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Name of Candidate Sugar Stallings	
Address P.O. DOX 1001 City/Zip	39533
Telephone (Work) 9 9 8 - 938 - 559/(Home) (Fax)	
Contact Name Sugan Stallings Email Address Sugan Stalli	ngs Radio Showogmail. Con
Office Sought Public Service Commission Blitical Party (if any) De MOC	
Check here if above is different from previous report	
TYPE OF REPORT	
May 10, 2019 Periodic Report (January 1, 2019 through April 30, 2019)	Mandatory
June 10, 2019 Periodic Report (May 1, 2019 through May 31, 2019)	Mandatory
July 10, 2019 Periodic Report (June 1, 2019 through June 30, 2019)	Mandatory
July 30, 2019 Primary Pre-Election Report (July 1, 2019 through July 27, 2019)	Mandatory
August 20, 2019 Primary Pre-Runoff Report (July 28, 2019 through August 17, 2019)	Runoff Candidates Only
October 10, 2019 Periodic Report (July 1, 2019 through September 30, 2019)	Mandatory
October 29, 2019 Pre-Election Report (October 1, 2019 through October 26, 2019)	Mandatory
November 19, 2019 Pre-Runoff Report (October 27, 2019 through November 16, 2019)	Runoff Candidates Only
January 10, 2020 Periodic Report (October 1, 2019 through December 31, 2019)	Mandatory
Termination Report (Committee will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation and zero cas hand balance)	Required to terminate sh on reporting obligations
IMPORTANT	
(1) All candidates for office shall file periodic reports in the year in which they are to b	e 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 those "personal use" expenditures which are specifically prohibited from campaign contributions and those disbursements which are not defined as "personal use" and therefore permissible from campaign contributions. Campaign contributions accepted and held prior to Jan. 1, 2018 ARE NOT subject to the "personal use" restrictions of Section 23-15-821, Miss. Code Ann. Beginning on Jan. 1, 2018, campaign contributions accepted and accumulated therefrom ARE subject to the "personal use"

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- restrictions of Section 2-15-821, Miss. Code Ann. Separate record keeping and reporting is required for candidates and officeholders for any campaign contributions held prior to Jan. 1, 2018, disbursements made therefrom and contributions earned thereon in the form of interest or dividends.
- (5) The receiving office must be in actual receipt of the required reports by 5:00 p.m. on the deadline. 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, 2019 CASH ON HAND BALAN	CE			\$ O
Baltimore policy light to the office that is	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS ¹	\$	8	\$	\$ O
TOTAL AMT OF DISBURSEMENTS	\$	 \$	[\$]	\$ Q
CASH ON HAND BALANCE	4 Tq.	Vinle J. H. J. J. J.		\$ O

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

JAN. 1, 2019 CASH ON HAND BALAN	YCE			\$ 1500.00
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$1500.00	\$	\$	\$ 1500.00
TOTAL AMT OF DISBURSEMENTS	\$ 1000.00	[]\$	S	\$ 1000.00
CASH ON HAND BALANCE				\$ 500.00

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

Signature of Candidate Date

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

Penalties: A candidate who fails to file, or fails to timely file, required reports in accordance with the statutory deadline cannot be certified as elected to office unless and until he files all reports due as of the date of certification. No candidate who is elected to office shall receive any salary or other remuneration for the office unless and until he files all reports required by statute. Failure to 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 Office file this Report with the Secretary of State to 401 Mississippi Street, Jackson, MS; P. O. Box 136, Jackson, MS 39205; fax (601) 576-2545; or email <u>CampaignFinance@sos.ms.gov</u>.

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

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

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		Elect Sugar Stalling
Reporting period JANUARY 1, 2019 through Ap		8019
ITEMIZED DISBURSE	MENTS	3
Disbursements from contributions accumulated Prior to January 1, 2	2018 or 🔯 On or	After January 1, 2018
A. Full name Vernor Mangum	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P. O. BOX 1001	3 1 10 1 8019	\$ 500.00
Bilaxi MS 39533	_'_'_	\$
Purpose of Disbursement (Optional) filing fee & Campaign Start-up	Aggregate Year-to-date	\$ 500,00
B. Full name B. A. V. day Naal Bidger	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 989 /ete BANS AVE	3 1 1518/019	\$ 500.00
City, State, Zip Code Bilox I, MS 39531	_'_'_	\$
Purpose of Disbursement (Optional) OampaigNitemS	Aggregate Year-to-date	\$ 500.00
C. Full name	Date (Mo., Day, Year)	Amount of each
Mailing Address	_/_/_	\$
City, State, Zip Code	//_	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	_'_'_	\$
City, State, Zip Code		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Malling Address	_'_'_	S
City, State, Zip Code		s
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Malling Address		\$
City, State, Zip Code		S
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

Sugar Stallings/Committee to Elect Sugar Stalling.

1,8019 through April 30, 8019

MIZED DECETED Name of Candidate or Committee Reporting period _ JANUARY Amount of each Corporation () PAC (X) Individual A. Source: Date receipt (Mo., Day, Year) this period Other (please specify) Full name 2019 1000,00 RNON **Mailing Address** City, State, Zip Code Name of Employer (Required) Occupation (Required) Aggregate 1000,00 military year-to-date Amount of each Midividual B. Source: Corporation Date receipt (Mo., Day, Year) this period Other (please specify) Full name 15 1 8019 500,00 Mailing Address City, State, Zip Code \$ Name of Employer (Required Occupation (Required) Aggregate 500.00 year-to-date Individual Amount of each C. Source: Corporation Date receipt (Mo., Day, Year) this period) Other (please specify) Full name \$ Mailing Address \$ City, State, Zip Code Name of Employer (Required) \$ Occupation (Required) Aggregate year-to-date D. Source: Corporation PAC) Individual Amount of each)Loan Date receipt (Mo., Day, Year) Other (please specify) this period Full name \$ Mailing Address \$ City, State, Zip Code \$ Name of Employer (Required) \$ Occupation (Required) \$ Aggregate year-to-date

Date: 3/1/80/9	RECEIPT No
Amount Received: \$ 1000.00	
For: Filing Fee &	Campaign Stant-up Stallings
Money Received by: 34931	3 Stallings
4.00	RECEIPT No
Date: 3/15/19 Amount Received: \$ 500.00	RECEIPT NO.
Amount Received: \$ 500.00	[] Cash
	Check, No
For Campaign it	e m S
Money Received by: 54924	Stallings
Date:	RECEIPT No.
Amount Received: \$	_ [] Cash
-	[] Check, No
For:	