

**RECEIVED**SECRETARY OF STATE  
By Secretary of State Elections Division at 3:33 pm, Jul 10, 2023

**Candidate**  
**REPORT OF RECEIPTS AND DISBURSEMENTS**  
**2023 Election**

DATE STAMP

Name of Candidate Brandon PresleyAddress PO Box 208City/State/Zip Nettleton, MS 38858Telephone (Work) \_\_\_\_\_ (Home) (202) 552-0221 (Fax) \_\_\_\_\_Contact Name Rachel HeadleyEmail Address info@brandonpresley.com

Office Sought \_\_\_\_\_

Political Party Democratic Party☐ Check here if above is different from previous report**TYPE OF REPORT**☐ May Periodic Report ..... Mandatory☐ June Periodic Report ..... Mandatory☒ July Periodic Report (June 1, 2023 through June 30, 2023) ..... Mandatory☐ Primary Pre-Election Report ( ..... through ..... ) ..... Mandatory☐ Primary Pre-Runoff Report ( ..... through ..... ) ..... Runoff Candidates Only☐ October Periodic Report ..... Mandatory☐ Pre-Election Report ( ..... through ..... ) ..... Mandatory☐ Pre-Runoff Report ( ..... through ..... ) ..... Runoff Candidates Only☐ January Periodic Report ..... Mandatory☐ Termination Report (Candidate will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation and zero cash on hand balance)**Required to terminate reporting obligations****IMPORTANT**

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

(2) Periodic Reports are mandatory, even if no expenditures were made during the period. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and/or expenditures during this period. Pre-Election Reports are mandatory if the candidate is opposed.

(3) Until a candidate files a Termination Report, annual reports must be filed in accordance with Miss. Code Ann. § 23-15-807(b) (ii) and (iii)

(4) Beginning on Jan. 1, 2018, candidates and officeholders may not "personally use" campaign contributions. Section 23-15-821, Miss. Code Ann., sets forth these "personal use" expenditures which are specifically prohibited from campaign contributions and those disbursements which are not defined as "personal use" and therefore permissible from campaign contributions. Campaign contributions accepted and held prior to Jan. 1, 2018 ARE NOT subject to the "personal use" restrictions of section 23-15-821, Miss. Code Ann. Beginning on Jan. 1, 2018, campaign contributions accepted and accumulated therefrom ARE subject to the "personal use" restrictions of Section 23-15-821, 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 (+)	Non-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 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  
**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 [CampaignFinance@sos.ms.gov](mailto:CampaignFinance@sos.ms.gov)

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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carolyn Goren Mailing Address PO Box 7189 City, State, Zip Code Missoula, MT 59807-7189 Name of Employer (Required) Not Employed	06/08/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$310.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal	06/28/2023	\$25.00
Occupation (Required) Usher	Aggregate year-to-date	\$422.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Geoghegan Mailing Address 227 Greenfield Pl City, State, Zip Code Brandon, MS 39047-9007 Name of Employer (Required) Not Employed	06/29/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Alexander Mailing Address 18 Highland Meadows Dr City, State, Zip Code Jackson, MS 39211-5949 Name of Employer (Required) Alexander CPA, LLC	06/13/2023	\$50.00
Occupation (Required) Accountant	Aggregate year-to-date	\$550.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Yvonne Harrison	06/14/2023	\$100.00
Mailing Address 149 Acacia Ave		
City, State, Zip Code Biloxi, MS 39530-3308		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$377.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thorne Butler	06/28/2023	\$10.00
Mailing Address 3942 Oakridge Dr		
City, State, Zip Code Jackson, MS 39216-3411		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$370.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mack Lowery	06/11/2023	\$25.00
Mailing Address 5055 Myers Rd		
City, State, Zip Code Terry, MS 39170-9429		
Name of Employer (Required) Aamco Transmission		
Occupation (Required) Business Owner	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret E. McMullan	06/27/2023	\$10,000.00
Mailing Address 541 E Scenic Dr		
City, State, Zip Code Pass Christian, MS 39571-4510		
Name of Employer (Required) Self Employed		
Occupation (Required) Author	Aggregate year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Misty Shaw-Feder	06/28/2023	\$1,000.00
Mailing Address 1202 Iola Rd		
City, State, Zip Code Ocean Springs, MS 39564-2819		
Name of Employer (Required) R&B Feder Foundation		
Occupation (Required) Marketing	Aggregate year-to-date	\$1,000.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sandra West	06/19/2023	\$100.00
Mailing Address 5535 Marblehead Dr		
City, State, Zip Code Jackson, MS 39211-4249		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marian Kurz	06/29/2023	\$25.00
Mailing Address 1300 Central St		
City, State, Zip Code Evanston, IL 60201-1676		
Name of Employer (Required) Self Employed		
Occupation (Required) Public Relations	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joe York	06/30/2023	\$500.00
Mailing Address 121 Panola St		
City, State, Zip Code Water Valley, MS 38965-2511		
Name of Employer (Required) Self Employed		
Occupation (Required) Video Producer	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Thomas	06/30/2023	\$10.00
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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Douglas Masterson	06/26/2023	\$50.00
Mailing Address 43 Palm Tree Loop		
City, State, Zip Code Petal, MS 39465-9251		
Name of Employer (Required) University of Southern Mississippi		
Occupation (Required) Chemist	Aggregate year-to-date	\$310.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny	06/07/2023	\$16.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gordon McKernan Injury Attorneys, LLC	06/29/2023	\$25,000.00
Mailing Address 4545 HILTON Ave		
City, State, Zip Code Baton Rouge, LA 70808		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$25,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anthony Byron Norris	06/23/2023	\$250.00
Mailing Address 750 S Line St		
City, State, Zip Code Grenada, MS 38901-3702		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$250.00



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Oneal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic	06/24/2023	\$100.00
Occupation (Required) Physician	Aggregate year-to-date	\$1,450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Rabalais Mailing Address 132 Sara Fox Dr City, State, Zip Code Brandon, MS 39047-5526 Name of Employer (Required) Not Employed	06/16/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$201.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kristopher Pittard Mailing Address 1160 1st St NE City, State, Zip Code Washington, DC 20002-4696 Name of Employer (Required) US House of Representatives	06/17/2023	\$250.00
Occupation (Required) Professional Staff Member	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Drake Mailing Address 1220 Sunset Dr City, State, Zip Code Ocean Springs, MS 39564-2943 Name of Employer (Required) Not Employed	06/27/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,300.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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.		
Occupation (Required) Restauranteur	Aggregate year-to-date	\$600.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alvin Williams	06/01/2023	\$150.00
Mailing Address 508 Green Hills Dr		
City, State, Zip Code Hattiesburg, MS 39402-9208		
Name of Employer (Required) University of South Alabama		
Occupation (Required) College Professor	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dennis Schwarzauer	06/01/2023	\$500.00
Mailing Address 606 Mallison Pl		
City, State, Zip Code Ridgeland, MS 39157-2854		
Name of Employer (Required) CDFL Architects + Engineers		
Occupation (Required) Architect	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael K Fitzwilliam	06/24/2023	\$1,000.00
Mailing Address 165 Audubon Pl		
City, State, Zip Code Picayune, MS 39466-8799		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sandra Ray	06/05/2023	\$10.00
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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ransom P. Jones III Mailing Address 2200 Gatlin Creek Rd City, State, Zip Code Leakesville, MS 39451-3063 Name of Employer (Required) Self Employed	06/06/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James K. Child Jr Mailing Address 1935 E Bourne Pl City, State, Zip Code Jackson, MS 39211-6714 Name of Employer (Required) Self Employed	06/16/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed	06/07/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$240.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Antonow Mailing Address 3336 Whippoorwill Ln City, State, Zip Code Oxford, MS 38655-5311 Name of Employer (Required) Not Employed	06/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$575.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Stallings	06/30/2023	\$25.00
Mailing Address PO Box 1141		
City, State, Zip Code Oxford, MS 38655-1141		
Name of Employer (Required) State of Mississippi		
Occupation (Required) Attorney	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Rhoden	06/22/2023	\$50.00
Mailing Address 778 Gillespie St		
City, State, Zip Code Jackson, MS 39202-1711		
Name of Employer (Required) Self Employed		
Occupation (Required) Physician	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Hinton	06/05/2023	\$100.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen S. Lundy	06/06/2023	\$300.00
Mailing Address 89 James Switzer Rd		
City, State, Zip Code Purvis, MS 39475-3036		
Name of Employer (Required) University of Southern Mississippi		
Occupation (Required) Professor	Aggregate year-to-date	\$305.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Larry O. Vaughn	06/27/2023	\$100.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Keith Johnson	06/30/2023	\$50.00
Mailing Address PO Box 421		
City, State, Zip Code Nesbit, MS 38651-0421		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Don Mathison	06/12/2023	\$500.00
Mailing Address 616 E Second St		
City, State, Zip Code Pass Christian, MS 39571-4007		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$575.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Lacavera	06/24/2023	\$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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Thomas	06/08/2023	\$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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dorsey R. Carson Jr	06/30/2023	\$1,500.00
Mailing Address 2431 Lake Cir		
City, State, Zip Code Jackson, MS 39211-6622		
Name of Employer (Required) Carson Law Group		
Occupation (Required) Attorney	Aggregate year-to-date	\$5,000.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Williams	06/22/2023	\$25.00
Mailing Address 122 Madison Pl		
City, State, Zip Code Hattiesburg, MS 39402-8339		
Name of Employer (Required) Bristow Helicopters		
Occupation (Required) Pilot	Aggregate year-to-date	\$575.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Hasty	06/05/2023	\$500.00
Mailing Address 133 Beach View Dr		
City, State, Zip Code Pass Christian, MS 39571-3503		
Name of Employer (Required) None		
Occupation (Required) Homemaker	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debbie Hall	06/16/2023	\$25.00
Mailing Address 127 Sesame Rd		
City, State, Zip Code Tupelo, MS 38801-8615		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Professor	Aggregate year-to-date	\$462.40
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carol C. Mann	06/26/2023	\$100.00
Mailing Address 316 Sonoma Cv		
City, State, Zip Code Madison, MS 39110-9549		
Name of Employer (Required) Mann Agency		
Occupation (Required) Communications	Aggregate year-to-date	\$385.00



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nan Tarlton	06/29/2023	\$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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Angela Thomas	06/30/2023	\$1,000.00
Mailing Address 1060 E County Line Rd		
City, State, Zip Code Ridgeland, MS 39157-1937		
Name of Employer (Required) Self Employed		
Occupation (Required) Author	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne Robinson	06/30/2023	\$500.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roy H. Ryan	06/15/2023	\$100.00
Mailing Address 2800 W Main St		
City, State, Zip Code Tupelo, MS 38801-3027		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$300.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roger McDowell	06/06/2023	\$200.00
Mailing Address 1904 Fuller St		
City, State, Zip Code Hattiesburg, MS 39401-7544		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,539.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pin Ni	06/26/2023	\$10,000.00
Mailing Address 9 S Meadow Ct		
City, State, Zip Code South Barrington, IL 60010-9554		
Name of Employer (Required) Wanxiang America Corporation		
Occupation (Required) President	Aggregate year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie Fye	06/07/2023	\$50.00
Mailing Address 5439 Ennis Rd		
City, State, Zip Code Starkville, MS 39759-4861		
Name of Employer (Required) Self Employed		
Occupation (Required) Licensed Professional Counselor	Aggregate year-to-date	\$620.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Buchanan	06/28/2023	\$31.79
Mailing Address 155 Bryant St		
City, State, Zip Code Palo Alto, CA 94301-1104		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$564.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carolyn Goren Mailing Address PO Box 7189 City, State, Zip Code Missoula, MT 59807-7189 Name of Employer (Required) Not Employed	06/11/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$310.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joe Powell Mailing Address 417 Glenway Dr City, State, Zip Code Jackson, MS 39216-4108 Name of Employer (Required) WC Leasing, LLC	06/26/2023	\$500.00
Occupation (Required) Commercial Equipment Finance	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Mercier Mailing Address 515 Childs St City, State, Zip Code Corinth, MS 38834-4808 Name of Employer (Required) Officepro	06/30/2023	\$100.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David McKinnis Mailing Address 301 Sasco Hill Rd City, State, Zip Code Fairfield, CT 06824-5649 Name of Employer (Required) Self Employed	06/21/2023	\$14.60
Occupation (Required) Software Engineering Consultant	Aggregate year-to-date	\$1,051.90

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name C. Gale Singley	06/27/2023	\$500.00
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	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name L. V. Holland	06/15/2023	\$2,500.00
Mailing Address 17 New Bethel Rd		
City, State, Zip Code Tylertown, MS 39667-6608		
Name of Employer (Required) Holland Hills Farms		
Occupation (Required) Consultant	Aggregate year-to-date	\$3,500.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hugh Parker	06/28/2023	\$1,000.00
Mailing Address 113 Royal Garden Ter		
City, State, Zip Code Madison, MS 39110-7635		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,025.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Kirkpatrick	06/30/2023	\$500.00
Mailing Address 43282 Warwick Hills Ct		
City, State, Zip Code Leesburg, VA 20176-3950		
Name of Employer (Required) VMware		
Occupation (Required) Sales Executive	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brad Morris	06/30/2023	\$2,500.00
Mailing Address PO Box 2136		
City, State, Zip Code Oxford, MS 38655-7136		
Name of Employer (Required) Brad Morris Law Firm PLLC		
Occupation (Required) Attorney	Aggregate year-to-date	\$4,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia Yap	06/21/2023	\$25.00
Mailing Address 1955 Popps Ferry Rd		
City, State, Zip Code Biloxi, MS 39532-2029		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$360.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carey 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John 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		
Occupation (Required) Business Owner	Aggregate year-to-date	\$500.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Kirkpatrick Mailing Address 43282 Warwick Hills Ct City, State, Zip Code Leesburg, VA 20176-3950 Name of Employer (Required) VMware	06/17/2023	\$1,000.00
Occupation (Required) Sales Executive	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Cupples Mailing Address 1703 Piedmont St City, State, Zip Code Jackson, MS 39202-1344 Name of Employer (Required) Bradley Arant Boulton Cummings LLP	06/28/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Risser Mailing Address 377 County Road 653B City, State, Zip Code Saltillo, MS 38866-5716 Name of Employer (Required) Not Employed	06/10/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Penelope Tose Mailing Address 551 S Valley Rd City, State, Zip Code Poplarville, MS 39470-6256 Name of Employer (Required) Not Employed	06/30/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00



Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne Robinson	06/13/2023	\$25.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie Fye	06/23/2023	\$25.00
Mailing Address 5439 Ennis Rd		
City, State, Zip Code Starkville, MS 39759-4861		
Name of Employer (Required) Self Employed		
Occupation (Required) Licensed Professional Counselor	Aggregate year-to-date	\$620.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Percy W. Watson	06/06/2023	\$500.00
Mailing Address 930 N Main St		
City, State, Zip Code Hattiesburg, MS 39401-3710		
Name of Employer (Required) MS House of Representatives		
Occupation (Required) Member	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stanley Owen	06/11/2023	\$100.00
Mailing Address 24 Sweetgrass Ln		
City, State, Zip Code Ocean Springs, MS 39564-3455		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$400.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James W. Manuel	06/07/2023	\$25.00
Mailing Address 827 Beaumont Dr		
City, State, Zip Code Madison, MS 39110-7494		
Name of Employer (Required) Bradley Arant Boulton Cummings LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marilyn Vandemark	06/27/2023	\$100.00
Mailing Address 412 Highpoint Dr		
City, State, Zip Code Diamondhead, MS 39525-3719		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman	06/30/2023	\$50.00
Mailing Address 316 Quail Creek Dr		
City, State, Zip Code Oxford, MS 38655-6108		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Farris Smith	06/30/2023	\$500.00
Mailing Address 505 Dove Holw		
City, State, Zip Code Oxford, MS 38655-5178		
Name of Employer (Required) Self Employed		
Occupation (Required) Writer	Aggregate year-to-date	\$655.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Graham	06/16/2023	\$250.00
Mailing Address 520 Deer Creek Dr		
City, State, Zip Code Oxford, MS 38655-8559		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Staci Morgan	06/07/2023	\$100.00
Mailing Address 6946 Weir Panhandle Rd		
City, State, Zip Code Weir, MS 39772		
Name of Employer (Required) Self Employed		
Occupation (Required) Conference Director	Aggregate year-to-date	\$968.40

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William R. 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilson Golden	06/15/2023	\$100.00
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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pam Mottley	06/25/2023	\$25.00
Mailing Address 1810 Fuller St		
City, State, Zip Code Hattiesburg, MS 39401-7548		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerutha Steptoe	06/26/2023	\$500.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Matthew 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Thomas	06/20/2023	\$20.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrea Hatfield	06/30/2023	\$250.00
Mailing Address 3509 34th St NW		
City, State, Zip Code Washington, DC 20008-3204		
Name of Employer (Required) Washington Fine Properties		
Occupation (Required) Real Estate Agent	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Vara Lyons	06/23/2023	\$250.00
Mailing Address 120 District Blvd		
City, State, Zip Code Jackson, MS 39211-6079		
Name of Employer (Required) Cosmich, Simmons & Brown		
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mittie R. Field	06/16/2023	\$5.00
Mailing Address PO Box 1926		
City, State, Zip Code Madison, MS 39130-1926		
Name of Employer (Required) Porter & Malouf		
Occupation (Required) Attorney	Aggregate year-to-date	\$255.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Lynch	06/26/2023	\$100.00
Mailing Address 617 Camelia Trl		
City, State, Zip Code Brandon, MS 39047-6316		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Juanita Boutin	06/07/2023	\$50.00
Mailing Address PO Box 400		
City, State, Zip Code Oxford, MS 38655-0400		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Foshee	06/27/2023	\$30.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jacqueline Scott	06/26/2023	\$100.00
Mailing Address 12025 Springridge Rd		
City, State, Zip Code Terry, MS 39170-8105		
Name of Employer (Required) Erimax		
Occupation (Required) Business Owner	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Greg Ward	06/20/2023	\$250.00
Mailing Address 670 Highway 4 W		
City, State, Zip Code Ripley, MS 38663-8002		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$250.00



Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kenneth Groue	06/30/2023	\$25.00
Mailing Address 128 Seaside Dr		
City, State, Zip Code Ocean Springs, MS 39564-5145		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Schimmel	06/25/2023	\$1,250.00
Mailing Address 3630 Kings Hwy		
City, State, Zip Code Jackson, MS 39216-3321		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$8,850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Unz	06/07/2023	\$5.00
Mailing Address 2535 Wright Rd		
City, State, Zip Code Steens, MS 39766-9129		
Name of Employer (Required) Mississippi State University		
Occupation (Required) Scientist	Aggregate year-to-date	\$220.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leonard A. Blackwell II	06/27/2023	\$250.00
Mailing Address 11867 Lorraine Rd		
City, State, Zip Code Gulfport, MS 39503-3951		
Name of Employer (Required) Brunini Law Firm		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,750.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Meg Sinervo	06/20/2023	\$100.00
Mailing Address 16 Country Rd		
City, State, Zip Code Oxford, MS 38655		
Name of Employer (Required) Meek Foundation		
Occupation (Required) Executive Director	Aggregate year-to-date	\$316.75
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cindy Brown	06/11/2023	\$50.00
Mailing Address 219 Carol Ln		
City, State, Zip Code Oxford, MS 38655-3403		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert M. Pugh	06/11/2023	\$25.00
Mailing Address 5924 Whitestone Rd		
City, State, Zip Code Jackson, MS 39206-2515		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeanne A. Marszalek	06/16/2023	\$200.00
Mailing Address 108 Grand Ridge Rd		
City, State, Zip Code Starkville, MS 39759-4112		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Monie Henderson	06/30/2023	\$500.00
Mailing Address 3845 Majestic Oaks Dr		
City, State, Zip Code Oxford, MS 38655-8153		
Name of Employer (Required) Square Books Jr.		
Occupation (Required) Bookseller	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trey Jarrard	06/30/2023	\$1,000.00
Mailing Address 1425 Mayson St NE		
City, State, Zip Code Atlanta, GA 30324-3903		
Name of Employer (Required) Renewvia Energy Corp		
Occupation (Required) Solar Developer	Aggregate year-to-date	\$1,000.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gore Kilpatrick Gambino PLLC	06/26/2023	\$900.00
Mailing Address 2000 Gateway St		
City, State, Zip Code Grenada, MS 38901-2842		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nan Tarlton	06/27/2023	\$50.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,250.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman	06/05/2023	\$25.00
Mailing Address 316 Quail Creek Dr		
City, State, Zip Code Oxford, MS 38655-6108		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Helen Boone	06/25/2023	\$100.00
Mailing Address 3726 Crane Blvd		
City, State, Zip Code Jackson, MS 39216-3605		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$747.45
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny	06/16/2023	\$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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Blaine B. Eaton	06/06/2023	\$500.00
Mailing Address 503 Gambrell St		
City, State, Zip Code Taylorsville, MS 39168-4284		
Name of Employer (Required) Southern Pine Electric Cooperative		
Occupation (Required) Director	Aggregate year-to-date	\$500.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patrick Falkner	06/18/2023	\$100.00
Mailing Address 176 Shady Acres Rd		
City, State, Zip Code Tupelo, MS 38804-2945		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jim Schott	06/28/2023	\$2,500.00
Mailing Address 9 E Hill Dr		
City, State, Zip Code Jackson, MS 39216-3622		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$7,500.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Sullivan Mailing Address 253 County Road 325 City, State, Zip Code Oxford, MS 38655-9566 Name of Employer (Required) Not Employed	06/28/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Geoghegan Mailing Address 227 Greenfield Pl City, State, Zip Code Brandon, MS 39047-9007 Name of Employer (Required) Not Employed	06/03/2023	\$150.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name R. L. Lyle Mailing Address PO Box 560 City, State, Zip Code Morton, MS 39117-0560 Name of Employer (Required) Molpus Woodlands Group LLC	06/03/2023	\$2,500.00
Occupation (Required) Director	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny L. Dupree Mailing Address PO Box 574 City, State, Zip Code Hattiesburg, MS 39403-0574 Name of Employer (Required) Johnny Dupree for Congress	06/06/2023	\$500.00
Occupation (Required) Candidate	Aggregate year-to-date	\$500.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alicia Margolis	06/26/2023	\$100.00
Mailing Address 1474 Dover Rd		
City, State, Zip Code Benton, MS 39040-9162		
Name of Employer (Required) Bradley Arant Boult Cummings LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Juanita Boutin	06/07/2023	\$25.00
Mailing Address PO Box 400		
City, State, Zip Code Oxford, MS 38655-0400		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Peter Buttross Jr	06/19/2023	\$50.00
Mailing Address 206 S Rankin St		
City, State, Zip Code Natchez, MS 39120-3536		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$325.00



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars	06/14/2023	\$25.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Strat S.P.A. LLC	06/06/2023	\$500.00
Mailing Address 3230 Dijon Ave		
City, State, Zip Code Ocean Springs, MS 39564-8520		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$500.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Ballard	06/30/2023	\$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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joey Dumas	06/30/2023	\$5,000.00
Mailing Address 14239 Perdido Key Dr		
City, State, Zip Code Pensacola, FL 32507-5236		
Name of Employer (Required) Dumas Law Firm, LLC		
Occupation (Required) Attorney	Aggregate year-to-date	\$12,500.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Bryant-Angotti Mailing Address 129 Hedges Cv City, State, Zip Code Oxford, MS 38655-1146 Name of Employer (Required) Kent State University	06/04/2023	\$50.00
Occupation (Required) Professor	Aggregate year-to-date	\$235.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lynn Dobbs Mailing Address 43 Dobbs Dr City, State, Zip Code Columbus, MS 39701-9619 Name of Employer (Required) Not Employed	06/24/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Emily Liles Mailing Address 6346 Nellwood Dr City, State, Zip Code Olive Branch, MS 38654-8253 Name of Employer (Required) Not Employed	06/15/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jamie Amos Mailing Address 2109 Acklen Ave City, State, Zip Code Nashville, TN 37212-3501 Name of Employer (Required) Coffee Club Pictures	06/16/2023	\$250.00
Occupation (Required) Producer	Aggregate year-to-date	\$10,250.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jan 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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		
Occupation (Required) Retired	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Carroll	06/30/2023	\$50.00
Mailing Address 675 Beulah Grove Rd		
City, State, Zip Code Pontotoc, MS 38863-7704		
Name of Employer (Required) Ashley Distribution Services		
Occupation (Required) Truck Driver	Aggregate year-to-date	\$270.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Merrye Lynn Brennan	06/02/2023	\$50.00
Mailing Address 151 Least Tern Dr		
City, State, Zip Code Pass Christian, MS 39571-4844		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ray Johansmeier	06/22/2023	\$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	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars	06/05/2023	\$25.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugene Bramlett	06/16/2023	\$25.00
Mailing Address 1123 College St		
City, State, Zip Code Columbus, MS 39701-5810		
Name of Employer (Required) Covenant UMC		
Occupation (Required) Minister	Aggregate year-to-date	\$400.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars	06/07/2023	\$25.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marc 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) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Z. Scruggs	06/29/2023	\$1,000.00
Mailing Address 508 Fazio Drive Extended		
City, State, Zip Code Oxford, MS 38655-2771		
Name of Employer (Required) 2nd Chance MS, Inc		
Occupation (Required) Executive Director	Aggregate year-to-date	\$6,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David R. Mann	06/29/2023	\$100.00
Mailing Address 316 Sonoma Cv		
City, State, Zip Code Madison, MS 39110-9549		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Emily Liles	06/30/2023	\$25.00
Mailing Address 6346 Nellwood Dr		
City, State, Zip Code Olive Branch, MS 38654-8253		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Philip Munger	06/30/2023	\$15,000.00
Mailing Address 40 5th Ave		
City, State, Zip Code New York, NY 10011-8843		
Name of Employer (Required) Self Employed		
Occupation (Required) Investor	Aggregate year-to-date	\$15,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Reilly Morse	06/23/2023	\$250.00
Mailing Address 929 Bridge St		
City, State, Zip Code Gulfport, MS 39507-3432		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William B. Thompson	06/15/2023	\$250.00
Mailing Address 4444 Woodlark Dr		
City, State, Zip Code Jackson, MS 39211-6226		
Name of Employer (Required) Self Employed		
Occupation (Required) Physician	Aggregate year-to-date	\$250.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Lawhead	06/16/2023	\$10.00
Mailing Address 718 S 8th St		
City, State, Zip Code Oxford, MS 38655-4306		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Rhoden	06/28/2023	\$25.00
Mailing Address 778 Gillespie St		
City, State, Zip Code Jackson, MS 39202-1711		
Name of Employer (Required) Self Employed		
Occupation (Required) Physician	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda E. McDaniel	06/30/2023	\$100.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Neil W. White III	06/30/2023	\$250.00
Mailing Address 155 County Road 418		
City, State, Zip Code Oxford, MS 38655-6831		
Name of Employer (Required) Nautilus Publishing		
Occupation (Required) Publisher	Aggregate year-to-date	\$750.00



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Felicia Brown-Williams	06/14/2023	\$50.00
Mailing Address 4010 Council Cir		
City, State, Zip Code Jackson, MS 39206-5813		
Name of Employer (Required) David & Lucile Packard Foundation		
Occupation (Required) Advisor	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Foshee	06/25/2023	\$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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George H. Williams	06/16/2023	\$10.00
Mailing Address 100 Martins Ky		
City, State, Zip Code Ridgeland, MS 39157-3419		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$480.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard M. Douglass	06/27/2023	\$250.00
Mailing Address 141 Least Tern Dr		
City, State, Zip Code Pass Christian, MS 39571-4844		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Busby	06/30/2023	\$100.00
Mailing Address 4607 Sharman St		
City, State, Zip Code Houston, TX 77009-3248		
Name of Employer (Required) World Financial Group		
Occupation (Required) Agent	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars	06/16/2023	\$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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cindy 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary 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		
Occupation (Required) Retired	Aggregate year-to-date	\$500.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie	06/16/2023	\$30.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roy L. Irons	06/29/2023	\$1,000.00
Mailing Address 11352 Palm Valley Cv		
City, State, Zip Code Gulfport, MS 39503-7911		
Name of Employer (Required) Self Employed		
Occupation (Required) Dentist	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lydia Quarles	06/29/2023	\$25.00
Mailing Address 1016 Louisville St		
City, State, Zip Code Starkville, MS 39759-3953		
Name of Employer (Required) Mozingo Quarles		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,125.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tammy Murphy	06/30/2023	\$5,000.00
Mailing Address 45 Blossom Cove Rd		
City, State, Zip Code Red Bank, NJ 07701-6302		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$5,000.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Russell 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melvin Warren	06/26/2023	\$300.00
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	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Jackson	06/27/2023	\$50.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$793.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Williams Mailing Address 122 Madison Pl City, State, Zip Code Hattiesburg, MS 39402-8339 Name of Employer (Required) Bristow Helicopters	06/27/2023	\$25.00
Occupation (Required) Pilot	Aggregate year-to-date	\$575.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed	06/28/2023	\$16.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$252.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joseph O'Gorman Mailing Address 99 Pittman Rd City, State, Zip Code Ocean Springs, MS 39564-1011 Name of Employer (Required) Self Employed	06/09/2023	\$1,000.00
Occupation (Required) Physician	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kelly Coleman Mailing Address 66 Grandview Cir City, State, Zip Code Brandon, MS 39047-7398 Name of Employer (Required) Not Employed	06/30/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$400.00

## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Telephone Contact Inc	06/01/2023	\$1,000.00
Mailing Address 7700 Forsyth Blvd		
City, State, Zip Code Saint Louis, MO 63105-1819		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Strange	06/22/2023	\$25.00
Mailing Address 69 Henry James Rd		
City, State, Zip Code New Augusta, MS 39462-9710		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$585.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kelly J. Jacobs	06/28/2023	\$250.00
Mailing Address 3985 Robertson Gin Rd		
City, State, Zip Code Hernando, MS 38632-8227		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Thomas	06/30/2023	\$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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald 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



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Bailey	06/30/2023	\$50.00
Mailing Address 140 Chickasaw Dr		
City, State, Zip Code West Point, MS 39773-3270		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,100.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Lacavera	06/14/2023	\$25.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Audrey McBride	06/24/2023	\$25.00
Mailing Address 1250 E Lakeshore Dr		
City, State, Zip Code Starkville, MS 39759-2482		
Name of Employer (Required) Mcbride & Co. Real Estate		
Occupation (Required) Broker	Aggregate year-to-date	\$290.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Raymond	06/05/2023	\$100.00
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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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)		
Occupation (Required)	Aggregate year-to-date	\$25,000.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martin Daniel Crump	06/02/2023	\$2,500.00
Mailing Address 2601 14th St		
City, State, Zip Code Gulfport, MS 39501-1926		
Name of Employer (Required) Davis & Crump, PC		
Occupation (Required) Attorney	Aggregate year-to-date	\$7,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugene Bramlett	06/05/2023	\$50.00
Mailing Address 1123 College St		
City, State, Zip Code Columbus, MS 39701-5810		
Name of Employer (Required) Covenant UMC		
Occupation (Required) Minister	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eleanor Gill	06/05/2023	\$5.00
Mailing Address 2605 School St		
City, State, Zip Code Hernando, MS 38632-2217		
Name of Employer (Required) Self Employed		
Occupation (Required) Dentist	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rheta Johnson	06/25/2023	\$25.00
Mailing Address 117 County Road 259		
City, State, Zip Code Iuka, MS 38852-8542		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$675.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Raymond	06/08/2023	\$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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Lawhead	06/28/2023	\$25.00
Mailing Address 718 S 8th St		
City, State, Zip Code Oxford, MS 38655-4306		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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		
Occupation (Required) Not Employed	Aggregate year-to-date	\$380.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marian Barksdale	06/30/2023	\$500.00
Mailing Address 917 Old Taylor Rd		
City, State, Zip Code Oxford, MS 38655-4637		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,100.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stephen Schuler	06/12/2023	\$5,000.00
Mailing Address 315 N Euclid Ave		
City, State, Zip Code Oak Park, IL 60302-2109		
Name of Employer (Required) Serenity Capital		
Occupation (Required) Investment Manager	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joyce Leech	06/13/2023	\$50.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Monie Henderson	06/06/2023	\$200.00
Mailing Address 3845 Majestic Oaks Dr		
City, State, Zip Code Oxford, MS 38655-8153		
Name of Employer (Required) Square Books Jr.		
Occupation (Required) Bookseller	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lauren Driscoll	06/26/2023	\$5,000.00
Mailing Address 279 June Rd		
City, State, Zip Code Stamford, CT 06903-3734		
Name of Employer (Required) NourishedRX		
Occupation (Required) Executive	Aggregate year-to-date	\$5,000.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Partnership</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Green Hills Farm	06/23/2023	\$150.00
Mailing Address 1721 Highway 4 W		
City, State, Zip Code Ripley, MS 38663-9678		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Merrye Lynn Brennan	06/27/2023	\$150.00
Mailing Address 151 Least Tern Dr		
City, State, Zip Code Pass Christian, MS 39571-4844		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$250.00



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Emilee C. Young	06/30/2023	\$1,000.00
Mailing Address 1194 Highway 370		
City, State, Zip Code Dumas, MS 38625-9604		
Name of Employer (Required) Tippah County Hospital		
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$11,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lucile M. Cliff Ochs	06/24/2023	\$1,000.00
Mailing Address 142 Country Rd		
City, State, Zip Code Oxford, MS 38655		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Shannon B. Stage	06/27/2023	\$500.00
Mailing Address 726 Woodstone Dr		
City, State, Zip Code Baton Rouge, LA 70808-5164		
Name of Employer (Required) Sas-y Designs LLC		
Occupation (Required) Business Owner	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia Yap	06/09/2023	\$25.00
Mailing Address 1955 Popps Ferry Rd		
City, State, Zip Code Biloxi, MS 39532-2029		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$360.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Parrott	06/20/2023	\$100.00
Mailing Address 9 Abbey Nord Pl		
City, State, Zip Code Jackson, MS 39216-3743		
Name of Employer (Required) Adams and Reese LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brent Smith	06/15/2023	\$1,000.00
Mailing Address 203 Thomas St		
City, State, Zip Code Cleveland, MS 38732-2422		
Name of Employer (Required) Indianola Family Medical Group		
Occupation (Required) Physician	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Keith Johnson	06/26/2023	\$50.00
Mailing Address PO Box 421		
City, State, Zip Code Nesbit, MS 38651-0421		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Salmon	06/27/2023	\$500.00
Mailing Address 1068 Factory Dr		
City, State, Zip Code Charleston, MS 38921-6620		
Name of Employer (Required) Diabetic-Shoppe		
Occupation (Required) Pharmacist	Aggregate year-to-date	\$2,000.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Preston E. Sullivan	06/28/2023	\$500.00
Mailing Address 1601 County Road 410		
City, State, Zip Code Okolona, MS 38860-9330		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman	06/28/2023	\$10.00
Mailing Address 316 Quail Creek Dr		
City, State, Zip Code Oxford, MS 38655-6108		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Stroup	06/30/2023	\$10.00
Mailing Address 262 Ranchland Rd		
City, State, Zip Code Belden, MS 38826-9642		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Philip Carey Hearn	06/30/2023	\$1,000.00
Mailing Address 117 N Mountain St		
City, State, Zip Code Blue Mountain, MS 38610-9441		
Name of Employer (Required) Hearn Law Firm		
Occupation (Required) Attorney	Aggregate year-to-date	\$2,000.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robbie D. Fisher	06/02/2023	\$250.00
Mailing Address 723 W Lee St		
City, State, Zip Code Water Valley, MS 38965-1413		
Name of Employer (Required) Fisher Productions, LLC		
Occupation (Required) Business Owner	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Alexander	06/22/2023	\$150.00
Mailing Address 46 Sagewood Dr		
City, State, Zip Code Brandon, MS 39042-2526		
Name of Employer (Required) GM		
Occupation (Required) DRM	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Geoghegan	06/24/2023	\$100.00
Mailing Address 227 Greenfield Pl		
City, State, Zip Code Brandon, MS 39047-9007		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ruth Adams	06/26/2023	\$250.00
Mailing Address 7101 Belle Fontaine Dr		
City, State, Zip Code Ocean Springs, MS 39564-8486		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barry Bertolet	06/30/2023	\$250.00
Mailing Address 988 Charleston Blvd		
City, State, Zip Code Tupelo, MS 38801-8435		
Name of Employer (Required) Cardiology Associates		
Occupation (Required) Physician	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne Robinson	06/22/2023	\$25.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name L. Carr McClain	06/06/2023	\$1,000.00
Mailing Address 1011 S 34th Ave		
City, State, Zip Code Hattiesburg, MS 39402-3002		
Name of Employer (Required) Forrest Health		
Occupation (Required) Physician	Aggregate year-to-date	\$1,000.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Matt Brown	06/28/2023	\$500.00
Mailing Address 149 Fountain Brooke Dr		
City, State, Zip Code Hendersonville, TN 37075-8629		
Name of Employer (Required) Silicon Ranch		
Occupation (Required) Business Development	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tim Alford	06/28/2023	\$250.00
Mailing Address 182 Woodbriar Dr		
City, State, Zip Code Kosciusko, MS 39090-9098		
Name of Employer (Required) Self Employed		
Occupation (Required) Physician	Aggregate year-to-date	\$450.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars	06/29/2023	\$25.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold Fiore	06/01/2023	\$100.00
Mailing Address 118 W Jefferson Ave		
City, State, Zip Code Greenwood, MS 38930-3536		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Alexander	06/21/2023	\$50.00
Mailing Address 18 Highland Meadows Dr		
City, State, Zip Code Jackson, MS 39211-5949		
Name of Employer (Required) Alexander CPA, LLC		
Occupation (Required) Accountant	Aggregate year-to-date	\$550.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Raymond Mailing Address 3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required) Not Employed	06/22/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William L. Ducker Mailing Address PO Box 217 City, State, Zip Code Purvis, MS 39475-0217 Name of Employer (Required) Self Employed	06/03/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Natalie Bernstein Mailing Address 2130 E Lake Rd NE City, State, Zip Code Atlanta, GA 30307-1836 Name of Employer (Required) Not Employed	06/09/2023	\$5,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$6,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Hutto Mailing Address 62 Redfern Trl City, State, Zip Code Petal, MS 39465-9415 Name of Employer (Required) Self Employed	06/22/2023	\$10.00
Occupation (Required) Education Consultant	Aggregate year-to-date	\$540.00



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name R. H. Dunlap	06/29/2023	\$10,000.00
Mailing Address PO Box 720		
City, State, Zip Code Batesville, MS 38606-0720		
Name of Employer (Required) Dunlap & Kyle Co, Inc.		
Occupation (Required) CEO	Aggregate year-to-date	\$20,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Brombacher	06/30/2023	\$50.00
Mailing Address 108 Coachmans Rd		
City, State, Zip Code Madison, MS 39110-9227		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Walker	06/30/2023	\$25.00
Mailing Address 5950 B N Colony Blvd		
City, State, Zip Code Jackson, MS 39206-2404		
Name of Employer (Required) Federal Emergency Management Agency		
Occupation (Required) Administrative Support Specialist	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Chris Wilson	06/12/2023	\$250.00
Mailing Address 3853 46th Ave NE		
City, State, Zip Code Seattle, WA 98105-5219		
Name of Employer (Required) Self Employed		
Occupation (Required) Marketing Consultant	Aggregate year-to-date	\$250.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny D. Jones	06/13/2023	\$100.00
Mailing Address 611 S Pear Orchard Rd		
City, State, Zip Code Ridgeland, MS 39157-4836		
Name of Employer (Required) The DELTA Project		
Occupation (Required) COO	Aggregate year-to-date	\$1,253.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann J. Abadie	06/24/2023	\$100.00
Mailing Address 2238 Lee Loop		
City, State, Zip Code Oxford, MS 38655-4920		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$690.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Watt Bishop	06/28/2023	\$100.00
Mailing Address 714 N 14th St		
City, State, Zip Code Oxford, MS 38655-3222		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gayle Massey	06/20/2023	\$25.00
Mailing Address 186 Parke Dr		
City, State, Zip Code Ridgeland, MS 39157-9402		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Peter Buttross Jr	06/02/2023	\$50.00
Mailing Address 206 S Rankin St		
City, State, Zip Code Natchez, MS 39120-3536		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra B. Young	06/12/2023	\$200.00
Mailing Address 27 County Road 3024		
City, State, Zip Code Oxford, MS 38655-9786		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Academic Dean	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Mckerns	06/05/2023	\$100.00
Mailing Address 813 42nd Ave		
City, State, Zip Code Gulfport, MS 39501-1451		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nancy Loftus	06/05/2023	\$50.00
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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bruce Davis	06/05/2023	\$5.00
Mailing Address 777 Shady Oaks Cir		
City, State, Zip Code Oxford, MS 38655-5450		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie	06/25/2023	\$30.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Victor Campbell	06/29/2023	\$1,000.00
Mailing Address 1307 Chickering Rd		
City, State, Zip Code Nashville, TN 37215-4521		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Duncan M. Gray III	06/30/2023	\$150.00
Mailing Address 110 Philip Rd		
City, State, Zip Code Oxford, MS 38655-2014		
Name of Employer (Required) Nativity Episcopal Church		
Occupation (Required) Clergy	Aggregate year-to-date	\$500.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name H Scott Ross	06/26/2023	\$2,500.00
Mailing Address PO Box 332		
City, State, Zip Code West Point, MS 39773-0332		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melvin Warren	06/07/2023	\$50.00
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	Aggregate year-to-date	\$400.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Raymond	06/20/2023	\$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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roger Williams	06/30/2023	\$25.00
Mailing Address 194 Victoria Pl		
City, State, Zip Code Madison, MS 39110-5502		
Name of Employer (Required) Watkins & Eager PLLC		
Occupation (Required) Attorney	Aggregate year-to-date	\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name R & L Unlimited, LLC	06/23/2023	\$500.00
Mailing Address 5760 I 55 N		
City, State, Zip Code Jackson, MS 39211-2654		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Cunningham	06/30/2023	\$100.00
Mailing Address 13462 MS Highway 388		
City, State, Zip Code Brooksville, MS 39739-9167		
Name of Employer (Required) Valley Farm		
Occupation (Required) Farm Worker	Aggregate year-to-date	\$500.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie Westbrook	06/24/2023	\$1,000.00
Mailing Address 800 College Hill Rd		
City, State, Zip Code Oxford, MS 38655-2767		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jay M. Colbert	06/15/2023	\$1,000.00
Mailing Address PO Box 284		
City, State, Zip Code Houston, MS 38851-0284		
Name of Employer (Required) Colbert Land Services LLC		
Occupation (Required) Business Owner	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars	06/25/2023	\$15.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gary L. Smith	06/27/2023	\$250.00
Mailing Address 965 E Scenic Dr		
City, State, Zip Code Pass Christian, MS 39571-4701		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John C. Ross	06/28/2023	\$300.00
Mailing Address PO Box 1681		
City, State, Zip Code Corinth, MS 38835-1681		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joanna Shows	06/24/2023	\$100.00
Mailing Address 1388 Lampton Hilltop Rd		
City, State, Zip Code Columbia, MS 39429-8035		
Name of Employer (Required) Keen Sharpening		
Occupation (Required) Cutler	Aggregate year-to-date	\$425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gratia Karmes	06/05/2023	\$15.00
Mailing Address 417 Chapin St		
City, State, Zip Code Starkville, MS 39759-2620		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$265.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny D. Jones	06/26/2023	\$250.00
Mailing Address 611 S Pear Orchard Rd		
City, State, Zip Code Ridgeland, MS 39157-4836		
Name of Employer (Required) The DELTA Project		
Occupation (Required) COO	Aggregate year-to-date	\$1,253.50

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Billy 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cindy 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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa Stevens Mailing Address 101 Boone Dr City, State, Zip Code Booneville, MS 38829-2609 Name of Employer (Required) NE MS Community College	06/19/2023	\$25.00
Occupation (Required) College Instructor	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Courtney Mailing Address PO Box 23126 City, State, Zip Code Jackson, MS 39225-3126 Name of Employer (Required) Courtney Elder Law	06/29/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alexe Van Beuren Mailing Address 509 Wagner St City, State, Zip Code Water Valley, MS 38965-2301 Name of Employer (Required) B.T.C. Old-Fashioned Grocery	06/01/2023	\$250.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen K. Sawyer Mailing Address 150 Spence Dr City, State, Zip Code Pass Christian, MS 39571-4839 Name of Employer (Required) Not Employed	06/05/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,250.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Latoya Merritt	06/14/2023	\$1,000.00
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

## ITEMIZED RECEIPTS

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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martin Daniel Crump	06/21/2023	\$2,500.00
Mailing Address 2601 14th St		
City, State, Zip Code Gulfport, MS 39501-1926		
Name of Employer (Required) Davis & Crump, PC		
Occupation (Required) Attorney	Aggregate year-to-date	\$7,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James A. Koerber	06/04/2023	\$250.00
Mailing Address PO Box 18170		
City, State, Zip Code Hattiesburg, MS 39404-8170		
Name of Employer (Required) EisnerAmper		
Occupation (Required) Accountant	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Geoghegan	06/24/2023	\$100.00
Mailing Address 227 Greenfield Pl		
City, State, Zip Code Brandon, MS 39047-9007		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa McCollom	06/25/2023	\$25.00
Mailing Address 201 Hoffman Ln		
City, State, Zip Code Waveland, MS 39576-4312		
Name of Employer (Required) American Airlines		
Occupation (Required) Flight Attendant	Aggregate year-to-date	\$211.75



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Russell Jolly	06/28/2023	\$500.00
Mailing Address 369 Highway 47		
City, State, Zip Code Houston, MS 38851-7746		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Walker	06/30/2023	\$100.00
Mailing Address 5950 B N Colony Blvd		
City, State, Zip Code Jackson, MS 39206-2404		
Name of Employer (Required) Federal Emergency Management Agency		
Occupation (Required) Administrative Support Specialist	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie	06/30/2023	\$50.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marian Kurz	06/30/2023	\$25.00
Mailing Address 1300 Central St		
City, State, Zip Code Evanston, IL 60201-1676		
Name of Employer (Required) Self Employed		
Occupation (Required) Public Relations	Aggregate year-to-date	\$210.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Mckerns	06/05/2023	\$100.00
Mailing Address 813 42nd Ave		
City, State, Zip Code Gulfport, MS 39501-1451		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lana Richardson	06/25/2023	\$25.00
Mailing Address 10611 County Road 500		
City, State, Zip Code Ripley, MS 38663-9199		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jimmyle Listenbee	06/26/2023	\$300.00
Mailing Address 14 County Road 3073		
City, State, Zip Code Taylor, MS 38673-4513		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marcus Wallace	06/29/2023	\$250.00
Mailing Address 317 E Capitol St		
City, State, Zip Code Jackson, MS 39201-3409		
Name of Employer (Required) MAC & Associates, LLC		
Occupation (Required) Business Owner	Aggregate year-to-date	\$250.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Raymond	06/16/2023	\$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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kayla Sween	06/26/2023	\$100.00
Mailing Address 1414 Ruby Pt		
City, State, Zip Code Flowood, MS 39232-5013		
Name of Employer (Required) Blitz Revolution		
Occupation (Required) Senior Software Engineer	Aggregate year-to-date	\$378.55

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth W. Slifer	06/27/2023	\$500.00
Mailing Address 230 Bridge St		
City, State, Zip Code Vail, CO 81657-3619		
Name of Employer (Required) Self Employed		
Occupation (Required) Interior Designer	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Teasley	06/30/2023	\$100.00
Mailing Address 100 Aspen Dr		
City, State, Zip Code Madison, MS 39110-9712		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie	06/13/2023	\$6.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Rhoden	06/15/2023	\$50.00
Mailing Address 778 Gillespie St		
City, State, Zip Code Jackson, MS 39202-1711		
Name of Employer (Required) Self Employed		
Occupation (Required) Physician	Aggregate year-to-date	\$450.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny 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) Farmer	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Bradley	06/22/2023	\$500.00
Mailing Address 107 Philip Rd		
City, State, Zip Code Oxford, MS 38655-2013		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$7,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Clifford Burnstein	06/15/2023	\$3,000.00
Mailing Address 655 6th Ave		
City, State, Zip Code New York, NY 10010-5153		
Name of Employer (Required) Q Prime		
Occupation (Required) Manager	Aggregate year-to-date	\$3,000.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathy Olsen	06/26/2023	\$15,000.00
Mailing Address PO Box 150829		
City, State, Zip Code Nashville, TN 37215-0829		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$55,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George H. Williams	06/08/2023	\$10.00
Mailing Address 100 Martins Ky		
City, State, Zip Code Ridgeland, MS 39157-3419		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$480.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Deirdre Phillips	06/09/2023	\$50.00
Mailing Address 200 Jefferson Rdg		
City, State, Zip Code Ridgeland, MS 39157-9101		
Name of Employer (Required) Delta Health System		
Occupation (Required) Physician	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Watson	06/30/2023	\$500.00
Mailing Address 42 County Road 317		
City, State, Zip Code Oxford, MS 38655-5922		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nancy 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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) Attorney	Aggregate year-to-date	\$793.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Crymes G. Pittman	06/28/2023	\$12,500.00
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	\$17,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rita Ann Somers	06/23/2023	\$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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William 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		
Occupation (Required) Retired	Aggregate year-to-date	\$258.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John 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



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Simms	06/28/2023	\$10.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Dickson	06/30/2023	\$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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret Thomas	06/03/2023	\$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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johanna Rice	06/23/2023	\$25.00
Mailing Address 167 Court St		
City, State, Zip Code West Point, MS 39773-7990		
Name of Employer (Required) Johanna Rice, LLC		
Occupation (Required) Publisher	Aggregate year-to-date	\$375.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Denotee Martin	06/26/2023	\$100.00
Mailing Address 1009 County Road 65		
City, State, Zip Code New Albany, MS 38652-8923		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Watson	06/09/2023	\$500.00
Mailing Address 42 County Road 317		
City, State, Zip Code Oxford, MS 38655-5922		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brad Morris Law Firm PLLC	06/09/2023	\$2,000.00
Mailing Address 1603 University Ave		
City, State, Zip Code Oxford, MS 38655-4127		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Rankin	06/23/2023	\$50.00
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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marc 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Matlock Properties LLC	06/29/2023	\$10,000.00
Mailing Address 829 N Lamar Blvd		
City, State, Zip Code Oxford, MS 38655-2858		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$10,000.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Catherine P. Edmonson	06/30/2023	\$500.00
Mailing Address 1202 S 34th Ave		
City, State, Zip Code Hattiesburg, MS 39402-3060		
Name of Employer (Required) Self Employed		
Occupation (Required) Art Historian	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Rushing	06/14/2023	\$100.00
Mailing Address 102 N Sunflower Ave		
City, State, Zip Code Indianola, MS 38751-2552		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$414.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Judy Cormier	06/05/2023	\$500.00
Mailing Address 164 E 72nd St		
City, State, Zip Code New York, NY 10021-4363		
Name of Employer (Required) Self Employed		
Occupation (Required) Interior Designer	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roger Klingler	06/15/2023	\$10.00
Mailing Address 7844 E Sandalwood Dr		
City, State, Zip Code Scottsdale, AZ 85250-7269		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$810.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alma Walls	06/25/2023	\$50.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Francis Turner	06/29/2023	\$100.00
Mailing Address 166 Steep Holw		
City, State, Zip Code Hattiesburg, MS 39402-7004		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Hawkins	06/30/2023	\$500.00
Mailing Address 226 N President St		
City, State, Zip Code Jackson, MS 39201-1903		
Name of Employer (Required) Hawkins Law P.C.		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gary Anderson	06/14/2023	\$500.00
Mailing Address 828 Battle Rd		
City, State, Zip Code Byhalia, MS 38611-8999		
Name of Employer (Required) Asics America		
Occupation (Required) Shipping	Aggregate year-to-date	\$500.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jamie 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robbie D. Fisher	06/30/2023	\$100.00
Mailing Address 723 W Lee St		
City, State, Zip Code Water Valley, MS 38965-1413		
Name of Employer (Required) Fisher Productions, LLC		
Occupation (Required) Business Owner	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Randy Clark	06/23/2023	\$40.10
Mailing Address 507 Storm Ave		
City, State, Zip Code Brookhaven, MS 39601-3775		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$240.10
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gary Meltz	06/26/2023	\$750.00
Mailing Address 5836 Prytania St		
City, State, Zip Code New Orleans, LA 70115-4346		
Name of Employer (Required) Meltz Communications		
Occupation (Required) Business Owner	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martin Daniel Crump	06/07/2023	\$2,500.00
Mailing Address 2601 14th St		
City, State, Zip Code Gulfport, MS 39501-1926		
Name of Employer (Required) Davis & Crump, PC		
Occupation (Required) Attorney	Aggregate year-to-date	\$7,500.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Carroll	06/08/2023	\$25.00
Mailing Address 675 Beulah Grove Rd		
City, State, Zip Code Pontotoc, MS 38863-7704		
Name of Employer (Required) Ashley Distribution Services		
Occupation (Required) Truck Driver	Aggregate year-to-date	\$270.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Fred Kency	06/30/2023	\$100.00
Mailing Address 503 Pinebrook Cv		
City, State, Zip Code Brandon, MS 39047-7827		
Name of Employer (Required) Baptist Medical		
Occupation (Required) Physician	Aggregate year-to-date	\$310.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Theresa Steinberger	06/10/2023	\$25.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann J. Abadie	06/20/2023	\$5.00
Mailing Address 2238 Lee Loop		
City, State, Zip Code Oxford, MS 38655-4920		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$690.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dan Webb	06/30/2023	\$5,000.00
Mailing Address PO Box 496		
City, State, Zip Code Tupelo, MS 38802-0496		
Name of Employer (Required) Webb Sanders & Williams PLLC		
Occupation (Required) Attorney	Aggregate year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jason Lee Shelton	06/22/2023	\$500.00
Mailing Address 807 Indian Oaks Dr		
City, State, Zip Code Saltillo, MS 38866-9404		
Name of Employer (Required) General Services Administration		
Occupation (Required) Regional Administrator	Aggregate year-to-date	\$3,086.39
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patricia M. Brooking	06/15/2023	\$2,500.00
Mailing Address 1200 Meadowbrook Rd		
City, State, Zip Code Jackson, MS 39206-6109		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roger Klingler	06/17/2023	\$25.00
Mailing Address 7844 E Sandalwood Dr		
City, State, Zip Code Scottsdale, AZ 85250-7269		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$810.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elvin Sunds	06/21/2023	\$25.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Butler	06/09/2023	\$50.00
Mailing Address 2110 Brackenshire Cir		
City, State, Zip Code Jackson, MS 39211-5836		
Name of Employer (Required) GranthamPoole PLLC		
Occupation (Required) Accountant	Aggregate year-to-date	\$300.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Foshee	06/09/2023	\$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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Benjamin Ifshin	06/30/2023	\$100.00
Mailing Address 411 Kimmons St		
City, State, Zip Code Water Valley, MS 38965-2404		
Name of Employer (Required) Oxbow Education PBC		
Occupation (Required) Director	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dennis Truax	06/24/2023	\$100.00
Mailing Address 913 Southgate Dr		
City, State, Zip Code Starkville, MS 39759-9434		
Name of Employer (Required) Self Employed		
Occupation (Required) Engineer	Aggregate year-to-date	\$950.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Dunagin	06/05/2023	\$25.00
Mailing Address 1302 Fillmore Ave		
City, State, Zip Code Oxford, MS 38655-4424		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael R. O'Neal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic	06/06/2023	\$250.00
Occupation (Required) Physician	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Patton Mailing Address 5102 Canton Heights Dr City, State, Zip Code Jackson, MS 39211-4515 Name of Employer (Required) St Catherine's Village	06/27/2023	\$250.00
Occupation (Required) Medical Director	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required) Not Employed	06/28/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$383.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ilene Engel Mailing Address 1057 Arbor Trce NE City, State, Zip Code Brookhaven, GA 30319-5381 Name of Employer (Required) Not Employed	06/30/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stephen 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) Consultant	Aggregate year-to-date	\$475.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sandra Ray	06/27/2023	\$25.00
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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ramona Bernard	06/28/2023	\$250.00
Mailing Address 301 Panola St		
City, State, Zip Code Water Valley, MS 38965-2424		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cornelis Gispen	06/09/2023	\$25.00
Mailing Address 1112 S 11th St		
City, State, Zip Code Oxford, MS 38655-4610		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,075.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carl Cottingham	06/10/2023	\$250.00
Mailing Address 140 Lela Ln		
City, State, Zip Code Greenville, MS 38701-7760		
Name of Employer (Required) Cottingham		
Occupation (Required) Caterer	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard M. Davis	06/20/2023	\$500.00
Mailing Address 25284 Lakeside Ter		
City, State, Zip Code Loxley, AL 36551-7426		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Jefcoat	06/26/2023	\$100.00
Mailing Address 1306 Homewood Dr		
City, State, Zip Code Laurel, MS 39440-2260		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Stallings	06/07/2023	\$25.00
Mailing Address PO Box 1141		
City, State, Zip Code Oxford, MS 38655-1141		
Name of Employer (Required) State of Mississippi		
Occupation (Required) Attorney	Aggregate year-to-date	\$225.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mack Lowery	06/29/2023	\$50.00
Mailing Address 5055 Myers Rd		
City, State, Zip Code Terry, MS 39170-9429		
Name of Employer (Required) Aamco Transmission		
Occupation (Required) Business Owner	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Denise Pilgrim	06/30/2023	\$50.00
Mailing Address 108 Bellingham Dr		
City, State, Zip Code Madison, MS 39110-8524		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$417.90
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Randy Wadkins	06/01/2023	\$50.00
Mailing Address 1605 Pierce Avenue Ext		
City, State, Zip Code Oxford, MS 38655-4459		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Professor	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Morris	06/06/2023	\$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

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James N. Butts	06/16/2023	\$500.00
Mailing Address 703 N 7th Ave		
City, State, Zip Code Laurel, MS 39440-3468		
Name of Employer (Required) Sanderson Farms		
Occupation (Required) Manager	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Strange	06/26/2023	\$10.00
Mailing Address 69 Henry James Rd		
City, State, Zip Code New Augusta, MS 39462-9710		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$585.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name American Clean Power Assoc	06/29/2023	\$1,000.00
Mailing Address 1501 M St NW		
City, State, Zip Code Washington, DC 20005-1700		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roy Campbell	06/30/2023	\$1,000.00
Mailing Address 835 Avondale St		
City, State, Zip Code Jackson, MS 39216-3316		
Name of Employer (Required) Bradley Arant Boult Cummings LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$2,000.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janet Scott	06/21/2023	\$2,500.00
Mailing Address 603 Troon Rd		
City, State, Zip Code Oxford, MS 38655-3596		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$7,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Haskell	06/25/2023	\$50.00
Mailing Address 6 Trotting Horse Dr		
City, State, Zip Code Lexington, MA 02421-6339		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton	06/25/2023	\$25.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Thomas	06/26/2023	\$500.00
Mailing Address 444 E Madison St		
City, State, Zip Code Houston, MS 38851-2307		
Name of Employer (Required) Keith Pounds CPAs		
Occupation (Required) Accountant	Aggregate year-to-date	\$500.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed	06/07/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Simms Mailing Address 871 N Siwell Rd City, State, Zip Code Jackson, MS 39209-9211 Name of Employer (Required) Stribling Equipment	06/29/2023	\$250.00
Occupation (Required) Programmer	Aggregate year-to-date	\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas Neyhart Mailing Address 1301 N Rampart St City, State, Zip Code New Orleans, LA 70116-2658 Name of Employer (Required) PosiGen	06/29/2023	\$100.00
Occupation (Required) Manager	Aggregate year-to-date	\$5,100.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Walter Taylor Mailing Address 1054 County Road 36 City, State, Zip Code Thaxton, MS 38871-9507 Name of Employer (Required) Not Employed	06/30/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,600.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Shirley Gray	06/12/2023	\$500.00
Mailing Address 520 College Hill Rd		
City, State, Zip Code Oxford, MS 38655-2000		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny D. Jones	06/17/2023	\$100.00
Mailing Address 611 S Pear Orchard Rd		
City, State, Zip Code Ridgeland, MS 39157-4836		
Name of Employer (Required) The DELTA Project		
Occupation (Required) COO	Aggregate year-to-date	\$1,253.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie	06/29/2023	\$50.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Jopling	06/30/2023	\$100.00
Mailing Address 276 Santini St		
City, State, Zip Code Biloxi, MS 39530-2946		
Name of Employer (Required) MS Center for Justice		
Occupation (Required) Attorney	Aggregate year-to-date	\$450.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Peter Buttross Jr	06/15/2023	\$100.00
Mailing Address 206 S Rankin St		
City, State, Zip Code Natchez, MS 39120-3536		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marc Doyle	06/26/2023	\$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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa Cohen	06/08/2023	\$2,500.00
Mailing Address 4555 Magnolia Manor Way		
City, State, Zip Code Alexandria, VA 22312-1400		
Name of Employer (Required) Self Employed		
Occupation (Required) Coach	Aggregate year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patsy R. Brumfield	06/28/2023	\$10.00
Mailing Address 128 Woodland Ridge Dr		
City, State, Zip Code Mccomb, MS 39648-6338		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$233.30



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carl 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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Duncan M. Gray III	06/17/2023	\$50.00
Mailing Address 110 Philip Rd		
City, State, Zip Code Oxford, MS 38655-2014		
Name of Employer (Required) Nativity Episcopal Church		
Occupation (Required) Clergy	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dustin Markle	06/27/2023	\$1,000.00
Mailing Address 624 N Madison St		
City, State, Zip Code Tupelo, MS 38804-2016		
Name of Employer (Required) North Mississippi Health Services		
Occupation (Required) Physician	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie	06/08/2023	\$6.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Douglas Masterson	06/08/2023	\$10.00
Mailing Address 43 Palm Tree Loop		
City, State, Zip Code Petal, MS 39465-9251		
Name of Employer (Required) University of Southern Mississippi		
Occupation (Required) Chemist	Aggregate year-to-date	\$310.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mike Kerce Mailing Address 245 Hidden Creek Dr City, State, Zip Code Ridgeland, MS 39157-6601 Name of Employer (Required) Deposit Alternatives, LLC	06/29/2023	\$25.00
Occupation (Required) CEO	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Rifkind Mailing Address 825 8th Ave City, State, Zip Code New York, NY 10019-7416 Name of Employer (Required) Not Employed	06/30/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeffrey Hunt Mailing Address 299 W Main St City, State, Zip Code Westminster, MD 21158-4329 Name of Employer (Required) Not Employed	06/30/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Claire Davis Mailing Address 44714 Audubon Sq City, State, Zip Code Ashburn, VA 20147-6295 Name of Employer (Required) Not Employed	06/12/2023	\$20.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$240.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ronald Unz	06/22/2023	\$100.00
Mailing Address 2535 Wright Rd		
City, State, Zip Code Steens, MS 39766-9129		
Name of Employer (Required) Mississippi State University		
Occupation (Required) Scientist	Aggregate year-to-date	\$220.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman	06/29/2023	\$25.00
Mailing Address 316 Quail Creek Dr		
City, State, Zip Code Oxford, MS 38655-6108		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Howard O'Leary	06/30/2023	\$250.00
Mailing Address 420 Kent Ave		
City, State, Zip Code Brooklyn, NY 11249-5601		
Name of Employer (Required) Intercontinental Exchange		
Occupation (Required) Developer	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lauren Leslie	06/23/2023	\$250.00
Mailing Address 328 S Main St		
City, State, Zip Code Grenada, MS 38901-3215		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elvin Sunds	06/27/2023	\$25.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Casey	06/28/2023	\$50.00
Mailing Address 229 Peachtree Hills Ave NE		
City, State, Zip Code Atlanta, GA 30305-4413		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Raymond	06/28/2023	\$10.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tiffany Bensen	06/20/2023	\$50.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charlotte Williams	06/30/2023	\$250.00
Mailing Address PO Box 337		
City, State, Zip Code Fulton, MS 38843-0337		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frances M. Coleman	06/03/2023	\$5.00
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

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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) Not Employed	Aggregate year-to-date	\$233.30
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Betty D. Williams	06/30/2023	\$1,000.00
Mailing Address 254 Harding Pl		
City, State, Zip Code Nashville, TN 37205-3727		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martha Harper	06/22/2023	\$10.00
Mailing Address 341 Macarthur Ave		
City, State, Zip Code Biloxi, MS 39531-2807		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Rhoden	06/04/2023	\$100.00
Mailing Address 778 Gillespie St		
City, State, Zip Code Jackson, MS 39202-1711		
Name of Employer (Required) Self Employed		
Occupation (Required) Physician	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia Yap	06/30/2023	\$25.00
Mailing Address 1955 Popps Ferry Rd		
City, State, Zip Code Biloxi, MS 39532-2029		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$360.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Waller	06/21/2023	\$500.00
Mailing Address 404 6th Ave		
City, State, Zip Code Hattiesburg, MS 39401-4241		
Name of Employer (Required) Hattiesburg Clinic		
Occupation (Required) Physician	Aggregate year-to-date	\$1,000.00



## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charel Hulsey	06/03/2023	\$250.00
Mailing Address 106 Greenwood Pl		
City, State, Zip Code Hattiesburg, MS 39402-2313		
Name of Employer (Required) Forrest General Hospital		
Occupation (Required) Physician	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Freeman	06/13/2023	\$250.00
Mailing Address 1631 Arabella St		
City, State, Zip Code New Orleans, LA 70115-5025		
Name of Employer (Required) Barrasso Usdin		
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Rhoden	06/24/2023	\$25.00
Mailing Address 778 Gillespie St		
City, State, Zip Code Jackson, MS 39202-1711		
Name of Employer (Required) Self Employed		
Occupation (Required) Physician	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas A. Blanton	06/06/2023	\$1,000.00
Mailing Address 707 Hardy St		
City, State, Zip Code Hattiesburg, MS 39401-3666		
Name of Employer (Required) Self Employed		
Occupation (Required) Oil Producer	Aggregate year-to-date	\$1,000.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne Robinson Mailing Address 206 Wood St City, State, Zip Code Water Valley, MS 38965-2603 Name of Employer (Required) Not Employed	06/08/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$985.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cliff Heaton Mailing Address PO Box 158 City, State, Zip Code Lyon, MS 38645-0158 Name of Employer (Required) Self Employed	06/29/2023	\$5,000.00
Occupation (Required) Farmer	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Ballard Mailing Address 5488 Turningleaf Cv City, State, Zip Code Tupelo, MS 38801-9516 Name of Employer (Required) Cardinal Health	06/30/2023	\$50.00
Occupation (Required) Pharmacist	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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	06/30/2023	\$10.00
Occupation (Required) Clergy	Aggregate year-to-date	\$305.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Higginbotham	06/30/2023	\$250.00
Mailing Address 27 Fox Hollow Ln		
City, State, Zip Code Laurel, MS 39443-4946		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bert Ehrhardt	06/24/2023	\$1,000.00
Mailing Address 200 Windsor Rdg		
City, State, Zip Code Oxford, MS 38655-6265		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Roberts	06/08/2023	\$100.00
Mailing Address 709 Northdale Pl		
City, State, Zip Code Brandon, MS 39047-5110		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard F. Scruggs	06/29/2023	\$2,500.00
Mailing Address 700 Faulkner Woods Pl		
City, State, Zip Code Oxford, MS 38655-4620		
Name of Employer (Required) 2nd Chance MS, Inc		
Occupation (Required) Philanthropy	Aggregate year-to-date	\$12,500.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marc 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Quinn Delaney	06/30/2023	\$25,000.00
Mailing Address 436 14th St		
City, State, Zip Code Oakland, CA 94612-2716		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$25,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Raymond	06/12/2023	\$250.00
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

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rickey T. Moore	06/15/2023	\$250.00
Mailing Address PO Box 145		
City, State, Zip Code Wheeler, MS 38880-0145		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Buchanan	06/26/2023	\$45.71
Mailing Address 155 Bryant St		
City, State, Zip Code Palo Alto, CA 94301-1104		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$564.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Carroll	06/28/2023	\$25.00
Mailing Address 675 Beulah Grove Rd		
City, State, Zip Code Pontotoc, MS 38863-7704		
Name of Employer (Required) Ashley Distribution Services		
Occupation (Required) Truck Driver	Aggregate year-to-date	\$270.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rachel Waide	06/29/2023	\$2,500.00
Mailing Address 1110 Belledeer Dr		
City, State, Zip Code Tupelo, MS 38804-1914		
Name of Employer (Required) Waide and Associates, PA		
Occupation (Required) Attorney	Aggregate year-to-date	\$5,000.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Rabalais	06/30/2023	\$10.00
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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Clyde V. Williams	06/15/2023	\$500.00
Mailing Address 105 Grand Ridge Rd		
City, State, Zip Code Starkville, MS 39759-4111		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tomie Green	06/16/2023	\$10.00
Mailing Address 114 Pine Island Dr		
City, State, Zip Code Jackson, MS 39206-3234		
Name of Employer (Required) US Dept of State		
Occupation (Required) Attorney	Aggregate year-to-date	\$245.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cliff Johnson	06/26/2023	\$500.00
Mailing Address 1275 Highway 7 S		
City, State, Zip Code Water Valley, MS 38965-3758		
Name of Employer (Required) MacArthur Justice Center		
Occupation (Required) Attorney	Aggregate year-to-date	\$764.60

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Galloway Mailing Address 17 Baytowne Row City, State, Zip Code Madison, MS 39110-9179 Name of Employer (Required) Not Employed	06/08/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$633.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed	06/11/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$564.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa J. Sutton Mailing Address 130 Sunny Ln City, State, Zip Code Mooreville, MS 38857-7033 Name of Employer (Required) Not Employed	06/15/2023	\$300.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Daniel Pair Mailing Address 968 Road 261 City, State, Zip Code Tupelo, MS 38801-7600 Name of Employer (Required) Social Security Administration	06/26/2023	\$25.00
Occupation (Required) Claims Specialist	Aggregate year-to-date	\$325.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Guy Mitchell	06/28/2023	\$1,000.00
Mailing Address 817 Debeau Dr		
City, State, Zip Code Tupelo, MS 38804-1002		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carol Puckett	06/30/2023	\$500.00
Mailing Address 3 Cypress Ln		
City, State, Zip Code Jackson, MS 39211-5935		
Name of Employer (Required) Cornbread Consulting		
Occupation (Required) President	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ted Atkinson	06/21/2023	\$25.00
Mailing Address 1000 E Broad St		
City, State, Zip Code West Point, MS 39773-3236		
Name of Employer (Required) Mississippi State University		
Occupation (Required) Professor	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Buchanan	06/22/2023	\$100.00
Mailing Address 155 Bryant St		
City, State, Zip Code Palo Alto, CA 94301-1104		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$564.00



Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Parks & Parks Water Well Service Inc.	06/26/2023	\$1,000.00
Mailing Address PO Box 32		
City, State, Zip Code Houston, MS 38851-0032		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Brombacher	06/22/2023	\$25.00
Mailing Address 108 Coachmans Rd		
City, State, Zip Code Madison, MS 39110-9227		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Timothy H. Moore	06/23/2023	\$2,000.00
Mailing Address 426 Mannsdale Rd		
City, State, Zip Code Madison, MS 39110-7575		
Name of Employer (Required) Mississippi Hospital Association		
Occupation (Required) President	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sheila Hailey	06/24/2023	\$100.00
Mailing Address PO Box 39		
City, State, Zip Code Terry, MS 39170-0039		
Name of Employer (Required) Beth Israel Congregation		
Occupation (Required) Executive Director	Aggregate year-to-date	\$225.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie-Burl McLemore	06/16/2023	\$100.00
Mailing Address 7900 Michael Dr		
City, State, Zip Code Lake Cormorant, MS 38641-8211		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Glenn Taylor	06/17/2023	\$50.00
Mailing Address 3644 Old Canton Rd		
City, State, Zip Code Jackson, MS 39216-3313		
Name of Employer (Required) Copeland, Cook, Taylor & Bush		
Occupation (Required) Attorney	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Reilly Morse	06/27/2023	\$250.00
Mailing Address 929 Bridge St		
City, State, Zip Code Gulfport, MS 39507-3432		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny Sneed	06/28/2023	\$1,000.00
Mailing Address 4303 Ambrose Ave		
City, State, Zip Code Los Angeles, CA 90027-2112		
Name of Employer (Required) Self Employed		
Occupation (Required) Actor	Aggregate year-to-date	\$1,250.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Taylor	06/30/2023	\$250.00
Mailing Address 437 New York Ave NW		
City, State, Zip Code Washington, DC 20001-4761		
Name of Employer (Required) White Oak Road, LLC		
Occupation (Required) Principal	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George Schimmel	06/03/2023	\$1,250.00
Mailing Address 3630 Kings Hwy		
City, State, Zip Code Jackson, MS 39216-3321		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$8,850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name E. K. Pruitt	06/13/2023	\$25.00
Mailing Address 4217 Oakridge Dr		
City, State, Zip Code Jackson, MS 39216-3420		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Reed Hillen	06/24/2023	\$250.00
Mailing Address 2595 Mount Vernon Rd		
City, State, Zip Code Tupelo, MS 38804-7102		
Name of Employer (Required) Hillen, Wicker & Tapscott, P.A.		
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Howard 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald Scott	06/27/2023	\$250.00
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	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Watt Bishop	06/28/2023	\$100.00
Mailing Address 714 N 14th St		
City, State, Zip Code Oxford, MS 38655-3222		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Roberts Mailing Address 709 Northdale Pl City, State, Zip Code Brandon, MS 39047-5110 Name of Employer (Required) Not Employed	06/28/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sammy Fowler Mailing Address 282 Main St City, State, Zip Code Nettleton, MS 38858-6012 Name of Employer (Required) US Steel	06/20/2023	\$500.00
Occupation (Required) Construction	Aggregate year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Viva Wilson Mailing Address 140 Hampton Rdg City, State, Zip Code Madison, MS 39110-4538 Name of Employer (Required) Not Employed	06/03/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Raymond Mailing Address 3915 Saint Charles Ave City, State, Zip Code New Orleans, LA 70115-4659 Name of Employer (Required) Not Employed	06/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,275.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lavora C. Blake Mailing Address PO Box 27 City, State, Zip Code Waterford, MS 38685-0027 Name of Employer (Required) myEcon Inc	06/29/2023	\$240.00
Occupation (Required) Executive Vice President	Aggregate year-to-date	\$240.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Cocke Mailing Address 2 Oak Knoll Dr City, State, Zip Code Clarksdale, MS 38614-1951 Name of Employer (Required) Not Employed	06/21/2023	\$3,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Benvenutti Mailing Address PO Box 2639 City, State, Zip Code Bay Saint Louis, MS 39521-2639 Name of Employer (Required) AVL CPA Firm	06/14/2023	\$250.00
Occupation (Required) Accountant	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Lynch Mailing Address 617 Camelia Trl City, State, Zip Code Brandon, MS 39047-6316 Name of Employer (Required) Not Employed	06/24/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$425.00

Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeff Richardson Mailing Address 115 Bristol Ln City, State, Zip Code Madison, MS 39110-5021 Name of Employer (Required) Energysolutions	06/24/2023	\$500.00
Occupation (Required) Executive	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carrol H. Ingram Mailing Address PO Box 15039 City, State, Zip Code Hattiesburg, MS 39404-5039 Name of Employer (Required) Not Employed	06/06/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tomie Green Mailing Address 114 Pine Island Dr City, State, Zip Code Jackson, MS 39206-3234 Name of Employer (Required) US Dept of State	06/07/2023	\$10.00
Occupation (Required) Attorney	Aggregate year-to-date	\$245.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stefan Massong Mailing Address 307 Wisteria St City, State, Zip Code Ocean Springs, MS 39564-2840 Name of Employer (Required) Self Employed	06/27/2023	\$100.00
Occupation (Required) Psychologist	Aggregate year-to-date	\$600.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Benjamin Griffith	06/22/2023	\$100.00
Mailing Address 162 Oxford Creek Dr		
City, State, Zip Code Oxford, MS 38655-2242		
Name of Employer (Required) Griffith Law Firm		
Occupation (Required) Attorney	Aggregate year-to-date	\$425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Jackson	06/14/2023	\$100.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$793.00



Reporting Period 6/1/2023 through 6/30/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Buchanan	06/25/2023	\$30.00
Mailing Address 155 Bryant St		
City, State, Zip Code Palo Alto, CA 94301-1104		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$564.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alicia Margolis	06/08/2023	\$100.00
Mailing Address 1474 Dover Rd		
City, State, Zip Code Benton, MS 39040-9162		
Name of Employer (Required) Bradley Arant Boult Cummings LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilson Golden	06/30/2023	\$100.00
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

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Danny 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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) Not Employed	Aggregate year-to-date	\$985.00

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Pinkard	06/25/2023	\$250.00
Mailing Address 403 Brickworks Cir NE		
City, State, Zip Code Atlanta, GA 30307-5515		
Name of Employer (Required) Coca-Cola		
Occupation (Required) Marketing Strategy	Aggregate year-to-date	\$844.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melvin Hawthorne	06/26/2023	\$300.00
Mailing Address PO Box 131		
City, State, Zip Code Vaiden, MS 39176-0131		
Name of Employer (Required) Self Employed		
Occupation (Required) Enrolled Tax Agent	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marilyn Vandemark	06/17/2023	\$100.00
Mailing Address 412 Highpoint Dr		
City, State, Zip Code Diamondhead, MS 39525-3719		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Patrick Kennedy	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	\$5,000.00

Name of Candidate or Committee Brandon PresleyReporting 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 Comfort Inn	Date (Mo., Day, Year)	Amount of each 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) Travel	Aggregate year-to-date	\$473.27
Full Name Lexis Nexis	Date (Mo., Day, Year)	Amount of each 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) Software Subscription	Aggregate year-to-date	\$1,469.68
Full Name Numero	Date (Mo., Day, Year)	Amount of each 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) Credit Card Processing	Aggregate year-to-date	\$35,305.46
Full Name Hampton Inn	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	06/22/2023	\$178.08
City, State, Zip Code ,		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$725.64
Full Name Jada Barnes	Date (Mo., Day, Year)	Amount of each 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) Salary	Aggregate year-to-date	\$970.98

Name of Candidate or Committee Brandon PresleyReporting 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
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	
Shipping & Postage	year-to-date	\$293.40
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	
Salary	year-to-date	\$17,184.43
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	
Credit Card Processing	year-to-date	\$35,305.46
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	
Office Supplies	year-to-date	\$520.04
Full Name	Date	Amount of each
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	
Salary	year-to-date	\$4,198.34

Name of Candidate or Committee Brandon PresleyReporting 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 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 Tampa, FL 33607-1723		
Purpose of Disbursement (Optional) Payroll Fees	Aggregate 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) Salary	Aggregate year-to-date	\$10,607.47
Full Name Mississippi Public Service Commission	Date (Mo., Day, Year)	Amount of each 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) Public Records Request	Aggregate year-to-date	\$483.01
Full Name Juneteenth Tupelo	Date (Mo., Day, Year)	Amount of each 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) Event Sponsorship	Aggregate year-to-date	\$300.00
Full Name Payroll Data Processing	Date (Mo., Day, Year)	Amount of each 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) Payroll Fees	Aggregate year-to-date	\$96,972.07

Name of Candidate or Committee Brandon PresleyReporting 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
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	06/28/2023	\$211.90
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	
Credit Card Processing	year-to-date	\$35,305.46
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	
Event Parking	year-to-date	\$1,380.00
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	
Credit Card Processing	year-to-date	\$35,305.46
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	
Travel	year-to-date	\$545.74
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		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate	
Credit Card Processing	year-to-date	\$14,522.78

Name of Candidate or Committee Brandon PresleyReporting 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
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	
Travel	year-to-date	\$473.27
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	
Printing of Campaign Materials	year-to-date	\$6,000.00
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	
Salary	year-to-date	\$18,805.82
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	
Travel	year-to-date	\$725.64
Full Name	Date	Amount of each
Número	(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	
Credit Card Processing	year-to-date	\$35,305.46



Name of Candidate or Committee Brandon PresleyReporting 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
Morgan Benjamin	(Mo., Day, Year)	disbursement this period
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	
Salary	year-to-date	\$1,812.30
Full Name	Date	Amount of each
Lowe's	(Mo., Day, Year)	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	
Office Supplies	year-to-date	\$1,173.41
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	
Salary	year-to-date	\$41,681.71
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	
Office Supplies	year-to-date	\$520.04
Full Name	Date	Amount of each
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	
Rent	year-to-date	\$4,500.00

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

Name of Candidate or Committee Brandon PresleyReporting 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 (Mo., Day, Year)	Amount of each disbursement this period
The Kroger Co.		
Mailing Address		
1014 Vine St	06/06/2023	\$73.28
City, State, Zip Code		
Cincinnati, OH 45202-1141		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,025.51
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Lowe's		
Mailing Address		
3354 N Gloster St	06/20/2023	\$368.73
City, State, Zip Code		
Tupelo, MS 38804-9704		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,173.41
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ethan Cox		
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 year-to-date	\$9,722.54
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hilton Hotels		
Mailing Address		
7930 Jones Branch Dr	06/14/2023	\$132.84
City, State, Zip Code		
McLean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,737.54
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Adam Beyer		
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 year-to-date	\$18,805.82
Salary		

Name of Candidate or Committee Brandon PresleyReporting 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 Shawn Patterson	Date (Mo., Day, Year) 06/01/2023	Amount of each disbursement this period \$2,974.48
Mailing Address 1160 1st St NE		
City, State, Zip Code Washington, DC 20002-4799		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$18,182.44
Full Name Jake Laves	Date (Mo., Day, Year) 06/15/2023	Amount of each disbursement this period \$2,974.48
Mailing Address 699 Nation Hills Dr		
City, State, Zip Code Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$18,610.56
Full Name Amalgamated Bank	Date (Mo., Day, Year) 06/26/2023	Amount of each disbursement this period \$91.25
Mailing Address 275 7th Ave		
City, State, Zip Code New York, NY 10001-6708		
Purpose of Disbursement (Optional) Bank Fee	Aggregate year-to-date	\$335.95
Full Name Walmart	Date (Mo., Day, Year) 06/26/2023	Amount of each disbursement this period \$4.55
Mailing Address 702 SW 8th St		
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$520.04
Full Name Michael Waller	Date (Mo., Day, Year) 06/15/2023	Amount of each disbursement this period \$2,081.03
Mailing Address 103 Redbud Dr		
City, State, Zip Code Hendersonville, TN 37075-3982		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$4,075.26

Name of Candidate or Committee Brandon PresleyReporting 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 (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services		
Mailing Address		
PO Box 382110	06/26/2023	\$2,152.23
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$14,522.78
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	06/16/2023	\$45.00
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$967.96
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
IP Casino Resort & Spa		
Mailing Address		
850 Bayview Ave	06/07/2023	\$95.19
City, State, Zip Code		
Biloxi, MS 39530-1701		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$945.35
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services		
Mailing Address		
PO Box 382110	06/19/2023	\$567.50
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$14,522.78
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Woodmont Public Strategies, LLC		
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 year-to-date	\$20,709.72
Political Strategy Consultant		

Name of Candidate or Committee Brandon PresleyReporting 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 (Mo., Day, Year)	Amount of each disbursement this period
State Farm Insurance		
Mailing Address		
1 State Farm Plz	06/07/2023	\$102.52
City, State, Zip Code		
Bloomington, IL 61710-0001		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$512.60
Insurance		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Comfort Inn		
Mailing Address		
10750 Columbia Pike	06/15/2023	\$117.02
City, State, Zip Code		
Silver Spring, MD 20901-4402		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$473.27
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Courtyard by Marriott		
Mailing Address		
601 Baptist Dr	06/12/2023	\$191.53
City, State, Zip Code		
Madison, MS 39110-2003		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$590.05
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Aaron Facio-Cortes		
Mailing Address		
27006 Fordham Dr	06/01/2023	\$1,994.23
City, State, Zip Code		
Wesley Chapel, FL 33544-8730		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,162.06
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Law Office of Michael Winfield		
Mailing Address		
106 S President St	06/02/2023	\$1,500.00
City, State, Zip Code		
Jackson, MS 39201-3601		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,000.00
Rent		

Name of Candidate or Committee Brandon PresleyReporting 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
Hilton Hotels	(Mo., Day, Year)	disbursement this period
Mailing Address		
7930 Jones Branch Dr	06/14/2023	\$143.94
City, State, Zip Code		
McLean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate	
Travel	year-to-date	\$1,737.54
Full Name	Date	Amount of each
Greta Presley	(Mo., Day, Year)	disbursement this period
Mailing Address		
7054 Penbrook Dr	06/01/2023	\$1,994.23
City, State, Zip Code		
Franklin, TN 37069-8407		
Purpose of Disbursement (Optional)	Aggregate	
Salary	year-to-date	\$4,198.34
Full Name	Date	Amount of each
Abby O'Keefe	(Mo., Day, Year)	disbursement this period
Mailing Address		
1404 Highland Valley Cir	06/15/2023	\$2,811.60
City, State, Zip Code		
Wildwood, MO 63005-4259		
Purpose of Disbursement (Optional)	Aggregate	
Salary	year-to-date	\$17,184.43
Full Name	Date	Amount of each
Walmart	(Mo., Day, Year)	disbursement this period
Mailing Address		
702 SW 8th St	06/28/2023	\$23.76
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate	
Office Supplies	year-to-date	\$520.04
Full Name	Date	Amount of each
Shell Oil Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 2463	06/20/2023	\$69.21
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate	
Travel	year-to-date	\$967.96

Name of Candidate or Committee Brandon PresleyReporting 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 Felicia Yearwood	Date (Mo., Day, Year)	Amount of each 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) Salary	Aggregate year-to-date	\$4,118.66
Full Name IP Casino Resort & Spa	Date (Mo., Day, Year)	Amount of each 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) Travel	Aggregate year-to-date	\$945.35
Full Name Living Free Ministries	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2024 US-72	06/21/2023	\$250.00
City, State, Zip Code Corinth, MS 38834		
Purpose of Disbursement (Optional) Event Sponsorship	Aggregate year-to-date	\$250.00
Full Name NGP VAN	Date (Mo., Day, Year)	Amount of each 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) Database Services	Aggregate year-to-date	\$10,225.32
Full Name Begley Law Firm	Date (Mo., Day, Year)	Amount of each 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) Legal Services	Aggregate year-to-date	\$14,087.50



Name of Candidate or Committee Brandon PresleyReporting 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 (Mo., Day, Year)	Amount of each disbursement this period
Chevron Stations		
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 year-to-date	\$395.26
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services		
Mailing Address		
PO Box 382110	06/05/2023	\$617.59
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$14,522.78
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Declaration Media Group		
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 year-to-date	\$99,720.51
Video Production		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Courtyard by Marriott		
Mailing Address		
601 Baptist Dr	06/30/2023	\$132.84
City, State, Zip Code		
Madison, MS 39110-2003		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$590.05
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shinitra Russell		
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 year-to-date	\$9,395.44
Salary		

Name of Candidate or Committee Brandon PresleyReporting 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 (Mo., Day, Year)	Amount of each disbursement this period
Fastlane Gas Stations		
Mailing Address		
320 W Government St	06/20/2023	\$158.71
City, State, Zip Code		
Brandon, MS 39042-3146		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$292.71
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Benjamin Hunt		
Mailing Address		
510 S Broadway St	06/01/2023	\$2,167.10
City, State, Zip Code		
Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$11,297.25
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Lowe's		
Mailing Address		
3354 N Gloster St	06/23/2023	\$312.05
City, State, Zip Code		
Tupelo, MS 38804-9704		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,173.41
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hilton Hotels		
Mailing Address		
7930 Jones Branch Dr	06/14/2023	\$156.38
City, State, Zip Code		
McLean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,737.54
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Alexis Carraway		
Mailing Address		
106 Roberts Cv	06/15/2023	\$805.18
City, State, Zip Code		
Starkville, MS 39759-6628		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$805.18
Salary		

Name of Candidate or Committee Brandon PresleyReporting 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 (Mo., Day, Year)	Amount of each disbursement this period
Angelo Ruiz		
Mailing Address		
127 S Roach St	06/01/2023	\$1,994.23
City, State, Zip Code		
Jackson, MS 39201-2916		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,118.66
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Magnolia Ink LLC		
Mailing Address		
1223 Jackson Ave E	06/01/2023	\$5,855.58
City, State, Zip Code		
Oxford, MS 38655-4001		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,855.58
Printing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ron Owens		
Mailing Address		
3545 Mitchell Rd	06/15/2023	\$3,935.75
City, State, Zip Code		
Tupelo, MS 38801-9616		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$41,681.71
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	06/29/2023	\$118.89
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$520.04
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	06/21/2023	\$71.46
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$967.96
Travel		

Name of Candidate or Committee Brandon PresleyReporting 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 (Mo., Day, Year)	Amount of each disbursement this period
Avid Hotel		
Mailing Address		
3 Ravinia Dr	06/28/2023	\$6.50
City, State, Zip Code		
Atlanta, GA 30346-2121		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$545.74
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chevron Stations		
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 year-to-date	\$395.26
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stripe		
Mailing Address		
3180 18th St	06/23/2023	\$9.23
City, State, Zip Code		
San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$482.29
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Battleaxe Digital		
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 year-to-date	\$69,662.52
Digital Consulting		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Issac Lampner		
Mailing Address		
	06/16/2023	\$7,120.43
City, State, Zip Code		
Tupelo, MS 38804		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$32,769.58
Reimbursement - Travel, Supplies, Postage		

Name of Candidate or Committee Brandon PresleyReporting 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
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	
Travel	year-to-date	\$590.05
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	
Software Subscription	year-to-date	\$1,469.68
Full Name	Date	Amount of each
Benjamin Hunt	(Mo., Day, Year)	disbursement this period
Mailing Address		
510 S Broadway St	06/01/2023	\$461.75
City, State, Zip Code		
Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional)	Aggregate	
Salary	year-to-date	\$11,297.25
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	
Salary	year-to-date	\$9,722.54
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	
Travel	year-to-date	\$1,737.54

Name of Candidate or Committee Brandon PresleyReporting 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 Jacob Smith	Date (Mo., Day, Year)	Amount of each 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) Salary	Aggregate year-to-date	\$10,607.47
Full Name Shawn Patterson	Date (Mo., Day, Year)	Amount of each 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) Salary	Aggregate year-to-date	\$18,182.44
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each 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) Travel	Aggregate year-to-date	\$967.96
Full Name Jefferson Stevens, LLC	Date (Mo., Day, Year)	Amount of each 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) Political Strategy Consultant	Aggregate year-to-date	\$18,945.56
Full Name 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 Mountain View, CA 94043-1351		
Purpose of Disbursement (Optional) Web Hosting	Aggregate year-to-date	\$456.49

Name of Candidate or Committee Brandon PresleyReporting 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
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	06/23/2023	\$412.90
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	
Credit Card Processing	year-to-date	\$35,305.46
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	
Travel	year-to-date	\$545.74
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	
Credit Card Processing	year-to-date	\$482.29
Full Name	Date	Amount of each
Stripe	(Mo., Day, Year)	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	Date	Amount of each
Battleaxe Digital	(Mo., Day, Year)	disbursement this period
Mailing Address		
1405 Florida Ave NW	06/20/2023	\$4,752.60
City, State, Zip Code		
Washington, DC 20009-5801		
Purpose of Disbursement (Optional)	Aggregate	
Digital Consulting	year-to-date	\$69,662.52

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



Name of Candidate or Committee Brandon PresleyReporting 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 (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services		
Mailing Address		
PO Box 382110	06/01/2023	\$185.27
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$14,522.78
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Aaron Facio-Cortes		
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 year-to-date	\$4,162.06
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hilton Hotels		
Mailing Address		
7930 Jones Branch Dr	06/26/2023	\$196.11
City, State, Zip Code		
McLean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,737.54
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shalonda Spencer		
Mailing Address		
1509 Hawthorne Pl	06/01/2023	\$2,811.60
City, State, Zip Code		
Clinton, MS 39056-3910		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$15,545.07
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Greta Presley		
Mailing Address		
7054 Penbrook Dr	06/15/2023	\$1,994.23
City, State, Zip Code		
Franklin, TN 37069-8407		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,198.34
Salary		

Name of Candidate or Committee Brandon PresleyReporting 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 (Mo., Day, Year)	Amount of each disbursement this period
Huffman & Rejebian		
Mailing Address		
PO Box 1180	06/26/2023	\$12,500.00
City, State, Zip Code		
Jackson, MS 39215-1180		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$25,000.00
Research Consulting		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	06/26/2023	\$49.55
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$967.96
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
KMM Consulting		
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 year-to-date	\$48,274.44
Fundraising Consulting		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chevron Stations		
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 year-to-date	\$395.26
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stripe		
Mailing Address		
3180 18th St	06/05/2023	\$7.00
City, State, Zip Code		
San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$482.29
Credit Card Processing		

Name of Candidate or Committee Brandon PresleyReporting 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
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	06/01/2023	\$125.07
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	
Credit Card Processing	year-to-date	\$35,305.46
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	
Office Supplies	year-to-date	\$1,182.01
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	
Digital Fundraising	year-to-date	\$21,928.91
Full Name	Date	Amount of each
Court Square Inn	(Mo., Day, Year)	disbursement this period
Mailing Address		
132 E College Ave	06/14/2023	\$321.00
City, State, Zip Code		
Holly Springs, MS 38635-3022		
Purpose of Disbursement (Optional)	Aggregate	
Event Space Rental	year-to-date	\$321.00
Full Name	Date	Amount of each
Doubletree	(Mo., Day, Year)	disbursement this period
Mailing Address		
300 Canal St	06/12/2023	\$151.90
City, State, Zip Code		
New Orleans, LA 70130-1104		
Purpose of Disbursement (Optional)	Aggregate	
Travel	year-to-date	\$357.78

Name of Candidate or Committee Brandon PresleyReporting 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
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	
Shipping & Postage	year-to-date	\$293.40
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	
Credit Card Processing	year-to-date	\$35,305.46
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	
Office Supplies	year-to-date	\$1,173.41
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	
Salary	year-to-date	\$4,198.34
Full Name	Date	Amount of each
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	
Salary	year-to-date	\$11,297.25

Name of Candidate or Committee Brandon PresleyReporting 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
Hilton Hotels	(Mo., Day, Year)	disbursement this period
Mailing Address		
7930 Jones Branch Dr	06/26/2023	\$216.88
City, State, Zip Code		
McLean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate	
Travel	year-to-date	\$1,737.54
Full Name	Date	Amount of each
Michael Waller	(Mo., Day, Year)	disbursement this period
Mailing Address		
103 Redbud Dr	06/01/2023	\$1,994.23
City, State, Zip Code		
Hendersonville, TN 37075-3982		
Purpose of Disbursement (Optional)	Aggregate	
Salary	year-to-date	\$4,075.26
Full Name	Date	Amount of each
Mark Rennie	(Mo., Day, Year)	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	
Salary	year-to-date	\$988.86
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	
Travel	year-to-date	\$967.96
Full Name	Date	Amount of each
Número	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	06/27/2023	\$339.03
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	
Credit Card Processing	year-to-date	\$35,305.46

Name of Candidate or Committee Brandon PresleyReporting 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 (Mo., Day, Year)	Amount of each disbursement this period
Cracker Barrel		
Mailing Address		
15255 Crossroads Pkwy	06/07/2023	\$213.32
City, State, Zip Code		
Gulfport, MS 39503-3570		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$213.32
Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Avid Hotel		
Mailing Address		
3 Ravinia Dr	06/29/2023	\$134.81
City, State, Zip Code		
Atlanta, GA 30346-2121		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$545.74
travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chevron Stations		
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 year-to-date	\$395.26
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Comfort Inn		
Mailing Address		
10750 Columbia Pike	06/15/2023	\$105.33
City, State, Zip Code		
Silver Spring, MD 20901-4402		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$473.27
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
United States Postal Service		
Mailing Address		
475 Lenfant Plz SW	06/21/2023	\$28.75
City, State, Zip Code		
Washington, DC 20260-0004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$293.40
Shipping & Postage		

Name of Candidate or Committee Brandon PresleyReporting 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
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	
Travel	year-to-date	\$357.78
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	
Salary	year-to-date	\$32,769.58
Full Name	Date	Amount of each
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	
Travel	year-to-date	\$945.35
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	
Salary	year-to-date	\$7,052.94
Full Name	Date	Amount of each
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		
Purpose of Disbursement (Optional)	Aggregate	
Salary	year-to-date	\$4,118.66

Name of Candidate or Committee Brandon PresleyReporting 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
Angelo Ruiz	(Mo., Day, Year)	disbursement this period
Mailing Address		
127 S Roach St	06/15/2023	\$2,124.43
City, State, Zip Code		
Jackson, MS 39201-2916		
Purpose of Disbursement (Optional)	Aggregate	
Salary	year-to-date	\$4,118.66
Full Name	Date	Amount of each
Service Printing Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
1110 Emory Folmar Blvd	06/22/2023	\$13,905.00
City, State, Zip Code		
Montgomery, AL 36110-3228		
Purpose of Disbursement (Optional)	Aggregate	
Printing of Campaign Materials	year-to-date	\$13,905.00
Full Name	Date	Amount of each
Payroll Data Processing	(Mo., Day, Year)	disbursement this period
Mailing Address		
3501 E Frontage Rd	06/15/2023	\$20,281.35
City, State, Zip Code		
Tampa, FL 33607-1723		
Purpose of Disbursement (Optional)	Aggregate	
Payroll Taxes	year-to-date	\$96,972.07
Full Name	Date	Amount of each
Shell Oil Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 2463	06/28/2023	\$37.14
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate	
Travel	year-to-date	\$967.96
Full Name	Date	Amount of each
The Markham Group LLC	(Mo., Day, Year)	disbursement this period
Mailing Address		
8927 Lorraine Rd	06/06/2023	\$519.75
City, State, Zip Code		
Gulfport, MS 39503-5053		
Purpose of Disbursement (Optional)	Aggregate	
Event Sponsorship	year-to-date	\$519.75



Name of Candidate or Committee Brandon PresleyReporting 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 (Mo., Day, Year)	Amount of each disbursement this period
Martin Daniel Crump		
Mailing Address		
2601 14th St	06/07/2023	\$2,500.00
City, State, Zip Code		
Gulfport, MS 39501-1926		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,000.00
Contribution Refund		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Adam Beyer		
Mailing Address		
4288 N Gloster St	06/05/2023	\$622.62
City, State, Zip Code		
Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$18,805.82
Reimbursement - Travel, Subscriptions, Printing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Debra B. Young		
Mailing Address		
27 County Road 3024	06/14/2023	\$250.00
City, State, Zip Code		
Oxford, MS 38655-9786		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$250.00
Contribution Refund		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero		
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 year-to-date	\$35,305.46
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero		
Mailing Address		
200 Spectrum Center Dr	06/12/2023	\$541.64
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$35,305.46
Credit Card Processing		

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

Name of Candidate or Committee Brandon PresleyReporting 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
Lowe 's	(Mo., Day, Year)	disbursement this period
Mailing Address		
3354 N Gloster St	06/30/2023	\$42.74
City, State, Zip Code		
Tupelo, MS 38804-9704		
Purpose of Disbursement (Optional)	Aggregate	
Office Supplies	year-to-date	\$1,173.41
Full Name	Date	Amount of each
Jake Laves	(Mo., Day, Year)	disbursement this period
Mailing Address		
699 Nation Hills Dr	06/01/2023	\$2,974.48
City, State, Zip Code		
Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional)	Aggregate	
Salary	year-to-date	\$18,610.56
Full Name	Date	Amount of each
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	
Travel	year-to-date	\$945.35
Full Name	Date	Amount of each
Jaquann King	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 758	06/15/2023	\$988.86
City, State, Zip Code		
Fayette, MS 39069-0758		
Purpose of Disbursement (Optional)	Aggregate	
Salary	year-to-date	\$988.86
Full Name	Date	Amount of each
Payroll Data Processing	(Mo., Day, Year)	disbursement this period
Mailing Address		
3501 E Frontage Rd	06/01/2023	\$17,053.74
City, State, Zip Code		
Tampa, FL 33607-1723		
Purpose of Disbursement (Optional)	Aggregate	
Payroll Taxes	year-to-date	\$96,972.07

Name of Candidate or Committee Brandon PresleyReporting 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 (Mo., Day, Year)	Amount of each disbursement this period
Acme Investment Company		
Mailing Address		
2032 Tidewater Ln	06/13/2023	\$500.00
City, State, Zip Code		
Madison, MS 39110-8981		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$500.00
Rent		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shinitra Russell		
Mailing Address		
1185 Collier Rd NW	06/15/2023	\$65.00
City, State, Zip Code		
Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$9,395.44
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Martin Daniel Crump		
Mailing Address		
2601 14th St	06/21/2023	\$2,500.00
City, State, Zip Code		
Gulfport, MS 39501-1926		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,000.00
Contribution Refund		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Avid Hotel		
Mailing Address		
3 Ravinia Dr	06/29/2023	\$134.81
City, State, Zip Code		
Atlanta, GA 30346-2121		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$545.74
Travel		