

Political Committee  
REPORT OF RECEIPTS AND DISBURSEMENTS  
2023 Election

Michael Watson  
SECRETARY OF STATE

Ref No: CF202330163

Date Filed: 6/9/2023

Michael Watson

Secretary of State

**RECEIVED**

By Secretary of State Elections Division at 10:01 am, Jun 09, 2023

Name of Committee Committee to Elect Robert Bradford  
 Address 242 PO Box City/State/Zip Natchez MS 39120  
 Telephone 601.660.2898 Fax n/a  
 Treasurer Corvet Mcneal Email Address bradforag2024@yahoo.com

☐ Check here if above is different from previous report

**TYPE OF REPORT**

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

**IMPORTANT**

- (1) Political Committees which accept contributions and/or make expenditures for the purpose of influencing or attempting to influence the action of voters for or against any candidate regularly elected in 2023 are required to file periodic, pre-election and annual reports until the filing of a Termination Report.
- (2) 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

JAN. 1, 2023 CASH ON HAND BALANCE				\$1852.82
	Itemized (+)	Non-Itemized (=)	This Per	Date
TOTAL AMT OF CONTRIBUTIONS	\$365	\$1692.93	\$2057.93	
TOTAL AMT OF DISBURSEMENTS	\$1113.37	\$0	\$1113.37	
CASH ON HAND BALANCE				\$2401.84

Ref No: CF202330163

Date Filed: 6/9/2023

Michael Watson

Secretary of State

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

Signature of Director or Treasurer

Date

6/9/2023

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

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

Send to: Political Committees supporting or opposing Statewide, State District or Legislative candidates file this form with the Secretary of State: hand delivered to 401 Mississippi Street, Jackson, MS; mailed to P. O. Box 136, Jackson, MS 39205; faxed to (601) 576-2545; or emailed to [CampaignFinance@sos.ms.gov](mailto:CampaignFinance@sos.ms.gov). Political Committees supporting or opposing county and/or county district candidates file this form with the Circuit Clerk's Office.

Name of Candidate or Committee Committee to Elect Robert Bradford Page      of       
Reporting period May 1, 2023 through May 31, 2023

Ref No: CF202330163

Date Filed: 6/9/2023

Michael Watson  
Secretary of State

## ITEMIZED RECEIPTS

A. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	this period
Full name <u>Robert Bradford</u>	<u>5/5/23</u>	\$ <u>365.00</u>
Mailing Address <u>59 Seals Road</u>	<u>    </u> / <u>    </u> / <u>    </u>	\$
City, State, Zip Code <u>Natchez MS 39120</u>	<u>    </u> / <u>    </u> / <u>    </u>	\$
Name of Employer (Required)	<u>    </u> / <u>    </u> / <u>    </u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>365.00</u>
B. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>    </u> / <u>    </u> / <u>    </u>	\$
Mailing Address	<u>    </u> / <u>    </u> / <u>    </u>	\$
City, State, Zip Code	<u>    </u> / <u>    </u> / <u>    </u>	\$
Name of Employer (Required)	<u>    </u> / <u>    </u> / <u>    </u>	\$
Occupation (Required)	Aggregate year-to-date	\$
C. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>    </u> / <u>    </u> / <u>    </u>	\$
Mailing Address	<u>    </u> / <u>    </u> / <u>    </u>	\$
City, State, Zip Code	<u>    </u> / <u>    </u> / <u>    </u>	\$
Name of Employer (Required)	<u>    </u> / <u>    </u> / <u>    </u>	\$
Occupation (Required)	Aggregate year-to-date	\$
D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>    </u> / <u>    </u> / <u>    </u>	\$
Mailing Address	<u>    </u> / <u>    </u> / <u>    </u>	\$
City, State, Zip Code	<u>    </u> / <u>    </u> / <u>    </u>	\$
Name of Employer (Required)	<u>    </u> / <u>    </u> / <u>    </u>	\$
Occupation (Required)	Aggregate year-to-date	\$

Name of Candidate or Committee Committee to Elect Robert Bradford Page        of         
 Reporting period May 1, 2023 through May 31, 2023

Ref No: CF202330163

Date Filed: 6/9/2023

Michael Watson

Secretary of State

# ITEMIZED DISBURSEMENT

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

A. Full name <u>Lazarus Arts</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>55 Sgt Pretiss Drive</u>		<u>5/3/23</u>	\$ <u>418.37</u>
City, State, Zip Code <u>Natchez MS 39120</u>		<u>   </u> / <u>   </u> / <u>   </u>	\$
Purpose of Disbursement (Optional) <u>T-shirts</u>		Aggregate Year-to-date	\$ <u>418.37</u>
B. Full name <u>Southern Signs</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>406 Liberty Road</u>		<u>5/22/23</u>	\$ <u>695.00</u>
City, State, Zip Code <u>Natchez MS 39120</u>		<u>   </u> / <u>   </u> / <u>   </u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ <u>695.00</u>
C. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u>   </u> / <u>   </u> / <u>   </u>	\$
City, State, Zip Code		<u>   </u> / <u>   </u> / <u>   </u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
D. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u>   </u> / <u>   </u> / <u>   </u>	\$
City, State, Zip Code		<u>   </u> / <u>   </u> / <u>   </u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
E. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u>   </u> / <u>   </u> / <u>   </u>	\$
City, State, Zip Code		<u>   </u> / <u>   </u> / <u>   </u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
F. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u>   </u> / <u>   </u> / <u>   </u>	\$
City, State, Zip Code		<u>   </u> / <u>   </u> / <u>   </u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$