Disbursement (Optional)AggregateOffice SuppliesS1,173Full NameDateHilton HotelsMailing Address7930 Jones Branch Dr06/14/2023	
Tupelo, MS 38804-9704Aggregate year-to-datePurpose of Disbursement (Optional) Office SuppliesAggregate year-to-dateFull NameDate (Mo., Day, Year)Amount of each disbursement this pHilton HotelsMailing Address06/14/20237930 Jones Branch Dr06/14/2023\$156	2.05
Purpose of Disbursement (Optional)Aggregate year-to-date\$1,173Office SuppliesFull NameDate (Mo., Day, Year)Amount of each disbursement this pHilton HotelsMailing Address06/14/2023\$156	
Office Suppliesyear-to-date\$1,173Full NameDateAmount of each disbursement this pHilton Hotels(Mo., Day, Year)disbursement this pMailing Address06/14/2023\$156	
Office Supplies Date (Mo., Day, Year) Full Name Date (Mo., Day, Year) Hilton Hotels Mailing Address 7930 Jones Branch Dr 06/14/2023	2 / 1
Hilton HotelsDate (Mo., Day, Year)Amount of each disbursement this pMailing Address06/14/2023\$156). 41
Hilton Hotels(Mo., Day, Year)disbursement this pMailing Address06/14/2023\$156	
7930 Jones Branch Dr 06/14/2023 \$156	
	5.38
City, State, Zip Code	
Mclean, VA 22102-3388	
Purpose of Disbursement (Optional) Aggregate \$1,737	7 54
Travel year-to-date year-to-date	. 5 1
Full Name Date Amount of each	
Alexis Carraway (Mo., Day, Year) disbursement this p	
Mailing Address	
106 Roberts Cv 06/15/2023 \$805	5.18
City, State, Zip Code	
Starkville, MS 39759-6628	
Purpose of Disbursement (Optional) Aggregate	5.18
Salary year-to-date 3000	·• ± 0

Name of	Candidate or	Committee	Brandon	Presley
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6/	1/	2023	

 Presley

 through
 6/30/2023

ITEMIZED DISBURSEMENTS

Mailing Address06/0127 S Roach St06/0City, State, Zip Code06/0Jackson, MS 39201-2916AgPurpose of Disbursement (Optional)AgSalaryyeaFull Name(Mo.,Magnolia Ink LLC(Mo.,Mailing Address06/01223 Jackson Ave E06/0City, State, Zip Code06/0Oxford, MS 38655-400106/0Purpose of Disbursement (Optional)AgPrintingyeaFull Name(Mo.,Ron Owens(Mo.,Mailing Address(Mo.,Mailing Address(Mo.,	Day, Year) 01/2023 gregate r-to-date Date Day, Year) 01/2023 gregate r-to-date	disbursement this period \$1,994.23 \$4,118.66 Amount of each disbursement this period \$5,855.58
127 S Roach St06/0City, State, Zip CodeJackson, MS 39201-2916Purpose of Disbursement (Optional)AgSalaryyeaFull Name(Mo.,Magnolia Ink LLC(Mo.,Mailing Address06/01223 Jackson Ave E06/0City, State, Zip Code06/0Oxford, MS 38655-4001AgPurpose of Disbursement (Optional)AgPrintingYeaFull Name(Mo.,Ron Owens(Mo.,Mailing Address(Mo.,3545 Mitchell Rd06/0	gregate r-to-date Date Day, Year) 01/2023	\$4,118.66 Amount of each disbursement this period
City, State, Zip CodeJackson, MS 39201-2916Purpose of Disbursement (Optional)AgSalaryyeaFull Name(Mo.,Magnolia Ink LLC(Mo.,Mailing Address06/01223 Jackson Ave E06/0City, State, Zip Code06/0Oxford, MS 38655-4001AgPurpose of Disbursement (Optional)AgPrintingYeaFull Name(Mo.,Ron Owens(Mo.,Mailing Address06/03545 Mitchell Rd06/0	gregate r-to-date Date Day, Year) 01/2023	\$4,118.66 Amount of each disbursement this period
Jackson, MS 39201-2916Purpose of Disbursement (Optional)AgSalaryyeaFull Name(Mo.,Magnolia Ink LLC(Mo.,Mailing Address06/01223 Jackson Ave E06/0City, State, Zip Code06/0Oxford, MS 38655-4001AgPurpose of Disbursement (Optional)AgPrintingYeaFull Name(Mo.,Ron Owens(Mo.,Mailing Address06/03545 Mitchell Rd06/0	Date Day, Year) 01/2023	Amount of each disbursement this period
Purpose of Disbursement (Optional)Ag yeaSalaryYeaFull Name(Mo., Mailing Address1223 Jackson Ave E06/0City, State, Zip Code06/0Oxford, MS 38655-4001Ag yeaPurpose of Disbursement (Optional)Ag yeaPrintingYeaFull Name(Mo., Mailing AddressRon Owens(Mo., Mailing Address3545 Mitchell Rd06/1	Date Day, Year) 01/2023	Amount of each disbursement this period
SalaryyeaFull NameMagnolia Ink LLCMagnolia Ink LLC(Mo.,Mailing Address06/01223 Jackson Ave E06/0City, State, Zip Code06/0Oxford, MS 38655-4001Purpose of Disbursement (Optional)Purpose of Disbursement (Optional)AgPrintingyeaFull NameMailing AddressRon Owens(Mo.,Mailing Address06/03545 Mitchell Rd06/0	Date Day, Year) 01/2023	Amount of each disbursement this period
SalaryFull NameMagnolia Ink LLC(Mo.,Mailing Address06/01223 Jackson Ave E06/0City, State, Zip Code06/0Oxford, MS 38655-4001AgPurpose of Disbursement (Optional)AgPrintingyeaFull NameRon OwensMailing Address06/03545 Mitchell Rd06/0	Date Day, Year) 01/2023	Amount of each disbursement this period
Magnolia Ink LLC(Mo.,Mailing Address1223 Jackson Ave E06/01223 Jackson Ave E06/0City, State, Zip Code06/0Oxford, MS 38655-4001Purpose of Disbursement (Optional)Purpose of Disbursement (Optional)AgPrintingyeaFull Name(Mo.,Ron Owens(Mo.,Mailing Address3545 Mitchell Rd06/106/1	Day, Year) 01/2023	disbursement this period
Magnolia Ink LLC(Mo.,Mailing Address1223 Jackson Ave E1223 Jackson Ave E06/0Oxford, MS 38655-400106/0Purpose of Disbursement (Optional)AgPrintingyeaFull NameRon OwensMailing Address3545 Mitchell Rd3545 Mitchell Rd06/0	Day, Year) 01/2023	disbursement this period
1223 Jackson Ave E06/0City, State, Zip Code06/0Oxford, MS 38655-4001AgPurpose of Disbursement (Optional)AgPrintingyeaFull NameMailing Address3545 Mitchell Rd06/2	gregate	\$5,855.58
City, State, Zip CodeOxford, MS 38655-4001Purpose of Disbursement (Optional)PrintingFull NameRon OwensMailing Address3545 Mitchell Rd06/1	gregate	\$5,855.58
Oxford, MS 38655-4001AgPurpose of Disbursement (Optional)AgPrintingyeaFull NameRon OwensRon Owens(Mo.,Mailing Address3545 Mitchell Rd06/1		
Purpose of Disbursement (Optional)Ag yeaPrintingYeaFull NameImage: Second		
PrintingyeaFull NameRon Owens(Mo.,Mailing Address3545 Mitchell Rd06/2		1
Full Name (Mo., Ron Owens (Mo., Mailing Address 06/1	ir-to-date	\$5,855.58
Ron Owens(Mo.,Mailing Address06/23545 Mitchell Rd06/2		¢3,033.30
Ron Owens(Mo.,Mailing Address3545 Mitchell Rd06/2	Date	Amount of each
3545 Mitchell Rd 06/2	Day, Year)	disbursement this period
City, State, Zip Code	15/2023	\$3,935.75
Tupelo, MS 38801-9616		
	gregate	\$41,681.71
Salary yea	r-to-date	Ų 11,001.71
Full Name	Date	Amount of each
	Day, Year)	disbursement this period
Mailing Address		
702 SW 8th St 06/2	29/2023	\$118.89
City, State, Zip Code		
Bentonville, AR 72716-6209		
	gregate	\$520.04
Office Supplies yea	r-to-date	\$520.04
Full Name	Date	Amount of each
	Day, Year)	
Mailing Address		
PO Box 2463 06/2	21/2023	\$71.46
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Ag	gregate	\$967.96
Travel yea		۵۳./JC

	Name of	Candidate or	Committee	Brandon	Presley
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6/1	/2023	

through 6/30/2023

ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

 Full Name
 Date
 Amount of each

 Prior to January 1, 2018
 Amount of each

Avid Hotel	(Mo., Day, Year)	disbursement this period
Mailing Address		· · · ·
3 Ravinia Dr	06/28/2023	\$6.50
City, State, Zip Code	-	
Atlanta, GA 30346-2121		
Purpose of Disbursement (Optional)	Aggregate	\$545.74
Travel	year-to-date	\$545.74
Full Name	Date	Amount of each
Chevron Stations	(Mo., Day, Year)	disbursement this period
Mailing Address		
6001 Bollinger Canyon Rd	06/12/2023	\$80.27
City, State, Zip Code		
San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional)	Aggregate	\$395.26
Travel	year-to-date	Ç575.20
Full Name	Date	Amount of each
Stripe	(Mo., Day, Year)	disbursement this period
Mailing Address		
3180 18th St	06/23/2023	\$9.23
City, State, Zip Code		
San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional)	Aggregate	\$482.29
Credit Card Processing	year-to-date	\$102.2J
Full Name	Date	Amount of each
Battleaxe Digital	(Mo., Day, Year)	disbursement this period
Mailing Address		
1405 Florida Ave NW	06/12/2023	\$8,249.00
City, State, Zip Code		
Washington, DC 20009-5801		
Purpose of Disbursement (Optional)	Aggregate	\$69,662.52
Digital Consulting	year-to-date	\$05,00Z.5Z
Full Name	Date	Amount of each
Issac Lampner		disbursement this period
Mailing Address		
	06/16/2023	\$7,120.43
City, State, Zip Code	1	
Tupelo, MS 38804		
Purpose of Disbursement (Optional)	Aggregate	\$32,769.58
Reimbursement - Travel, Supplies, Postage	year-to-date	\$32,109.30

Reporting Period

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through 6/30/2023

ITEMIZED DISBURSEMENTS

Full Name Courtyard by Marriott	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
601 Baptist Dr	06/30/2023	\$132.84
City, State, Zip Code		+101101
Madison, MS 39110-2003		
Purpose of Disbursement (Optional)	Aggregate	
Travel	year-to-date	\$590.05
Full Name	Data	Amount of each
Lexis Nexis	Date (Mo., Day, Year)	
Mailing Address		
230 Park Ave	06/14/2023	\$335.00
City, State, Zip Code	-	
New York, NY 10169-0935		
Purpose of Disbursement (Optional)	Aggregate	\$1,469.68
Software Subscription	year-to-date	φ1,10 9 .00
Full Name	Date	Amount of each
Benjamin Hunt	(Mo., Day, Year)	
Mailing Address		
510 S Broadway St	06/01/2023	\$461.75
City, State, Zip Code		
Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional)	Aggregate	\$11,297.25
Salary	year-to-date	+
Full Name	Date	Amount of each
Ethan Cox	(Mo., Day, Year)	disbursement this period
Mailing Address		
3614 N Fremont St	06/15/2023	\$1,623.42
City, State, Zip Code		
Chicago, IL 60613-4372		
Purpose of Disbursement (Optional)	Aggregate	\$9,722.54
Salary	year-to-date	<i>,,,,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Full Name	Date	Amount of each
Hilton Hotels	(Mo., Day, Year)	
Mailing Address		
7930 Jones Branch Dr	06/26/2023	\$196.11
City, State, Zip Code		
Mclean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate	\$1,737.54
Travel	year-to-date	Q.1, 7, 57, 54

Reporting Period

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through 6/30/2023

ITEMIZED DISBURSEMENTS

Full Name	Date	Amount of each
Jacob Smith	(Mo., Day, Year)	disbursement this period
Mailing Address		
4100 N Gloster St	06/01/2023	\$1,435.54
City, State, Zip Code		
Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional)	Aggregate	\$10,607.47
Salary	year-to-date	+=0,001,11
Full Name	Date	Amount of each
Shawn Patterson	(Mo., Day, Year)	disbursement this period
Mailing Address		
1160 1st St NE	06/15/2023	\$2,974.48
City, State, Zip Code		
Washington, DC 20002-4799		
Purpose of Disbursement (Optional)	Aggregate	\$18,182.44
Salary	year-to-date	Q10,102.11
Full Name	Date	Amount of each
Shell Oil Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 2463	06/22/2023	\$21.83
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate	\$967.96
Travel	year-to-date	¢507.50
Full Name	Date	Amount of each
Jefferson Stevens, LLC	(Mo., Day, Year)	disbursement this period
Mailing Address		
5907 Baxter Dr	06/01/2023	\$7,500.00
City, State, Zip Code		
Jackson, MS 39211-3319		
Purpose of Disbursement (Optional)	Aggregate	\$18,945.56
Political Strategy Consultant	year-to-date	\$10,945.50
Full Name	Data	A mount of cooh
Google	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
1600 Amphitheatre Pkwy	06/01/2023	\$155.59
City, State, Zip Code	1	
	1	
Mountain View, CA 94043-1351		
Mountain View, CA 94043-1351 Purpose of Disbursement (Optional)	Aggregate year-to-date	\$456.49

Name of Candidate or Committee Brandon F	Presley
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6/1/2023	

through 6/30/2023

ITEMIZED DISBURSEMENTS

Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address	06 (00 (0000	<u> </u>
200 Spectrum Center Dr	06/23/2023	\$412.90
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$35,305.46
Credit Card Processing	your to date	
Full Name	Date	Amount of each
Avid Hotel	(Mo., Day, Year)	disbursement this period
Mailing Address		
3 Ravinia Dr	06/29/2023	\$134.81
City, State, Zip Code		
Atlanta, GA 30346-2121		
Purpose of Disbursement (Optional)	Aggregate	\$545.74
Travel	year-to-date	Ç515.71
Full Name	Date	Amount of each
Stripe	(Mo., Day, Year)	disbursement this period
Mailing Address		
3180 18th St	06/15/2023	\$7.44
City, State, Zip Code		
San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional)	Aggregate	¢400.00
Credit Card Processing	year-to-date	\$482.29
Full Name	Data	
Stripe	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	(
3180 18th St	06/12/2023	\$4.82
City, State, Zip Code		+
San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional)	Aggregate	
Credit Card Processing	year-to-date	\$482.29
Full Name		
Battleaxe Digital	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
1405 Florida Ave NW	06/20/2023	61 750 CO
City, State, Zip Code	00/20/2023	\$4,752.60
Washington, DC 20009-5801	A = = = = = = = = = = = = = = = = = = =	
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$69,662.52
Digital Consulting	, 54. 10 44.0	

Reporting Period 6,

5/1/2023	

through 6/30/2023

ITEMIZED DISBURSEMENTS

Full Name	Date	Amount of each
Shinitra Russell	(Mo., Day, Year)	disbursement this period
Mailing Address		
1185 Collier Rd NW	06/01/2023	\$2,320.98
City, State, Zip Code		
Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional)	Aggregate	\$9,395.44
Salary	year-to-date	1 - 7
Full Name	Date	Amount of each
KEP Strategies, LLC	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 450268	06/12/2023	\$7,968.00
City, State, Zip Code		
Atlanta, GA 31145-0268		
Purpose of Disbursement (Optional)	Aggregate	\$47,608.46
Fundraising Consulting	year-to-date	<i>Ş177000110</i>
Full Name	Date	Amount of each
Courtyard by Marriott	(Mo., Day, Year)	disbursement this period
Mailing Address		
601 Baptist Dr	06/30/2023	\$132.84
City, State, Zip Code		
Madison, MS 39110-2003		
Purpose of Disbursement (Optional)	Aggregate	\$590.05
Travel	year-to-date	Ç 3 9 0 1 0 3
Full Name	Date	Amount of each
Lexis Nexis	(Mo., Day, Year)	disbursement this period
Mailing Address		
230 Park Ave	06/14/2023	\$335.00
City, State, Zip Code		
New York, NY 10169-0935		
Purpose of Disbursement (Optional)	Aggregate	\$1,469.68
Software Subscription	year-to-date	Ģ1,409.00
Full Name	Date	Amount of each
Jordan Kelley	(Mo., Day, Year)	
Mailing Address		
8364 Barton Dr	06/01/2023	\$2,320.98
City, State, Zip Code	1	
Strongsville, OH 44149-1017		
Purpose of Disbursement (Optional)	Aggregate	\$7,052.94
Salary	year-to-date	۶7,052.94

Reporting Period

through 6/30/2023

ITEMIZED DISBURSEMENTS

 Disbursements from contributions accumulated
 Prior to January 1, 2018 or
 Image: On or After January 1, 2018

 Full Name
 Date
 Amount of each

 ActBlue Technical Services
 (Mo., Day, Year)
 disbursement this period

ActBlue Technical Services	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 382110	06/01/2023	\$185.27
City, State, Zip Code	-	
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate	\$14,522.78
Credit Card Processing	year-to-date	Q11,322.70
Full Name	Date	Amount of each
Aaron Facio-Cortes	(Mo., Day, Year)	disbursement this period
Mailing Address		
27006 Fordham Dr	06/15/2023	\$2,167.83
City, State, Zip Code	-	
Wesley Chapel, FL 33544-8730		
Purpose of Disbursement (Optional)	Aggregate	\$4,162.06
Salary	year-to-date	Ģ1,102.00
Full Name	Date	Amount of each
Hilton Hotels	(Mo., Day, Year)	disbursement this period
Mailing Address		
7930 Jones Branch Dr	06/26/2023	\$196.11
City, State, Zip Code	-	
Mclean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate	\$1,737.54
Travel	year-to-date	φ±,/5/.5±
Full Name	Date	Amount of each
Shalonda Spencer	(Mo., Day, Year)	disbursement this period
Mailing Address		
1509 Hawthorne Pl	06/01/2023	\$2,811.60
City, State, Zip Code		
Clinton, MS 39056-3910		
Purpose of Disbursement (Optional)	Aggregate	\$15,545.07
Salary	year-to-date	Q10,010.07
Full Name	Date	Amount of each
Greta Presley	(Mo., Day, Year)	disbursement this period
Mailing Address		
7054 Penbrook Dr	06/15/2023	\$1,994.23
City, State, Zip Code		
		1
Franklin, TN 37069-8407		
Franklin, TN 37069-8407 Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,198.34

Name of	Candidate or	Committee	Brandon	Presley
	oundrate of	0011111111100		

Reporting Period6/1/2023through

6/30/2023

ITEMIZED DISBURSEMENTS

Prior to January 1, 2018 or Disbursements from contributions accumulated ✓ On or After January 1, 2018 Full Na

Full Name	Date	Amount of each
Huffman & Rejebian	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 1180	06/26/2023	\$12,500.00
City, State, Zip Code		
Jackson, MS 39215-1180		
Purpose of Disbursement (Optional)	Aggregate	\$25,000.00
Research Consulting	year-to-date	+20,000100
Full Name	Date	Amount of each
Shell Oil Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 2463	06/26/2023	\$49.55
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate	\$967.96
Travel	year-to-date	4 507750
Full Name	Date	Amount of each
KMM Consulting	(Mo., Day, Year)	disbursement this period
Mailing Address		
8242 Birch St	06/01/2023	\$7,654.24
City, State, Zip Code		
New Orleans, LA 70118-2822		
Purpose of Disbursement (Optional)	Aggregate	\$48,274.44
Fundraising Consulting	year-to-date	<i>Q</i> 10 <i>7</i> 2 <i>7</i> 1111
Full Name	Date	Amount of each
Chevron Stations	(Mo., Day, Year)	disbursement this period
Mailing Address		
6001 Bollinger Canyon Rd	06/23/2023	\$46.53
City, State, Zip Code		
San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional)	Aggregate	\$395.26
Travel	year-to-date	Ç393.20
Full Name	Date	Amount of each
Stripe	(Mo., Day, Year)	
Mailing Address		
3180 18th St	06/05/2023	\$7.00
City, State, Zip Code		
San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional)	Aggregate	\$482.29
Credit Card Processing	year-to-date	Ş402.29

Reporting Period

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through 6/30/2023

ITEMIZED DISBURSEMENTS

Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		+105.05
200 Spectrum Center Dr	06/01/2023	\$125.07
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$35,305.46
Credit Card Processing	year to date	
Full Name	Date	Amount of each
Amazon, Inc.	(Mo., Day, Year)	disbursement this period
Mailing Address		
410 Terry Ave N	06/21/2023	\$87.04
City, State, Zip Code		
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Aggregate	\$1,182.01
Office Supplies	year-to-date	Q1,102.01
Full Name	Date	Amount of each
Switchboard Public Benefit Corp.	(Mo., Day, Year)	disbursement this period
Mailing Address		
195 Binney St	06/12/2023	\$5,516.55
City, State, Zip Code		
Cambridge, MA 02142-1095		
Purpose of Disbursement (Optional)	Aggregate	¢01 000 01
Digital Fundraising	year-to-date	\$21,928.91
Full Name	Data	A manual of each
Court Square Inn	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	(- , - , , - , ,	
132 E College Ave	06/14/2023	\$321.00
City, State, Zip Code		+011100
Holly Springs, MS 38635-3022		
Purpose of Disbursement (Optional)	Aggregate	
Event Space Rental	year-to-date	\$321.00
Full Name		
Doubletree	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
300 Canal St	06/12/2023	¢1E1 00
City, State, Zip Code	- 00/12/2023	\$151.90
New Orleans, LA 70130-1104	Aggregate	
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$357.78
Travel	,	

Reporting Period

6/1/2023

6/30/2023

through ITEMIZED DISBURSEMENTS Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018 Full Name Date Amount of each United States Postal Service (Mo., Day, Year) disbursement this period Mailing Address 475 Lenfant Plz SW 06/22/2023 \$28.75 City, State, Zip Code Washington, DC 20260-0004 Purpose of Disbursement (Optional) Aggregate \$293.40 year-to-date Shipping & Postage Full Name Date Amount of each Numero (Mo., Day, Year) disbursement this period Mailing Address 200 Spectrum Center Dr 06/29/2023 \$726.35 City, State, Zip Code Irvine, CA 92618-5004 Purpose of Disbursement (Optional) Aggregate \$35,305.46 year-to-date Credit Card Processing Full Name Date Amount of each Lowe's (Mo., Day, Year) disbursement this period Mailing Address 3354 N Gloster St 06/30/2023 \$67.50 City, State, Zip Code Tupelo, MS 38804-9704 Purpose of Disbursement (Optional) Aggregate \$1,173.41 year-to-date Office Supplies Full Name Date Amount of each Katharine Kurz (Mo., Day, Year) disbursement this period Mailing Address 634 W Main St 06/01/2023 \$1,994.23 City, State, Zip Code Tupelo, MS 38804-3745 Purpose of Disbursement (Optional) Aggregate \$4,198.34 year-to-date Salary Full Name Amount of each Date Benjamin Hunt (Mo., Day, Year) disbursement this period Mailing Address

510 S Broadway St	06/15/2023	\$2,167.10
City, State, Zip Code		
Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional)	Aggregate	\$11,297.25
Salary	year-to-date	, 11 / 10 / . 10

Reporting Period 6

5/1/2023	t

through 6/30/2023

ITEMIZED DISBURSEMENTS

 Disbursements from contributions accumulated
 Prior to January 1, 2018 or
 On or After January 1, 2018

 Full Name
 Date
 Amount of each

Full Name Hilton Hotels	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
7930 Jones Branch Dr	06/26/2023	\$216.88
City, State, Zip Code	00/20/2025	\$210.00
Mclean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate	
Travel	year-to-date	\$1,737.54
Full Name		
Michael Waller	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	(mol, buy, rour)	
103 Redbud Dr	06/01/2023	\$1,994.23
City, State, Zip Code	00,01,2023	Q1,7771.23
Hendersonville, TN 37075-3982		
Purpose of Disbursement (Optional)	Aggregate	±4.055.05
Salary	year-to-date	\$4,075.26
Full Name	Data	Amount of cook
Mark Rennie	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
3203 Nuttree Woods Dr	06/15/2023	\$988.86
City, State, Zip Code		
Midlothian, VA 23112-4503		
Purpose of Disbursement (Optional)	Aggregate	\$988.86
Salary	year-to-date	\$900.00
Full Name	Date	Amount of each
Shell Oil Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 2463	06/28/2023	\$41.79
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate	\$967.96
Travel	year-to-date	\$207.20
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	
Mailing Address		
200 Spectrum Center Dr	06/27/2023	\$339.03
City, State, Zip Code	1	
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$35,305.46
	year-to-date	

Reporting Period 6

hrough 6/30/2023

ITEMIZED DISBURSEMENTS

 Disbursements from contributions accumulated
 Prior to January 1, 2018 or
 Image: On or After January 1, 2018

 Full Name
 Date
 Amount of each

 Cracker Barrel
 (Mo., Day, Year)
 Amount of each

 Mailing Address
 On or After January 1, 2018
 On or After January 1, 2018

Mailing Address		
15255 Crossroads Pkwy	06/07/2023	\$213.32
City, State, Zip Code		
Gulfport, MS 39503-3570		
Purpose of Disbursement (Optional)	Aggregate	\$213.32
Meals	year-to-date	Υ <u>μ</u> τ2.21
Full Name	Date	Amount of each
Avid Hotel	(Mo., Day, Year)	disbursement this period
Mailing Address		
3 Ravinia Dr	06/29/2023	\$134.81
City, State, Zip Code		
Atlanta, GA 30346-2121		
Purpose of Disbursement (Optional)	Aggregate	\$545.74
travel	year-to-date	<i>QJJJJJJJJJJJJJ</i>
Full Name	Date	Amount of each
Chevron Stations	(Mo., Day, Year)	disbursement this period
Mailing Address		
6001 Bollinger Canyon Rd	06/29/2023	\$51.38
City, State, Zip Code		
San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional)	Aggregate	\$395.26
Travel	year-to-date	Ç 39312 0
Full Name	Date	Amount of each
Comfort Inn	(Mo., Day, Year)	disbursement this period
Mailing Address		
10750 Columbia Pike	06/15/2023	\$105.33
City, State, Zip Code		
Silver Spring, MD 20901-4402		
Purpose of Disbursement (Optional)	Aggregate	\$473.27
Travel	year-to-date	+ - · • • - ·
Full Name	Date	Amount of each
United States Postal Service	(Mo., Day, Year)	disbursement this period
Mailing Address		
475 Lenfant Plz SW	06/21/2023	\$28.75
City, State, Zip Code		
Washington, DC 20260-0004		
Purpose of Disbursement (Optional)	Aggregate	\$293.40
Shipping & Postage	year-to-date	Q200.10

Name of	Candidate or	Committee	Brandon	Presley
	oundrate of	001111111100		

Purpose of Disbursement (Optional)

Salary

1/2023	through

6/30/2023

6/ ITEMIZED DISBURSEMENTS Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018 Full Name Date Amount of each Doubletree (Mo., Day, Year) disbursement this period Mailing Address 300 Canal St 06/12/2023 \$205.88 City, State, Zip Code New Orleans, LA 70130-1104 Purpose of Disbursement (Optional) Aggregate \$357.78 year-to-date Travel Full Name Date Amount of each Issac Lampner (Mo., Day, Year) disbursement this period Mailing Address 06/01/2023 \$2,798.60 City, State, Zip Code Tupelo, MS 38804 Purpose of Disbursement (Optional) Aggregate \$32,769.58 year-to-date Salary Full Name Amount of each Date IP Casino Resort & Spa (Mo., Day, Year) disbursement this period Mailing Address 850 Bayview Ave 06/12/2023 \$191.79 City, State, Zip Code Biloxi, MS 39530-1701 Purpose of Disbursement (Optional) Aggregate \$945.35 year-to-date Travel Full Name Date Amount of each Jordan Kelley (Mo., Day, Year) disbursement this period Mailing Address 8364 Barton Dr 06/15/2023 \$2,410.98 City, State, Zip Code Strongsville, OH 44149-1017 Purpose of Disbursement (Optional) Aggregate \$7,052.94 year-to-date Salary Full Name Amount of each Date Felicia Yearwood (Mo., Day, Year) disbursement this period Mailing Address 5206 Lakeview Dr 06/01/2023 \$1,994.23 City, State, Zip Code Moss Point, MS 39563-2128

\$4,118.66

Aggregate

year-to-date

Name of	Candidate or	Committee	Brandon	Presley
	oundrate of	0011111111100		

6/30/2023

ITEMIZED DISBURSEMENTS

Prior to January 1, 2018 or Disbursements from contributions accumulated ✓ On or After January 1, 2018 Full Na

Angelo Ruiz(Mo., Day, YeaMailing Address127 S Roach St127 S Roach St06/15/202City, State, Zip Code06/15/202Jackson, MS 39201-29164000000000000000000000000000000000000	\$2,124.43
127 S Roach St06/15/202City, State, Zip CodeJackson, MS 39201-2916Purpose of Disbursement (Optional)Aggregate	\$4,118.66
City, State, Zip Code Jackson, MS 39201-2916 Purpose of Disbursement (Optional) Aggregate	\$4,118.66
Jackson, MS 39201-2916 Purpose of Disbursement (Optional) Aggregate voor to date	
Purpose of Disbursement (Optional) Aggregate	
war to date	
Salary year-to-date	
Full Name Date	Amount of each
Service Printing Co (Mo., Day, Yea	
Mailing Address	
1110 Emory Folmar Blvd 06/22/202	\$13,905.00
City, State, Zip Code	
Montgomery, AL 36110-3228	
Purpose of Disbursement (Optional) Aggregate	\$13,905.00
Printing of Campaign Materials year-to-date	÷ = = ; = = = = = = = = = = = = = = = =
Full Name Date	Amount of each
Payroll Data Processing (Mo., Day, Yea	
Mailing Address	
3501 E Frontage Rd 06/15/202	\$20,281.35
City, State, Zip Code	
Tampa, FL 33607-1723	
Purpose of Disbursement (Optional) Aggregate	\$96,972.07
Payroll Taxes year-to-date	, , , , , , , , , , , , , , , , , , ,
Full Name Date	Amount of each
Shell Oil Co (Mo., Day, Yea	
Mailing Address	
PO Box 2463 06/28/202	\$37.14
City, State, Zip Code	
Houston, TX 77252-2463	
Purpose of Disbursement (Optional) Aggregate	\$967.96
Travel year-to-date	+
Full Name Date	Amount of each
The Markham Group LLC (Mo., Day, Yea	
Mailing Address	
8927 Lorraine Rd 06/06/202	\$519.75
City, State, Zip Code	
Gulfport, MS 39503-5053	
Purpose of Disbursement (Optional) Aggregate	\$519.75
Event Sponsorship year-to-date	ς1.ετος

Reporting Period

6/1/2023 th

through 6/30/2023

ITEMIZED DISBURSEMENTS

 Disbursements from contributions accumulated
 Prior to January 1, 2018 or
 Image: On or After January 1, 2018

 Full Name
 Date
 Amount of each

 Martin Daniel Crump
 (Mo., Day, Year)
 disbursement this period

 Mailing Address
 On or After January 1, 2018
 On or After January 1, 2018

_		
Mailing Address		
2601 14th St	06/07/2023	\$2,500.00
City, State, Zip Code		
Gulfport, MS 39501-1926		
Purpose of Disbursement (Optional)	Aggregate	\$5,000.00
Contribution Refund	year-to-date	<i>\$3,000.00</i>
Full Name	Date	Amount of each
Adam Beyer	(Mo., Day, Year)	disbursement this period
Mailing Address		
4288 N Gloster St	06/05/2023	\$622.62
City, State, Zip Code		
Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional)	Aggregate	\$18,805.82
Reimbursement - Travel, Subscriptions, Printing	year-to-date	Ş10,005.0Z
Full Name	Date	Amount of each
Debra B. Young	(Mo., Day, Year)	disbursement this period
Mailing Address		
27 County Road 3024	06/14/2023	\$250.00
City, State, Zip Code		
Oxford, MS 38655-9786		
Purpose of Disbursement (Optional)	Aggregate	\$250.00
Contribution Refund	year-to-date	\$250.00
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	06/30/2023	\$2,045.67
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$35 305 46
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$35,305.46
	year-to-date	
Credit Card Processing		\$35,305.46 Amount of each disbursement this period
Credit Card Processing Full Name	year-to-date Date	Amount of each
Credit Card Processing Full Name Numero	year-to-date Date	Amount of each
Credit Card Processing Full Name Numero Mailing Address	year-to-date Date (Mo., Day, Year)	Amount of each disbursement this period
Credit Card Processing Full Name Numero Mailing Address 200 Spectrum Center Dr	year-to-date Date (Mo., Day, Year)	Amount of each disbursement this period
Credit Card Processing Full Name Numero Mailing Address 200 Spectrum Center Dr City, State, Zip Code	year-to-date Date (Mo., Day, Year)	Amount of each disbursement this period

Reporting Period 6/1/2023

/1/2023 th

through 6/30/2023

ITEMIZED DISBURSEMENTS

 Disbursements from contributions accumulated
 Prior to January 1, 2018 or
 Image: On or After January 1, 2018

 Full Name
 Date
 Amount of each

 Josh Daniel Law
 PLUC
 disbursement this period

Josh Daniel Law, PLLC	(Mo., Day, Year)	disbursement this period
Mailing Address		
398 E Main St	06/12/2023	\$4,125.00
City, State, Zip Code		
Tupelo, MS 38804-4037		
Purpose of Disbursement (Optional)	Aggregate	\$7,458.00
Legal Services	year-to-date	<i>,,,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Full Name	Date	Amount of each
Best Buy	(Mo., Day, Year)	disbursement this period
Mailing Address		
7601 Penn Ave S	06/05/2023	\$169.34
City, State, Zip Code		
Minneapolis, MN 55423-8500		
Purpose of Disbursement (Optional)	Aggregate	\$371.57
Office Supplies	year-to-date	<i>v</i> 3, <i>1</i> ,3,
Full Name	Date	Amount of each
Hampton Inn	(Mo., Day, Year)	disbursement this period
Mailing Address		
	06/22/2023	\$178.08
City, State, Zip Code		
,		
Purpose of Disbursement (Optional)	Aggregate	\$725.64
Travel	year-to-date	+
Full Name	Date	Amount of each
William Adams	(Mo., Day, Year)	disbursement this period
Mailing Address		
12 Park Pl	06/15/2023	\$970.98
City, State, Zip Code		
Hattiesburg, MS 39402-1431		
Purpose of Disbursement (Optional)	Aggregate	\$970.98
Salary	year-to-date	<i>4270120</i>
Full Name	Date	Amount of each
Lowe's	(Mo., Day, Year)	disbursement this period
Mailing Address		
3354 N Gloster St	06/16/2023	\$52.51
City, State, Zip Code		
Tupelo, MS 38804-9704		
Purpose of Disbursement (Optional)	Aggregate	\$1,173.41
Office Supplies	year-to-date	ΥΥ,Υ,Υ,Υ,Υ,Υ,Υ,Υ,Υ,Υ,Υ,Υ,Υ,Υ,Υ,Υ,Υ,Υ,Υ

Name of	Candidate or	Committee	Brandon	Presle
	oundiduce of	0011111111100		

6/1,	/2023	

______through______ ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or I On or After January 1, 2018 Data Amount of each Full Name

Mailing Address 06/30/2023 \$42.74 3354 N Closter St 06/30/2023 \$42.74 City, State, Zp Code 200/30/2023 \$42.74 Tupelo, MS 38804-9704 Aggregate \$1,173.41 Purpose of Disbursement (Optional) Aggregate \$1,173.41 Gride Supplies Date Amount of each Full Name Date Amount of each Jake Laves 06/01/2023 \$2,974.48 Gity, State, Zp Code Tupelo, MS 38804-603 Purpose of Disbursement (Optional) Purpose of Disbursement (Optional) Aggregate \$18,610.56 Salary Amount of each Mailing Address \$18,610.56 Full Name Date Amount of each IP Casino Resort & Spa 06/12/2023 \$191.79 City, State, Zp Code 06/12/2023 \$191.79 Ston, MS 39530-1701 Durpose of Disbursement (Optional) Aggregate Purpose of Disbursement (Optional) Aggregate \$945.35 Travel Aggregate \$945.35 Full Name Date (Mo., Day, Year) Jaquann King Mailing Address 06/15/2023 \$988.86 Po Dox 758 06/15/2023 \$988.86 Gity, State, Zp Code Payette, MS 39069-0758 \$9	Full Name	Date	Amount of each
3354 N Gloater St.06/30/2023\$42.74City, State, Zp CodeAggregate year-o-date\$1,173.41Purpose of Disbursement (Optional)Aggregate year-o-date\$1,173.41Full NameDate (Mo., Day, Year)Amount of each disbursement his periodMailing Address06/01/2023\$2,974.48Gity, State, Zp Code06/01/2023\$2,974.48Tupelo, MS 38804-6063Aggregate year-o-date\$18,610.56Full NameDate (Mo., Day, Year)Amount of each disbursement (Optional)SalaryAggregate year-o-date\$18,610.56Full NameDate (Mo., Day, Year)Amount of each disbursement this periodFull NameDate (Mo., Day, Year)Amount of each disbursement this periodFull NameDate (Mo., Day, Year)Amount of each disbursement this periodB50 Bayview Ave06/12/2023\$191.79City, State, Zp CodeDate (Mo., Day, Year)Amount of each disbursement this periodPurpose of Disbursement (Optional)Aggregate year-o-date\$945.35TravelDate (Mo., Day, Year)Amount of each disbursement this periodFull NameDate year-o-date\$945.35Jaquann KingMaing Address06/15/2023\$988.86Po Box 758Ofode year-o-date\$988.86Full NameDate year-o-date\$988.86Purpose of Disbursement (Optional)Aggregate year-o-date\$988.86Full NameDate year-o-date\$988.86Full N	Lowe's	(Mo., Day, Year)	disbursement this period
City, State, Zip Code Aggregate \$1,173.41 Tupe10., MS 38804-9704 Aggregate \$1,173.41 Purpose of Disbursement (Optional) Date Amount of each Jake Laves Mo., Day, Yeari Amount of each 699 Nation Hills Dr 06/01/2023 \$2,974.48 City, State, Zip Code 06/01/2023 \$2,974.48 Purpose of Disbursement (Optional) Aggregate \$18,610.56 Salary Salary Amount of each Full Name Date (Mo., Day, Year) Top Salary Salary, Yeari Amount of each Full Name Date (Mo., Day, Year) Gity, State, Zip Code 06/12/2023 \$191.79 City, State, Zip Code Date (Mo., Day, Year) Biloxi, MS 39530-1701 Purpose of Disbursement (Optional) State Travel Date (Mo., Day, Year) disbursement this period Mailing Address 06/15/2023 \$945.35 Spate-35 Travel Date (Mo., Day, Year) disbursement this period Mailing Address 06/15/2023 \$988.86 Spas.86 Gity,			
Tupelo, MS 38804-9704 Aggregate year-to-date \$1,173.41 Purpose of Disbursement (Optional) Office Supplies \$1,173.41 Full Name Date (Mo., Day, Year) Amount of each (Mo., Day, Year) Mailing Address 06/01/2023 \$2,974.48 Gity, State, Zip Code 06/01/2023 \$2,974.48 Tupelo, MS 38804-6063 06/01/2023 \$2,974.48 Purpose of Disbursement (Optional) Aggregate year-to-date \$18,610.56 Salary Date (Mo., Day, Year) disbursement this period Mailing Address 06/12/2023 \$18,610.56 Salary Offices 06/12/2023 \$191.79 Gity, State, Zip Code 06/12/2023 \$191.79 Full Name Date (Mo., Day, Year) disbursement this period Maiing Address 06/12/2023 \$191.79 Gity, State, Zip Code 06/12/2023 \$191.79 Full Name Date (Mo., Day, Year) disbursement this period Jaquann King Manount of each \$945.35 Full Name Date (Mo., Day, Year) disbursement this period Jaquann King Maing Address 06/15/2023 \$988.86 Gity, State, Zip Code Purpose of Disbursement (Optional) Spagegate year-to-date \$988.86 Gity, St		06/30/2023	\$42.74
Purpose of Disbursement (Optional) Office Supplies Aggregate year-to-date \$1,173.41 Full Name Date (Mo., Day, Year) Amount of each disbursement this period Mailing Address 06/01/2023 \$2,974.48 Gfly, State, Zip Code 06/01/2023 \$2,974.48 Tupelo, MS 38804-6063 Aggregate year-to-date \$18,610.56 Purpose of Disbursement (Optional) Aggregate year-to-date \$18,610.56 Salary Date (Mo., Day, Year) Amount of each disbursement this period Mailing Address 06/12/2023 \$191.79 Gity, State, Zip Code 06/12/2023 \$191.79 Gity, State, Zip Code 06/12/2023 \$191.79 Biloxi, MS 39530-1701 Date (Mo., Day, Year) Amount of each disbursement this period Full Name Date (Mo., Day, Year) Amount of each disbursement this period Mailing Address 06/15/2023 \$988.86 Gity, State, Zip Code Purpose of Disbursement (Dptional) \$988.86 Full Name Date (Mo., Day, Year) Amount of each disbursement this period Mailing Address 06/15/2023 \$988.86	City, State, Zip Code		
Office Suppliesyear-to-date\$1,17.3,41Full NameDateAmount of each disbursement this periodJake Laves(Mo., Day, Year)disbursement this period699 Nation Hills Dr06/01/2023\$2,974.48City, State, Zp Code06/01/2023\$2,974.48Tupelo, MS 38804-6063Aggregate year-to-date\$18,610.56SalaryAggregate year-to-date\$18,610.56Full NameDateAmount of each disbursement (Optional)IP Casino Resort & Spa(Mo., Day, Year)Aisbursement fils periodMaiing Address06/12/2023\$191.79S50 Bayview Ave06/12/2023\$191.79City, State, Zp CodePurpose of Disbursement (Optional)Aggregate year-to-datePurpose of Disbursement (Optional)Aggregate year-to-date\$945.35TravelAmount of each disbursement (No, Day, Year)Amount of each disbursement this periodFull NameDate year-to-dateAmount of each disbursement this periodJaquann King(Mo., Day, Year)Aggregate year-to-date\$988.86City, State, Zp CodeFayette, MS 39069-0758Purpose of Disbursement (Optional)Aggregate year-to-date\$988.86SalaryAggregate year-to-date\$988.86Amount of each disbursement this periodMaling Address SalaryOf /01/2023\$17,053.74Purpose of Disbursement (Optional)Aggregate year-to-date\$96.972.07			
Office Suppliesyear-ordateFull NameDateAmount of eachJake Laves(Mo., Day, Year)disbursement this periodMalling Address06/01/2023\$2,974.48Gly, State, Zip Code06/01/2023\$2,974.48Tupelo, MS 38804-6063Aggregate\$18,610.56Purpose of Disbursement (Optional)Aggregate\$18,610.56SalaryDateAmount of eachFull NameDateAmount of eachTP Casino Resort & Spa(Mo., Day, Year)disbursement this periodMalling Address06/12/2023\$191.79Gity, State, Zip Code06/12/2023\$191.79Purpose of Disbursement (Optional)Aggregate year-to-date\$945.35TravelDateSolagy Year)Amount of eachPurpose of Disbursement (Optional)Aggregate year-to-date\$945.35TravelDate(Mo., Day, Year)disbursement this periodMalling Address06/15/2023\$988.86\$945.35Full NameDate year-to-dateAmount of eachJaquann KingMaling Address06/15/2023\$988.86Purpose of Disbursement (Optional)Aggregate year-to-date\$988.86SalarySalarySalaryAmount of eachFull NameDate (Mo., Day, Year)Amount of eachPurpose of Disbursement (Optional)Aggregate year-to-date\$988.86SalarySalarySalarySalaryFull NameDate (Mo., Day, Year)Amount of eachP			\$1,173.41
DateDateAmount of eachJake Laves(Mo., Day, Year)disbursement this periodMalling Address06/01/2023\$2,974.48Giy, State, Zip Code06/01/2023\$2,974.48Tupelo., MS 38804-6063Aggregate year-to-date\$18,610.56SalaryJate LavesAmount of each disbursement (Optional)Aggregate year-to-dateFull NameDate (Mo., Day, Year)Amount of each disbursement this periodHuiling Address06/12/2023\$191.79S50 Bayview Ave06/12/2023\$191.79City, State, Zip Code06/12/2023\$191.79Purpose of Disbursement (Optional)Aggregate year-to-date\$945.35TravelMalling Address06/15/2023\$988.86Full NameDate year-to-dateAmount of each disbursement this periodJaquann King(Mo., Day, Year)Amount of each disbursement this periodMalling Address06/15/2023\$988.86PD Box 75806/15/2023\$988.86Gity, State, Zip CodeDate (Mo., Day, Year)Amount of each disbursement this periodFull NameDate year-to-dateAmount of each disbursement this periodFull NameDate (Mo., Day, Year)Amount of each disbursement this periodMalling Address06/15/2023\$988.86SalarySpate year-to-date\$988.86Full NameDate (Mo., Day, Year)Amount of each disbursement this periodMalling Address06/01/2023\$17,053.74	Office Supplies	year-to-date	
Jake Laves(Mo., Day, Year)disbursement this periodMaling Address06/01/2023\$2,974.48City, State, Zip Code06/01/2023\$2,974.48Tupelo, MS 38804-6063Aggregate year-to-date\$18,610.56Salaryyear-to-date\$18,610.56Full NameDate (Mo., Day, Year)Amount of each disbursement this periodIP Casino Resort & Spa06/12/2023\$191.79City, State, Zip Code06/12/2023\$191.79Biloxi, MS 39530-170106/12/2023\$191.79Purpose of Disbursement (Optional)Aggregate year-to-date\$945.35TravelDate (Mo., Day, Year)Amount of each disbursement this periodMaling Address06/15/2023\$945.35Purpose of Disbursement (Optional)Aggregate year-to-date\$945.35TravelDate (Mo., Day, Year)Amount of each disbursement this periodMaling Address06/15/2023\$988.86PO Box 75806/15/2023\$988.86City, State, Zip Code Fayette, MS 39069-0758Date (Mo., Day, Year)Amount of each disbursement this periodPurpose of Disbursement (Optional)Sagregate year-to-date\$988.86SalarySate (Mo., Day, Year)Amount of each disbursement this periodMaling Address06/01/2023\$988.86Sola E processing06/01/2023\$17,053.74Maling Address06/01/2023\$17,053.74Syste, Zip Code Tampa, FL 33607-1723Sip 6,972.07Purpose of Disbursement (Opti	Full Name	Date	Amount of each
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Purpose of Disbursement (Optional)Aggregate year-to-date\$988.86SalarySalaryDate (Mo., Day, Year)Amount of each disbursement this periodFull NameDate (Mo., Day, Year)Amount of each disbursement this periodPayroll Data Processing06/01/2023\$17,053.74Mailing Address06/01/2023\$17,053.743501 E Frontage Rd City, State, Zip Code06/01/2023\$17,053.74Tampa, FL 33607-1723Aggregate \$96,972.07\$96,972.07	City, State, Zip Code		
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City, State, Zip Code Tampa, FL 33607-1723 Purpose of Disbursement (Optional) Aggregate \$96,972.07		06/01/2023	\$17.053.74
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Purpose of Disbursement (Optional) Aggregate \$96,972.07			
\$96,9/2.0/		Aggregate	
	Payroll Taxes	year-to-date	\$96,972.07

Reporting Period

6/1/2023

through 6/30/2023

ITEMIZED DISBURSEMENTS

	Date	Amount of each
Acme Investment Company	(Mo., Day, Year)	disbursement this period
Mailing Address		
2032 Tidewater Ln	06/13/2023	\$500.00
City, State, Zip Code		
Madison, MS 39110-8981		
Purpose of Disbursement (Optional)	Aggregate	\$500.00
Rent	year-to-date	\$ 500100
Full Name	Date	Amount of each
Shinitra Russell	(Mo., Day, Year)	disbursement this period
Mailing Address		
1185 Collier Rd NW	06/15/2023	\$65.00
City, State, Zip Code		
Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional)	Aggregate	\$9,395.44
Salary	year-to-date	\$9,595.44
Full Name	Date	Amount of each
Martin Daniel Crump	(Mo., Day, Year)	disbursement this period
Mailing Address		
Manny Autress		
2601 14th St	06/21/2023	\$2,500.00
-	06/21/2023	\$2,500.00
2601 14th St	06/21/2023	\$2,500.00
2601 14th St City, State, Zip Code	Aggregate	
2601 14th St City, State, Zip Code Gulfport, MS 39501-1926		\$2,500.00 \$5,000.00
2601 14th St City, State, Zip Code Gulfport, MS 39501-1926 Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,000.00
2601 14th St City, State, Zip Code Gulfport, MS 39501-1926 Purpose of Disbursement (Optional) Contribution Refund	Aggregate	
2601 14th St City, State, Zip Code Gulfport, MS 39501-1926 Purpose of Disbursement (Optional) Contribution Refund Full Name	Aggregate year-to-date Date	\$5 , 000 . 00 Amount of each
2601 14th St City, State, Zip Code Gulfport, MS 39501-1926 Purpose of Disbursement (Optional) Contribution Refund Full Name Avid Hotel	Aggregate year-to-date Date	\$5 , 000 . 00 Amount of each
2601 14th St City, State, Zip Code Gulfport, MS 39501-1926 Purpose of Disbursement (Optional) Contribution Refund Full Name Avid Hotel Mailing Address	Aggregate year-to-date Date (Mo., Day, Year)	\$5,000.00 Amount of each disbursement this period
2601 14th St City, State, Zip Code Gulfport, MS 39501-1926 Purpose of Disbursement (Optional) Contribution Refund Full Name Avid Hotel Mailing Address 3 Ravinia Dr	Aggregate year-to-date Date (Mo., Day, Year)	\$5,000.00 Amount of each disbursement this period
2601 14th St City, State, Zip Code Gulfport, MS 39501-1926 Purpose of Disbursement (Optional) Contribution Refund Full Name Avid Hotel Mailing Address 3 Ravinia Dr City, State, Zip Code	Aggregate year-to-date Date (Mo., Day, Year)	\$5,000.00 Amount of each disbursement this period