## **RECEIVED**

By Secretary of State Elections Division at 4:09 pm, Aug 01, 2023

# Candidate REPORT OF RECEIPTS AND DISBURSEMENTS 2023 Election

DATE STAMP

Name of Candidate Brandon Presley			
Address PO Box 208	City/s	State/Zip Nettleton, MS 3	38858
Telephone (Work)	(Home) (202) 552-02	221 <b>(Fax)</b>	
Contact Name Rachel Headley	E	Email Address info@brando	onpresley.com
Office Sought	P	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			Mandatory
✓ Primary Pre-Election Report	( throu	ıgh <u>)</u>	Mandatory Mandatory
Primary Pre-Runoff Report (	throug	gh <u>)</u> R	unoff Candidates Only
October Periodic Report			Mandatory
Pre-Election Report (	through	)	Mandatory Mandatory
Pre-Runoff Report (	through	Ru	unoff Candidates Only
January Periodic Report			Mandatory
	ccept contributions, make ca ebt obligation and zero cash		Required to terminate reporting obligations
	IMPORTANT		
(1) All candidates for office shall file periodic re	ports in the year in whic	th they are to be elected.	
(2) Periodic Reports are mandatory, even if no shall submit a report indicating "0" (zero) fo period. Pre-Election Reports are mandatory  (3) Until a candidate files a Termination Report 15-807(b) (ii) and (iii)	r total amount of report if the candidate is oppo	ted contributions and/or expe osed.	enditures during this
(4) Beginning on Jan. 1, 2018, candidates and c 23-15-821, Miss. Code Ann., sets forth the campaign contributions and those disbu permissible from campaign contributions. C subject to the "personal use" restrictions campaign contributions accepted and accepted accepted and accepted accepted and accepted accepted accepted and accepted	se "personal use" expersements which are nampaign contributions as of section 23-15-821, umulated therefrom AR rate record keeping as ons held prior to Jan	enditures which are specificated to definted as "personal accepted and held prior to James. Code Ann. Beginning subject to the "personal and reporting is required for	ally prohibited from use" and therefore and 1, 2018 ARE NOT g on Jan. 1, 2018, use" restrictions of for candidates and

(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	\$1,059,968. 41	+	\$68,895.52	\$1,128,863.93	\$3,403,383.70
TOTAL AMT OF DISBURSEMENTS	\$1,463,505. 15	+	\$2,220.31	\$1,465,725.46	\$2,585,071.52
CASH ON HAND BALANCE					\$1,545,844.72

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	08/01/2023
Signature of Candidate	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 <a href="mailto:campaignFinance@sos.ms.gov">CampaignFinance@sos.ms.gov</a>

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

Name of Candidate or Committee Brandon Presley	Page_	3	_of _227_
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 Reporting Period
 7/1/2023
 through
 7/29/2023

Source:	Corporation Other (please speci	PAC Individ	ualLoan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Wat	con			07/14/2023	\$43.30
Mailing Addre					
•	7 Road 317				
City, State, Zi					
Oxford, M	IS 38655-5922				
Name of Emp	loyer (Required) oyed				
Occupation (F Retired	Required)			Aggregate year-to-date	\$1,043.30
Source:	Corporation	PAC Individ	ual Loan	Date	Amount of each
	Other (please speci	fy)		(Mo., Day, Year)	receipt this period
<b>Full Name</b> Jane Alex	kander			07/24/2023	\$100.00
Mailing Addre	ess orthside Dr				
City, State, Zi	p Code				
	MS 39211-6125				
Name of Emp Not Emplo	loyer (Required) oyed				
Occupation (F				Aggregate year-to-date	\$300.00
Source:	Corporation	PAC / Individ	ualLoan	Date	Amount of each
	•				
	Other (please speci			(Mo., Day, Year)	receipt this period
<b>Full Name</b> Barbara R	Other (please speci			(Mo., Day, Year) 07/24/2023	-
Barbara R	Other (please speci			_   ' ' '	period
Barbara R Mailing Addre PO Box 21	Other (please speci			_   ' ' '	period
Barbara R  Mailing Addre PO Box 21  City, State, Zi	Other (please speci			_   ' ' '	period
Mailing Addre PO Box 21 City, State, Zi Braxton, Name of Emp	Other (please special control			_   ' ' '	period
Mailing Address PO Box 21 City, State, Zig Braxton, Name of Emp Not Emplo Occupation (F	Other (please special control			_   ' ' '	period
Mailing Address PO Box 21 City, State, Zig Braxton, Name of Emp Not Emplo Occupation (F	Other (please special control		ual □Loan	Aggregate year-to-date  Date	\$25.00 \$675.00 Amount of each
Mailing Addre PO Box 21 City, State, Zi Braxton, Name of Emp Not Emplo Occupation (F	Other (please special control	fy)PAC	ual ∐Loan	Aggregate year-to-date	\$25.00 \$25.00 \$675.00
Mailing Addre PO Box 21 City, State, Zi Braxton, Name of Emp Not Emplo Occupation (F Not Emplo	Corporation  Other (please special content of the c	fy)PAC	ual □Loan	Aggregate year-to-date  Date	\$25.00 \$675.00 Amount of each receipt this
Mailing Addre PO Box 21 City, State, Zi Braxton, Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name Benjamin	Other (please special contents)  Rankin  Pass .9  p Code  MS 39044-0219  loyer (Required)  byed  Corporation  Other (please special contents)  Griffith  Pass	fy)PAC	ual	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$675.00 Amount of each receipt this period
Mailing Addre PO Box 21 City, State, Zi Braxton, Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name Benjamin Mailing Addre PO Box 22 City, State, Zi	Corporation Cariffith Cass Cankin Cass Cankin Cass Cankin Cass Cass Cass Cass Cass Cass Cass Cas	fy)PAC	ual	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$675.00 Amount of each receipt this period
Mailing Addre PO Box 21 City, State, Zi Braxton, Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name Benjamin Mailing Addre PO Box 22 City, State, Zi Oxford, M	Other (please special cankin c	fy)PAC	ual	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$675.00 Amount of each receipt this period
Mailing Addre PO Box 21 City, State, Zi Braxton, Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name Benjamin Mailing Addre PO Box 22 City, State, Zi Oxford, M Name of Emp	Cankin  Cankin	fy)PAC	ual	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$675.00 Amount of each receipt this period
Mailing Addres PO Box 21 City, State, Zi Braxton, Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name Benjamin Mailing Addres PO Box 22 City, State, Zi Oxford, M	Corporation Cariffith Cass Cankin Cass Cankin Cass Cankin Cass Cass Cass Cass Cass Cass Cass Cas	fy)PAC	ual	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$675.00 Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley	Page _	4	_ of

 Reporting Period
 7/1/2023
 through
 7/29/2023

## ITEMIZED RECEIPTS

Source:	Corporation Other (please spec	□PAC ✓ Indivi	dualLoan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Burt Ross	,			07/28/2023	\$500.00
Mailing Addre					
•	an Dume Rd				
City, State, Zi	•				
	CA 90265-4025				
Name of Emp	loyer (Required) oyed				
<b>Occupation (I</b> Retired	Required)			Aggregate year-to-date	\$500.00
Source:	Corporation	☐ PAC ✓ Indivi	dual Loan	Date	Amount of each
	Other (please spec	ify)		(Mo., Day, Year)	receipt this period
<b>Full Name</b> Laura McK	(erns			07/19/2023	\$25.00
Mailing Addre	ess				
813 42nd					
Culfport	<b>p Code</b> MS 39501-1451				
	loyer (Required)				
Not Emplo					
Occupation (I				Aggregate year-to-date	\$275.00
Not Emplo				-	A
Source:	Corporation	PAC Indivi	dualLoan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please spec	шту)			period
Full Name		<u> </u>		07/20/2023	\$10.00
Ann Smith	1	iry)		07/20/2023	<u>-</u>
	ess	<u> </u>		07/20/2023	<u>-</u>
Ann Smith  Mailing Addre	ess 865	<u> </u>		07/20/2023	<u>-</u>
Ann Smith  Mailing Addre  PO Box 18  City, State, Zi	ess 865	<u> </u>		07/20/2023	<u>-</u>
Ann Smith Mailing Addre PO Box 18 City, State, Zi Gulfport, Name of Emp	Pess 365 p Code MS 39502-1865 loyer (Required)	<u> </u>		07/20/2023	<u>-</u>
Ann Smith Mailing Addre PO Box 18 City, State, Zi Gulfport, Name of Emp	ess 865 p Code MS 39502-1865 loyer (Required)	<u> </u>			<u>-</u>
Ann Smith Mailing Addre PO Box 18 City, State, Zi Gulfport, Name of Emp	ess 365 p Code MS 39502-1865 loyer (Required) byed			Aggregate year-to-date	<u>-</u>
Ann Smith Mailing Addre PO Box 18 City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (I	ess 365 p Code MS 39502-1865 loyer (Required) byed	□PAC ✓Indivi	dual □Loan	Aggregate year-to-date	\$10.00 \$290.00 Amount of each
Ann Smith Mailing Addre PO Box 18 City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (I Not Emplo	p Code MS 39502-1865  loyer (Required) byed  Required)	□PAC ✓Indivi	dualLoan	Aggregate year-to-date	\$10.00
Ann Smith Mailing Addre PO Box 18 City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (I Not Emplo	ess 365  p Code MS 39502-1865  loyer (Required) byed  Required) byed  Corporation  Other (please spec	□PAC ✓Indivi	dual	Aggregate year-to-date	\$10.00 \$290.00  Amount of each receipt this
Ann Smith Mailing Addre PO Box 18 City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Mary Vi F Mailing Addre	ess 365 p Code MS 39502-1865 cloyer (Required) byed Corporation Other (please spec	□PAC ✓Indivi	dual	Aggregate year-to-date  Date (Mo., Day, Year)	\$10.00 \$290.00  Amount of each receipt this period
Ann Smith Mailing Addre PO Box 18 City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Mary Vi F Mailing Addre 377 Count	ess 365 p Code MS 39502-1865 loyer (Required) byed Corporation Other (please spec	□PAC ✓Indivi	dual	Aggregate year-to-date  Date (Mo., Day, Year)	\$10.00 \$290.00  Amount of each receipt this period
Ann Smith Mailing Addre PO Box 18 City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Mary Vi F Mailing Addre 377 Count City, State, Zi	Poss  365  p Code  MS 39502-1865  Poyed  Required)  Poyed  Corporation  Other (please specials of the component of the compon	□PAC ✓Indivi	dual	Aggregate year-to-date  Date (Mo., Day, Year)	\$10.00 \$290.00  Amount of each receipt this period
Ann Smith Mailing Addre PO Box 18 City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Mary Vi F Mailing Addre 377 Count City, State, Zi Saltillo,	Pess 365  p Code MS 39502-1865  Ployer (Required) Pyed  Corporation  Other (please specials) Pyed  Pyed  Corporation  Other (please specials) Pyed  Risser  Pyed  MS 38866-5716	□PAC ✓Indivi	dual	Aggregate year-to-date  Date (Mo., Day, Year)	\$10.00 \$290.00  Amount of each receipt this period
Ann Smith Mailing Addre PO Box 18 City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Mary Vi F Mailing Addre 377 Count City, State, Zi Saltillo,	pcode MS 39502-1865  loyer (Required)  byed  Corporation  Other (please specials)  y Road 653B  p Code MS 38866-5716  loyer (Required)	□PAC ✓Indivi	dual	Aggregate year-to-date  Date (Mo., Day, Year)	\$10.00 \$290.00  Amount of each receipt this period
Ann Smith Mailing Addre PO Box 18 City, State, Zi Gulfport, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Mary Vi F Mailing Addre 377 Count City, State, Zi Saltillo, Name of Emp	ess 365  p Code MS 39502-1865  loyer (Required)  byed  Corporation  Other (please spectors  sy Road 653B  p Code MS 38866-5716  loyer (Required)  byed  Required)	□PAC ✓Indivi	dual	Aggregate year-to-date  Date (Mo., Day, Year)	\$10.00 \$290.00  Amount of each receipt this period

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Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Randy M.	Wadking				07/16/2023	\$50.00
Mailing Addr						
•	rce Avenue Ext					
City, State, Z	•					
	MS 38655-4459 Dloyer (Required)					
	ty of Mississi	ppi				
Occupation (					Aggregate year-to-date	\$300.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Ronald Un	nz				07/26/2023	\$100.00
Mailing Addr						
City, State, Z	=					
	MS 39766-9129					
-	ployer(Required) ppi State Unive	ersity				
Occupation (	• •				Aggregate year-to-date	\$325.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Tomie Gre	een				07/27/2023	\$50.00
Mailing Addr	ess Island Dr					
City, State, Z						
	MS 39206-3234					
Name of Emp	oloyer (Required) oyed					
Occupation (					Aggregate year-to-date	\$295.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each receipt this
	Other (please sp	pecify)			(Mo., Day, Year)	period
Full Name Rheta Jol	nnson				07/20/2023	\$46.00
Mailing Addr	ess ty Road 259					
City, State, Z						
	38852-8542					
	oloyer (Required)					
Not Emplo						
Occupation (					Aggregate year-to-date	\$1,296.00
	<u> </u>					

lame of Candidate or Committee Brandon Pres	sley
<b>lame of Candidate or Committee</b> Brandon Pres	sley

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name	a Dall-				07/21/2023	\$25.00
J. Dougla						
Mailing Addre						
City, State, Zi	p Code					
Moss Poin	it, MS 39563-28	335				
Name of Emp	loyer (Required)					
Occupation (F	 Required)				Aggregate	\$225.00
Not Emplo	yed				year-to-date	
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name					07/21/2023	\$200.00
Steve Hur						
Mailing Address 450 Valle	e <b>ss</b> ey Vista Dr					
City, State, Zi	p Code					
Tupelo, M	IS 38801-1500					
Name of Emp	loyer (Required)					
Occupation (F					Aggregate	\$300.00
Not Emplo					year-to-date	7300.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
					I	
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name		ecify)			(Mo., Day, Year) 07/12/2023	-
Ruth Adam	ns	pecify)				period
Ruth Adam  Mailing Addre	ns	pecify)				period
Ruth Adam  Mailing Addre	ns e Fontaine Dr	ecify)				period
Ruth Adam Mailing Addre 7101 Bell City, State, Zi	ns e Fontaine Dr					period
Ruth Adam Mailing Addre 7101 Bell City, State, Zi Ocean Spr	ess ee Fontaine Dr p Code rings, MS 39564 loyer (Required)					period
Ruth Adam Mailing Addre 7101 Bell City, State, Zig Ocean Spr Name of Emp	ess e Fontaine Dr p Code rings, MS 39564 loyer (Required)				07/12/2023	\$250.00
Ruth Adam Mailing Addre 7101 Bell City, State, Zi Ocean Spr Name of Emp	ns ess e Fontaine Dr p Code rings, MS 39564 loyer (Required) ryed Required)					period
Ruth Adam Mailing Addre 7101 Bell City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (F	ns ess e Fontaine Dr p Code rings, MS 39564 loyer (Required) ryed Required)		✓Individual	Loan	Aggregate year-to-date  Date	\$250.00 \$500.00 Amount of each
Ruth Adam Mailing Addre 7101 Bell City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (F Not Emplo	ess e Fontaine Dr p Code ings, MS 39564 loyer (Required) eyed Required)	4-8486 PAC		Loan	Aggregate year-to-date	\$250.00 \$250.00 \$500.00
Ruth Adam Mailing Addre 7101 Bell City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (F Not Emplo	p Code lings, MS 39564 loyer (Required) loyed Corporation Other (please sp	4-8486 PAC		Loan	Aggregate year-to-date  Date	\$250.00 \$500.00  Amount of each receipt this
Ruth Adam Mailing Addre 7101 Bell City, State, Zig Ocean Spr Name of Emplo Occupation (F Not Emplo Source: Full Name David Will	Required) Dyed  Corporation  Other (please sp	4-8486 PAC		Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$500.00  Amount of each receipt this period
Ruth Adam Mailing Addre 7101 Bell City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (F Not Emplo	ns  ess ee Fontaine Dr p Code eings, MS 39564 loyer (Required) eyed  Corporation  Other (please sp	4-8486 PAC		Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$500.00  Amount of each receipt this period
Ruth Adam Mailing Addre 7101 Bell City, State, Zij Ocean Spr Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name David Will Mailing Addre 122 Madis City, State, Zij	Required)  Other (please sp	4-8486  PAC		Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$500.00  Amount of each receipt this period
Ruth Adam Mailing Addre 7101 Bell City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name David Will Mailing Addre 122 Madis City, State, Zi Hattiesbu	p Code Corporation Corporation Other (please sp	4-8486  PAC		Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$500.00  Amount of each receipt this period
Ruth Adam Mailing Addre 7101 Bell City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name David Will Mailing Addre 122 Madis City, State, Zi Hattiesbu Name of Emp	Required)  Other (please sp	4-8486  PAC		Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$500.00  Amount of each receipt this period
Ruth Adam Mailing Addre 7101 Bell City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name David Will Mailing Addre 122 Madis City, State, Zi Hattiesbu Name of Emp	p Code Corporation	4-8486  PAC		Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$500.00  Amount of each receipt this period

Name of Candidate or Committee Brandon Presley	Page	_ of _227_
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 Reporting Period
 7/1/2023
 through
 7/29/2023

Date (Mo., Day, Year) 07/23/2023	Amount of each receipt this period
07/23/2023	\$5.00
Aggregate year-to-date	\$485.00
Date (Mo., Day, Year)	Amount of each receipt this period
07/15/2023	\$250.00
Aggregate year-to-date	\$250.00
Date (Mo., Day, Year)	Amount of each receipt this period
07/26/2023	\$25.00
A	\$450.00
Aggregate year-to-date	
	Amount of each receipt this period
year-to-date Date	receipt this
year-to-date  Date (Mo., Day, Year)	receipt this period
year-to-date  Date (Mo., Day, Year)	receipt this period
year-to-date  Date (Mo., Day, Year)	receipt this period
	Aggregate year-to-date  Date (Mo., Day, Year)  07/15/2023  Aggregate year-to-date  Date (Mo., Day, Year)

Presley

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 Reporting Period
 7/1/2023
 through
 7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/27/2023	\$100.00
Susan Tea						
Mailing Addre						
100 Asper						
	MS 39110-9712					
Name of Emp	oloyer (Required) oyed					
Occupation (					Aggregate year-to-date	\$375.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Dana Gonz	zalez				07/08/2023	\$25.00
Mailing Address 3663 James	ess es Monroe Dr					
City, State, Zi	•					
	MS 39213-3020					
Name of Emp	oloyer (Required) oyed					
Occupation (					Aggregate year-to-date	\$280.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Jamie W.	Rebentisch				07/08/2023	\$51.90
Mailing Addre	ess ar Springs Dr					
City, State, Zi	•					
	4S 38804-9234					
Name of Emp	oloyer (Required)					
Occupation (					Aggregate year-to-date	\$373.90
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Robert Ca	arroll				07/18/2023	\$50.00
Mailing Addre						
675 Beula	ah Grove Rd					
675 Beula City, State, Zi	ah Grove Rd	4				
675 Beula City, State, Zi Pontotoc,	ah Grove Rd ip Code	4				
675 Beula City, State, Zi Pontotoc, Name of Emp	ah Grove Rd i <b>p Code</b> , MS 38863-770					
675 Beula City, State, Zi Pontotoc, Name of Emp	ah Grove Rd  ip Code  MS 38863-7704  bloyer (Required)  istribution Second				Aggregate year-to-date	\$420.00

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

## ITEMIZED RECEIPTS

Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	,; ++				07/02/2023	\$25.00
Mailing Addr						
4217 Oak						
City, State, Z						
	MS 39216-3420					
Not Emplo	oloyer (Required) Dyed					
Occupation (					Aggregate year-to-date	\$475.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Robert O	'Brien				07/23/2023	\$100.00
Mailing Addr						
City, State, Z	p Code					
	VA 98070-7247					
Name of Emp	oloyer (Required) et					
Occupation (	Required)				Aggregate year-to-date	\$600.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Sarah Jon	nes				07/23/2023	\$50.00
Mailing Addr						
City, State, Z	chview Dr					
-	rings, MS 39564	4-9404				
Name of Emp	loyer (Required)					
Occupation (	Required) on Data Analyst				Aggregate year-to-date	\$300.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Robert La	atham				07/14/2023	\$100.00
Mailing Addr	ess Eerson Pkwy					
City, State, Z	_	5				
Name of Emp						
37 1 1 1 1 1 1 1 1 1						
Not Emplo						
Occupation (	equired)				Aggregate year-to-date	\$950.00

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Name of Candidate or Committee	Brandon	Presley
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 Reporting Period
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 7/29/2023

Source:	☐ Corporation ☐ Other (please spe	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roxann Ja	ackson				07/06/2023	\$50.00
Mailing Addre						
1713 Rese						
City, State, Zi	p Code					
Clinton,	MS 39056-5667					
Name of Emp Submittab	loyer (Required)					
Occupation (I	Required) Support Lead				Aggregate year-to-date	\$300.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	cify)			(Mo., Day, Year)	receipt this period
Full Name Weston Mi	lliken				07/26/2023	\$7,500.00
Mailing Addre						
PO Box 69						
City, State, Zi	<b>p Code</b> Lywood, CA 90069	0_0550				
	loyer (Required)					
Not Emplo						
Occupation (I	Required)				Aggregate year-to-date	\$7,500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	cify)			(Mo., Day, Year)	receipt this period
					07/27/2023	\$25.00
Full Name John Wage	es					
John Wage	ess					
John Wage Mailing Addre	9 <b>ss</b> 199					
John Wage Mailing Addre 138 Road City, State, Zi	9 <b>ss</b> 199					
John Wage Mailing Addre 138 Road City, State, Zi Tupelo, M Name of Emp	p Code 4S 38801-7809					
John Wage Mailing Addre 138 Road City, State, Zi Tupelo, M Name of Emp	p Code 4S 38801-7809					
John Wage Mailing Addre 138 Road City, State, Zi Tupelo, M Name of Emp Panorama Occupation (I	p Code 4S 38801-7809 Research, Inc.				Aggregate year-to-date	\$225.00
John Wage Mailing Addre 138 Road City, State, Zi Tupelo, M Name of Emp Panorama Occupation (I	p Code 4S 38801-7809  loyer (Required) Research, Inc.	PAC	<b>☑</b> Individual	Loan	year-to-date Date	Amount of each
John Wage Mailing Addre 138 Road City, State, Zi Tupelo, M Name of Emp Panorama Occupation (I Research	p Code 4S 38801-7809  cloyer (Required) Research, Inc.  Required) Scientist		<b>☑</b> Individual	Loan	year-to-date	
John Wage Mailing Addre 138 Road City, State, Zi Tupelo, M Name of Emp Panorama Occupation (I Research	p Code 4S 38801-7809 cloyer (Required) Research, Inc. Required) Scientist Corporation Other (please spe		<b>☑</b> Individual	Loan	year-to-date Date	Amount of each receipt this
John Wage Mailing Addre 138 Road City, State, Zi Tupelo, M Name of Emp Panorama Occupation (I Research Source: Full Name Carla Fal Mailing Addre	p Code 4S 38801-7809  Iloyer (Required) Research, Inc.  Required) Scientist  Corporation Other (please spe		<b>√</b> Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
John Wage Mailing Addre 138 Road City, State, Zi Tupelo, M Name of Emp Panorama Occupation (I Research Source: Full Name Carla Fal Mailing Addre 176 Shady	p Code  199 p Code 18 38801-7809 cloyer (Required) Research, Inc. Required) Scientist Corporation Other (please spe		<b>√</b> Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
John Wage Mailing Addre 138 Road City, State, Zi Tupelo, M Name of Emp Panorama Occupation (I Research Source: Full Name Carla Fal Mailing Addre 176 Shady City, State, Zi	p Code  199 p Code 18 38801-7809 cloyer (Required) Research, Inc. Required) Scientist Corporation Other (please spe		<b>√</b> Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Addres 138 Road City, State, Zi Tupelo, M Name of Emp Panorama Occupation (I Research Source: Full Name Carla Fal Mailing Addres 176 Shady City, State, Zi Tupelo, M	p Code  199 p Code 18 38801-7809 cloyer (Required) Research, Inc. Required) Scientist Corporation Other (please spe		<b>√</b> Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
John Wage Mailing Addre 138 Road City, State, Zi Tupelo, M Name of Emp Panorama Occupation (I Research Source: Full Name Carla Fal Mailing Addre 176 Shady City, State, Zi Tupelo, M Name of Emp	p Code 4S 38801-7809  bloyer (Required) Research, Inc.  Required) Scientist  Corporation  Other (please spe	cify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
John Wage  Mailing Addre  138 Road  City, State, Zi  Tupelo, M  Name of Emp  Panorama  Occupation (I  Research  Source:  Full Name  Carla Fal  Mailing Addre  176 Shady  City, State, Zi  Tupelo, M  Name of Emp  Mississip  Occupation (I	p Code  4S 38801-7809  Alloyer (Required)  Research, Inc.  Required)  Scientist  Corporation  Other (please specture)  Acres Rd  p Code  4S 38804-2945  Alloyer (Required)  Depi Humanities (Alloyer)	cify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Bran	don Presley
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 Reporting Period
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 7/29/2023

Source: Corporation PAC / Individual Loan		
Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Slakie	07/29/2023	\$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	\$658.60
Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert O'Brien	07/11/2023	\$100.00
Mailing Address 6007 SW 240th St		
City, State, Zip Code Vashon, WA 98070-7247		
Name of Employer (Required) Health Net		
Occupation (Required)	Aggregate year-to-date	\$600.00
Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elise Gillespie	07/21/2023	\$25.00
Mailing Address 1013 S Lamar Blvd		
1013 S Lamar Blvd		
1013 S Lamar Blvd  City, State, Zip Code		
1013 S Lamar Blvd  City, State, Zip Code Oxford, MS 38655-4739  Name of Employer (Required)	Aggregate year-to-date	\$275.00
1013 S Lamar Blvd  City, State, Zip Code Oxford, MS 38655-4739  Name of Employer (Required) University of Mississippi  Occupation (Required)		Amount of each receipt this
City, State, Zip Code Oxford, MS 38655-4739  Name of Employer (Required) University of Mississippi  Occupation (Required) Project Coordinator  Source: Corporation PAC Individual Loan	year-to-date  Date	Amount of each
City, State, Zip Code Oxford, MS 38655-4739  Name of Employer (Required) University of Mississippi  Occupation (Required) Project Coordinator  Source: Corporation PAC Individual Loan Other (please specify)	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Code Oxford, MS 38655-4739  Name of Employer (Required) University of Mississippi  Occupation (Required) Project Coordinator  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Augusta Scattergood  Mailing Address 3050 Military Rd NW  City, State, Zip Code	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Code Oxford, MS 38655-4739  Name of Employer (Required) University of Mississippi  Occupation (Required) Project Coordinator  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Augusta Scattergood  Mailing Address	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elvin Sur	nds				07/13/2023	\$25.00
Mailing Addre	ess				1	
4000 W Ti	idewater Ln					
City, State, Zi Madison,	ip Code MS 39110-8942					
	oloyer (Required) cis of Assisi (	Church			1	
Occupation (	Required)				Aggregate year-to-date	\$430.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Kelly J.	Jacobs				07/28/2023	\$100.00
Mailing Addre					-	
City, State, Zi	p Code				-	
	MS 38632-822	7				
Name of Emp	oloyer (Required) Dyed					
Occupation (I					Aggregate year-to-date	\$646.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
oouice.	Corporation		V IIIuiviuuai	Loan	Date	
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Deirdre H	<u> </u>	ecify)			(Mo., Day, Year) 07/09/2023	
Deirdre E	Phillips	ecify)				period
Deirdre E  Mailing Addre 200 Jeffe  City, State, Zi	Phillips  Phillips  Price of the control of the con					period
Deirdre E  Mailing Addre 200 Jeffe  City, State, Zi	Phillips  Pss  Prson Rdg					period
Deirdre E Mailing Addre 200 Jeffe City, State, Zi Ridgeland Name of Emp	Phillips  Phillips  Price of the control of the con					period
Deirdre E Mailing Addre 200 Jeffe City, State, Zi Ridgeland Name of Emp	Phillips  ess erson Rdg  p Code d, MS 39157-910  ployer (Required) alth System  Required)					period
Deirdre H Mailing Addre 200 Jeffe City, State, Zi Ridgeland Name of Emp Delta Hea Occupation (I	Phillips  ess erson Rdg  p Code d, MS 39157-910  ployer (Required) alth System  Required)		✓Individual	Loan	07/09/2023 Aggregate	\$50.00 \$350.00
Mailing Address 200 Jeffe City, State, Zi Ridgeland Name of Emp Delta Hea Occupation (I Physician	Phillips  ess erson Rdg  p Code d, MS 39157-910 eloyer (Required) alth System  Required)	□PAC	☑Individual	Loan	Aggregate year-to-date	\$50.00 \$350.00
Mailing Address 200 Jeffe City, State, Zi Ridgeland Name of Emp Delta Hea Occupation (I Physician Source:	Phillips  Person Rdg  Proce  P	□PAC	✓Individual	Loan	Aggregate year-to-date  Date	\$350.00  Amount of each receipt this
Deirdre I  Mailing Addre 200 Jeffe City, State, Zi Ridgeland Name of Emp Delta Hea Occupation (I Physician Source:  Full Name Angela A.  Mailing Addre	Phillips  Person Rdg  Process	□PAC	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$350.00  Amount of each receipt this period
Mailing Address 200 Jeffe City, State, Zi Ridgeland Name of Emp Delta Hea Occupation (I Physician Source: Full Name Angela A. Mailing Address 956 Steel	Phillips  Phillips  Price of the price of th	□PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$350.00  Amount of each receipt this period
Mailing Address 200 Jeffe City, State, Zi Ridgeland Name of Emp Delta Hea Occupation (I Physician Source: Full Name Angela A. Mailing Address 956 Steel City, State, Zi	Phillips  Phillips  Price of the price of th	PAC	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$350.00  Amount of each receipt this period
Deirdre II  Mailing Addre 200 Jeffe City, State, Zi Ridgeland Name of Emp Delta Hea Occupation (I Physician Source:  Full Name Angela A.  Mailing Addre 956 Steel City, State, Zi Starkvill Name of Emp	Phillips  Phillips  Provided Serson Rdg  Provided Serson Required  Provided Serson Serson Serson Serson Red  Provided Serson Rdg  Provided Ser	PAC pecify)	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$350.00  Amount of each receipt this period
Deirdre II  Mailing Addre 200 Jeffe City, State, Zi Ridgeland Name of Emp Delta Hea Occupation (I Physician Source:  Full Name Angela A.  Mailing Addre 956 Steel City, State, Zi Starkvill Name of Emp	Phillips  Person Rdg  Prode  A, MS 39157-910  Ployer (Required)  Alth System  Required)  Corporation  Other (please sp  Robertson  Prode  A Rd  Prode  A Rd  Prode  A Rd  Prode  A Rd  A R	PAC pecify)	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$350.00  Amount of each receipt this period

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Source:	☐ Corporation☐ Other (please sp		Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/13/2023	\$3,000.00
Mailing Addre						
134 Bayou						
City, State, Zi						
Greenvill	e, MS 38701-7	725				
Name of Emp	loyer (Required) oyed					
Occupation (I					Aggregate year-to-date	\$6,000.00
Source:	Corporation	☐PAC ✓	Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name William E	luker				07/04/2023	\$25.00
Mailing Addre						
404 Hunti						
City, State, Zi	<b>p Code</b> MS 39272-4486					
	loyer (Required)					
Not Emplo	•					
Occupation (I					Aggregate year-to-date	\$225.00
Source:	Corporation	PAC 🗸	Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Bud Coley	7				07/04/2023	\$1,000.00
Mailing Addre						
City, State, Zi						
	n Code					
Tupelo, M	•					
Name of Emp	loyer (Required)					
Name of Emp	1S 38804					
Name of Emp	Is 38804 loyer (Required) Trucking Required)				Aggregate year-to-date	\$1,000.00
Name of Emp Bud Coley Occupation (I	Is 38804 loyer (Required) Trucking Required)	□PAC ✓	Individual	Loan	year-to-date Date	Amount of each
Name of Emp Bud Coley Occupation (I Business	Is 38804  loyer (Required)  Trucking  Required)  Owner		Individual	Loan	year-to-date	
Name of Emp Bud Coley Occupation (I Business Source:	Is 38804  Illoyer (Required)  Trucking  Required)  Owner  Corporation  Other (please sp		Individual	Loan	year-to-date Date	Amount of each receipt this
Name of Emp Bud Coley Occupation (I Business Source: Full Name Thomas Wa Mailing Addre	Is 38804  Iloyer (Required)  Trucking  Required)  Owner  Corporation  Other (please spalman		Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emp Bud Coley Occupation (I Business Source: Full Name Thomas Wa Mailing Addre	Is 38804  Iloyer (Required)  Trucking  Required)  Owner  Corporation  Other (please spanse)  alman  ess  ellsgate Dr		Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emp Bud Coley Occupation (I Business Source:  Full Name Thomas Wa Mailing Addre 2408 W We City, State, Zi	Is 38804  Iloyer (Required)  Trucking  Required)  Owner  Corporation  Other (please spanse)  alman  ess  ellsgate Dr		Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emp Bud Coley Occupation (I Business Source:  Full Name Thomas Wa Mailing Addre 2408 W We City, State, Zi Oxford, M	Nover (Required) Trucking Required) Owner Corporation Other (please spanning) Cost (please		Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emp Bud Coley Occupation (I Business Source:  Full Name Thomas Wa Mailing Addre 2408 W We City, State, Zi Oxford, M	Is 38804  Iloyer (Required)  Trucking  Required)  Owner  Corporation  Other (please spans)  Illustrate Dr  p Code  Is 38655-5977  Iloyer (Required)		Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emp Bud Coley Occupation (I Business Source:  Full Name Thomas Wa Mailing Addre 2408 W We City, State, Zi Oxford, M Name of Emp	Is 38804  Iloyer (Required) Trucking  Required) Owner  Corporation Other (please spanse) Illsgate Dr p Code Is 38655-5977 Iloyer (Required) Oyed  Required)		Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

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			_	
Source:	□ Corporation       □ PAC       ✓ Individua         □ Other (please specify)	I Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name			07/06/2023	\$5.00
Raleigh E	<u>-</u>			
•	Road 229U			
City, State, Zi				
Oxford, N	IS 38655			
Name of Emp	loyer (Required) byed			
Occupation (			Aggregate year-to-date	\$675.00
Source:	☐ Corporation ☐ PAC ✓ Individua	I Loan	Date	Amount of each
	Other (please specify)		(Mo., Day, Year)	receipt this period
Full Name Sheila Ho	olmes		07/18/2023	\$100.00
Mailing Addre				
220 Sweet				
City, State, Zi	39208-6408			
	loyer (Required)			
MS Dept o	of Rehabilitation Services			
Occupation (			Aggregate year-to-date	\$300.00
Source:	Corporation PAC / Individua	I Loan	Date	Amount of each
	Other (please specify)		(Mo., Day, Year)	receipt this period
Full Name Rubye D.	Harden		07/18/2023	\$100.00
Mailing Addre				
City, State, Zi				
	IS 38801-5599			
	loyer (Required)			
Occupation (			Aggregate year-to-date	\$300.00
			Data	Amazont of a all
Source:	□ Corporation       □ PAC       ✓ Individua         □ Other (please specify)	ILoan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name			07/29/2023	\$100.00
Curt Brin			.,, _,, _,,	1
Mailing Address 311 South				
City, State, Zi	<b>p Code</b> MS 39218-9235			
Not Emplo	loyer (Required)			
Occupation (Not Emplo	eyed Required)		Aggregate year-to-date	\$300.00

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Data Data	Amount of each
(Mo., Day, Year)	receipt this period
07/20/2023	\$250.00
Aggregate year-to-date	\$572.40
Data	Amount of each
(Mo., Day, Year)	receipt this period
07/11/2023	\$99.00
Aggregate year-to-date	\$499.00
Date	Amount of each
(Mo., Day, Year)	receipt this period
07/13/2023	\$50.00
Aggregate year-to-date	\$330.00
Date	Amount of each receipt this
(Mo., Day, Year)	period
07/05/2023	\$500.00
Aggregate	
	Aggregate year-to-date  Aggregate year-to-date  O7/11/2023  Aggregate year-to-date  O7/11/2023  Aggregate year-to-date  Date (Mo., Day, Year)  O7/13/2023  Aggregate year-to-date  Date (Mo., Day, Year)  O7/13/2023

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Source: Corporation PAC Individual Loan	Date	Amount of each
Source: Corporation PAC Individual Loan  Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name James Raymond	07/18/2023	\$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)	Aggregate	\$1,500.00
Not Employed	year-to-date	41,000.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Tamalane Blessey	07/28/2023	\$100.00
Mailing Address		
766 Arbor Station Dr		
City, State, Zip Code		
Long Beach, MS 39560-5739		
Name of Employer (Required)		
Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name S. Allan Alexander	07/29/2023	\$100.00
Mailing Address 526 N 11th St		
City, State, Zip Code		
Oxford, MS 38655-3108		
Name of Employer (Required)		
Not Employed		
Occupation (Required)	Aggregate	2250.00
,	year-to-date	\$350.00
Not Employed		
Not Employed  Source: □Corporation □PAC ✓Individual □Loan	Date	Amount of each
	Date (Mo., Day, Year)	Amount of each receipt this period
Source: Corporation PAC Individual Loan		receipt this
Source: Corporation PAC Individual Loan Other (please specify)  Full Name Lana Richardson  Mailing Address	(Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify)  Full Name Lana Richardson  Mailing Address 10611 County Road 500	(Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify)  Full Name Lana Richardson  Mailing Address 10611 County Road 500  City, State, Zip Code	(Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify)  Full Name Lana Richardson  Mailing Address 10611 County Road 500  City, State, Zip Code Ripley, MS 38663-9199	(Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify)  Full Name Lana Richardson  Mailing Address 10611 County Road 500  City, State, Zip Code	(Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify)  Full Name Lana Richardson  Mailing Address 10611 County Road 500  City, State, Zip Code Ripley, MS 38663-9199  Name of Employer (Required)	(Mo., Day, Year)	receipt this period

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	□PAC ✓Indi		Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/29/2023	\$25.00
Mailing Addre						
Ū	e <b>ss</b> James Rd					
City, State, Z						
	sta, MS 39462-9	9710				
Name of Emp	oloyer (Required) oyed					
Occupation (					Aggregate year-to-date	\$610.00
Source:	Corporation	☐ PAC ✓ Indi	vidual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Michael H	R. McWherter				07/11/2023	\$500.00
Mailing Addre						
City, State, Z	•					
	TN 38302-1762					
	oloyer(Required) Distributors, I	Inc.				
Occupation (					Aggregate year-to-date	\$1,000.00
Source:	Corporation	☐ PAC ✓ Indi	vidual 🗌	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Jerry Sm:	ith				07/21/2023	\$46.00
Mailing Addr						
136 St Re						
	MS 39110-7798					
-	<b>bloyer(Required)</b> opi Baptist Med	dical Center				
Occupation (					Aggregate year-to-date	\$396.00
Source:	Corporation	PAC ✓ Indi	vidual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name				_		poriou
Timothy S	Simon				07/13/2023	\$50.00
Timothy S  Mailing Addre					07/13/2023	<u> </u>
Mailing Address 788 James City, State, Z	ess stown Ave	4-3744			07/13/2023	<u> </u>
Mailing Address James City, State, Zisan France	ess stown Ave ip Code	4-3744			07/13/2023	<u> </u>
Mailing Address James City, State, Zisan France	ess stown Ave ip Code cisco, CA 94124 bloyer (Required)	4-3744			07/13/2023	<u> </u>
Mailing Address 788 James City, State, Zi San France Name of Emp	ess stown Ave ip Code cisco, CA 94124 bloyer (Required) cegies	4-3744			07/13/2023  Aggregate year-to-date	<u> </u>

Name of Candidate or Committee B	3randon	Presley	У
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 Reporting Period
 7/1/2023
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Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	07/04/0000	
Sally G. Nash	07/24/2023	\$1,000.00
Mailing Address		
120 District Blvd		
City, State, Zip Code		
Jackson, MS 39211-6390		
Name of Employer (Required)		
Not Employed		
Occupation (Required)	Aggregate	<u> </u>
Retired	year-to-date	\$1,250.00
Source: ☐ Corporation ☐ PAC ✓ Individual ☐ Loan	Date	Amount of each receipt this
Other (please specify)	(Mo., Day, Year)	period
Full Name	07/24/2023	\$50.00
James Lynch	07/24/2023	\$30.00
Mailing Address		
617 Camelia Trl		
City, State, Zip Code		
Brandon, MS 39047-6316		
Name of Employer (Required)		
Not Employed		
	A	
Occupation (Required) Retired	Aggregate year-to-date	\$575.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Miriam Harrington	07/25/2023	\$37.00
Mailing Address 3800 Fairfax Dr		
City, State, Zip Code	_	
Arlington, VA 22203-1720		
Name of Employer (Required)	_	
Not Employed		
-		
Occupation (Required)	Aggregate year-to-date	\$309.00
Not Employed	your to date	
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
	07/13/2023	\$25.00
Full Name Janet Shanks	0771372023	
Janet Shanks Mailing Address		
Janet Shanks  Mailing Address 5115 Wayneland Dr  City, State, Zip Code		
Janet Shanks  Mailing Address 5115 Wayneland Dr  City, State, Zip Code Jackson, MS 39211-4439	0171372023	
Janet Shanks  Mailing Address 5115 Wayneland Dr  City, State, Zip Code		
Janet Shanks  Mailing Address 5115 Wayneland Dr  City, State, Zip Code Jackson, MS 39211-4439  Name of Employer (Required)	Aggregate year-to-date	\$625.00

Name of Candidate or Committee	Brandon	Presley
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 Reporting Period
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 7/29/2023

Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Tietjens	07/05/2023	\$500.00
Mailing Address 209 Lake Cir		
City, State, Zip Code Madison, MS 39110-7992		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,600.00
Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this
Full Name Marian Kurz	07/15/2023	<b>period</b> \$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	\$270.00
Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steve Hazard	07/29/2023	\$500.00
Mailing Address 21 Shadowlawn Cv		
City, State, Zip Code West Point, MS 39773-9197		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)Full Name	(Mo., Day, Year)	receipt this period
Other (please specify)  Full Name Sally Faulkner  Mailing Address  108 Sumach St  City, State, Zip Code Lookout Mountai, TN 37350-1132	(Mo., Day, Year)	receipt this period
Other (please specify)  Full Name Sally Faulkner  Mailing Address 108 Sumach St  City, State, Zip Code	(Mo., Day, Year)	receipt this period

Name of Candidate or Committee B	3randon	Presley	У
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	<ul><li>Corporation</li><li>✓ Other (please spec</li></ul>	$oxedsymbol{oxedsymbol{oxedsymbol{\square}}}$ PAC $oxedsymbol{oxedsymbol{\square}}$ Individua	l Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name The Barne	s Law Group, LL	C		07/24/2023	\$10,000.00
Mailing Addre	ss				
City, State, Zi					
•	GA 30060-1977				
	loyer (Required)				
Occupation (F	Required)			Aggregate year-to-date	\$10,000.00
Source:	Corporation Other (please spec	☐PAC ✓ Individua	l Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	Mann			07/24/2023	\$25.00
Mailing Addre	SS				
316 Sonom					
City, State, Zi <sub>l</sub>					
	MS 39110-9549				
	loyer (Required)				
Mann Agen					
Occupation (F Communica	• •			Aggregate year-to-date	\$435.00
Source:	Corporation	PAC Individua	l Loan	Date	Amount of each
					receipt this
	Other (please spec	ify)		(Mo., Day, Year)	period
Full Name Kathy How		ify)		(Mo., Day, Year) 07/26/2023	•
Kathy How  Mailing Addre	ard	ify)			period
Mailing Addre 1213 Hunt City, State, Zi	ard ss cliff Way	ify)			period
Mailing Addre 1213 Hunt City, State, Zip Clinton,	ard ss cliff Way p Code	ify)			period
Mailing Addre 1213 Hunt City, State, Zip Clinton,	ard cliff Way c Code MS 39056-3425 loyer (Required)	ify)			period
Mailing Addre 1213 Hunt City, State, Zip Clinton, Name of Empl	ard  ss cliff Way p Code MS 39056-3425  loyer (Required) yed  Required)	ify)			period
Mailing Addred 1213 Hunt City, State, Zing Clinton, Name of Emplo Occupation (F	ard  process cliff Way process		I  □Loan	07/26/2023 Aggregate	<b>period</b> \$25.00
Mailing Address 1213 Hunt City, State, Zig Clinton, Name of Emplo Not Emplo Occupation (F Not Emplo	ard  ss cliff Way p Code MS 39056-3425  loyer (Required) yed  Required)	PAC ✓ Individua	l  Loan	Aggregate year-to-date	\$25.00 \$25.00
Mailing Addre 1213 Hunt City, State, Zig Clinton, Name of Emplo Not Emplo Occupation (F Not Emplo Source:	ard  ss cliff Way c Code MS 39056-3425 loyer (Required) yed  Required) yed  Corporation	PAC ✓ Individua	ILoan	Aggregate year-to-date  Date	\$25.00 \$25.00 \$250.00 Amount of each receipt this
Mailing Addred 1213 Hunt City, State, Zip Clinton, Name of Employ Occupation (FNot Employ Source:  Full Name Charles B	ard  ss cliff Way p Code MS 39056-3425 loyer (Required) yed Required) yed Corporation Other (please specentials)	PAC ✓ Individua	ILoan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$25.00 Amount of each receipt this period
Mailing Addre 1213 Hunt City, State, Zig Clinton, Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Charles B Mailing Addre PO Box 26 City, State, Zig	ard  process cliff Way process cliff Way process cliff Way process as 39056-3425  loyer (Required) yed  Required) yed  Corporation  Other (please spectors) envenutti as 39 process code	PAC ☑Individua	ILoan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$25.00 Amount of each receipt this period
Mailing Addre 1213 Hunt City, State, Zig Clinton, Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Charles B Mailing Addre PO Box 26 City, State, Zig Bay Saint Name of Emplo	ard  ss cliff Way code MS 39056-3425  loyer (Required) yed  Corporation  Other (please specter) envenutti ss 39	PAC ☑Individua	I  Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$25.00 Amount of each receipt this period
Mailing Addre 1213 Hunt City, State, Zig Clinton, Name of Empl Not Emplo Occupation (F Not Emplo Source:  Full Name Charles B Mailing Addre PO Box 26 City, State, Zig Bay Saint	ard  SS  cliff Way  Code  MS 39056-3425  loyer (Required)  yed  Corporation  Other (please spector)  envenutti  SS  39  Code  Louis, MS 3952  loyer (Required)  Required)  Required)	PAC ☑Individua	I Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$25.00 Amount of each receipt this period

Name of Candidate or Committee Brandon Presle	эy
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Source:	Corporation Other (please spec	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gail Lins	son			07/08/2023	\$25.00
Mailing Addre					
•	ISHORE POINTE				
City, State, Zi	•				
Madison,					
Name of Emp Not Emplo	loyer (Required) oyed				
Occupation (F				Aggregate year-to-date	\$235.00
Source:	Corporation	PAC Individual	Loan	Date	Amount of each receipt this
	Other (please spec	ify)		(Mo., Day, Year)	period
Full Name William H	I. Williams			07/28/2023	\$250.00
Mailing Addre					
City, State, Zi					
-	MS 39507-1407				
Name of Emp	loyer (Required) .oyed				
Occupation (F	Required)			Aggregate year-to-date	\$250.00
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
Source.			Loan	(Mo., Day, Year)	receipt this period
	Other (please spec	шу)		_	periou
Full Name Janice Ja		<u>.                                </u>		07/14/2023	\$100.00
Janice Ja	ıckson	y)		07/14/2023	
Janice Ja Mailing Addre	ıckson	<u> </u>		07/14/2023	
Janice Ja Mailing Addre 113 Green City, State, Zi	nckson Pss ns View Dr	<u> </u>		07/14/2023	
Janice Ja Mailing Addre 113 Green City, State, Zi Madison,	nckson  pss  ns View Dr  p Code			07/14/2023	
Janice Ja Mailing Addre 113 Green City, State, Zi Madison,	ess as View Dr p Code MS 39110-8050 loyer (Required)	<u> </u>		07/14/2023	
Janice Ja Mailing Addre 113 Green City, State, Zi Madison, Name of Emp	ckson ess as View Dr p Code MS 39110-8050 loyer (Required)			Aggregate year-to-date	
Janice Ja Mailing Addre 113 Green City, State, Zi Madison, Name of Emp Self Empl Occupation (F	ckson ess as View Dr p Code MS 39110-8050 loyer (Required)	□PAC ✓Individual	Loan	Aggregate year-to-date	\$100.00 \$977.00
Janice Ja  Mailing Addre  113 Green  City, State, Zi  Madison,  Name of Emp  Self Empl  Occupation (F  Attorney	p Code MS 39110-8050 loyer (Required) oyed Required)	□PAC ✓ Individual	Loan	Aggregate year-to-date	\$100.00
Janice Ja  Mailing Addre  113 Green  City, State, Zi  Madison,  Name of Emp  Self Empl  Occupation (F  Attorney	ackson  PSS  as View Dr  p Code  MS 39110-8050  loyer (Required)  coyed  Required)  Corporation  Other (please speci	□PAC ✓ Individual	Loan	Aggregate year-to-date	\$100.00 \$977.00  Amount of each receipt this
Janice Ja  Mailing Addre 113 Green City, State, Zig Madison, Name of Emp Self Empl Occupation (F Attorney Source:  Full Name Charles B Mailing Addre	ckson  ess as View Dr  p Code  MS 39110-8050  loyer (Required)  oyed  Required)  Corporation  Other (please special code)  Buchanan	□PAC ✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$100.00 \$977.00  Amount of each receipt this period
Janice Ja  Mailing Addre  113 Green  City, State, Zip  Madison,  Name of Emp  Self Empl  Occupation (F  Attorney  Source:  Full Name  Charles B  Mailing Addre  155 Bryan	ackson  Poss  as View Dr  p Code  MS 39110-8050  loyer (Required)  Oyed  Required)  Corporation  Other (please special code)  Buchanan  Poss  at St	□PAC ✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$100.00 \$977.00  Amount of each receipt this period
Janice Ja  Mailing Addre  113 Green  City, State, Zip  Madison,  Name of Emp  Self Empl  Occupation (F  Attorney  Source:  Full Name  Charles B  Mailing Addre  155 Bryan  City, State, Zip	ackson  Pass  as View Dr  p Code  MS 39110-8050  loyer (Required)  Oyed  Required)  Corporation  Other (please special sections)  Buchanan  Pass  at St  p Code	□PAC ✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$100.00 \$977.00  Amount of each receipt this period
Mailing Addres 113 Green City, State, Zig Madison, Name of Emp Self Empl Occupation (F Attorney Source: Full Name Charles B Mailing Addres 155 Bryan City, State, Zig Palo Alto	ckson  pss as View Dr p Code MS 39110-8050  loyer (Required) cyed  Corporation Other (please special content of the content of	□PAC ✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$100.00 \$977.00  Amount of each receipt this period
Mailing Addres 113 Green City, State, Zig Madison, Name of Emp Self Empl Occupation (F Attorney Source: Full Name Charles B Mailing Addres 155 Bryan City, State, Zig Palo Alto	ckson  pss as View Dr p Code MS 39110-8050  loyer (Required) oyed  Required)  Corporation  Other (please special content of the content of th	□PAC ✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$100.00 \$977.00  Amount of each receipt this period
Mailing Addred 113 Green City, State, Zim Madison, Name of Emp Self Empl Occupation (Fattorney Source:  Full Name Charles Benefits Bryan City, State, Zim Palo Altoname of Emp	ackson  PSS  as View Dr  p Code  MS 39110-8050  loyer (Required)  oyed  Required)  Corporation  Other (please spectors)  Buchanan  PSS  at St  p Code  p, CA 94301-1104  loyer (Required)  oyed  Required)	□PAC ✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$100.00 \$977.00  Amount of each receipt this period

Name of Candidate or	Committee	Brandon	Presley

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	IP15	
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this
Other (please specify)	(WO., Day, Teal)	period
Frances M. Coleman	07/24/2023	\$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	\$355.00
Source: Corporation PAC Individual Loan	Date	Amount of each receipt this
Other (please specify)	(Mo., Day, Year)	period
Full Name Sandra West	07/06/2023	\$250.00
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	\$550.00
	Dete	Amount of cook
Source: ☐ Corporation ☐ PAC ✓ Individual ☐ Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name	(Mo., Day, Year)	-
Full Name Harry Owen		period
Full Name		period
Full Name Harry Owen Mailing Address		period
Full Name Harry Owen  Mailing Address 2458 Wild Valley Dr  City, State, Zip Code		period
Full Name Harry Owen  Mailing Address 2458 Wild Valley Dr  City, State, Zip Code Jackson, MS 39211-6224  Name of Employer (Required)		period
Full Name Harry Owen  Mailing Address 2458 Wild Valley Dr  City, State, Zip Code Jackson, MS 39211-6224  Name of Employer (Required) Not Employed  Occupation (Required)	07/07/2023 Aggregate	\$100.00 \$218.30 Amount of each
Full Name Harry Owen  Mailing Address 2458 Wild Valley Dr  City, State, Zip Code Jackson, MS 39211-6224  Name of Employer (Required) Not Employed  Occupation (Required) Retired	Aggregate year-to-date	\$100.00 \$218.30
Full Name Harry Owen  Mailing Address 2458 Wild Valley Dr  City, State, Zip Code Jackson, MS 39211-6224  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan Other (please specify)	Aggregate year-to-date  Date	\$100.00 \$218.30  Amount of each receipt this
Full Name Harry Owen  Mailing Address 2458 Wild Valley Dr  City, State, Zip Code Jackson, MS 39211-6224  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan Other (please specify)	Aggregate year-to-date  Date (Mo., Day, Year)	\$218.30  Amount of each receipt this period
Full Name Harry Owen  Mailing Address 2458 Wild Valley Dr  City, State, Zip Code Jackson, MS 39211-6224  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Steve Leeds	Aggregate year-to-date  Date (Mo., Day, Year)	\$218.30  Amount of each receipt this period
Full Name Harry Owen  Mailing Address 2458 Wild Valley Dr  City, State, Zip Code Jackson, MS 39211-6224  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Steve Leeds  Mailing Address	Aggregate year-to-date  Date (Mo., Day, Year)	\$218.30  Amount of each receipt this period
Full Name Harry Owen  Mailing Address 2458 Wild Valley Dr  City, State, Zip Code Jackson, MS 39211-6224  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Steve Leeds  Mailing Address 6410 Radiant Trce  City, State, Zip Code Atlanta, GA 30328-2897  Name of Employer (Required)	Aggregate year-to-date  Date (Mo., Day, Year)	\$218.30  Amount of each receipt this period
Full Name Harry Owen  Mailing Address 2458 Wild Valley Dr  City, State, Zip Code Jackson, MS 39211-6224  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Steve Leeds  Mailing Address 6410 Radiant Trce  City, State, Zip Code Atlanta, GA 30328-2897	Aggregate year-to-date  Date (Mo., Day, Year)	\$218.30  Amount of each receipt this period

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/29/2023	\$5,000.00
	J. Mikhail					
Mailing Addre						
City, State, Zi	p Code MS 39577-0038					
Name of Emp	oloyer (Required)					
Occupation (I	Required)				Aggregate year-to-date	\$10,000.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Milton O.	. Sundbeck				07/10/2023	\$10,000.00
Mailing Addre						
City, State, Zi						
	nt, MS 39773-5	705				
•	loyer (Required) Ionics, Inc.					
Occupation (I					Aggregate year-to-date	\$20,000.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name James Wig	ggins				07/20/2023	\$500.00
Mailing Addre						
	nmerce St					
City, State, Zin Natchez,	MS 39120-3507					
Name of Emp	oloyer (Required) Dyed					
Occupation (Not Emplo					Aggregate year-to-date	\$1,000.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Dennis Tr	ruax				07/23/2023	\$46.00
Mailing Addre						
City, State, Zi	p Code					
	Le, MS 39759-9	434				
Self Empl	oloyer (Required) Loyed					
Occupation (					A	
Engineer	Requireu)				Aggregate year-to-date	\$1,196.00

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Source:	Corporation Other (please spec	□ PAC ✓ Individual cify)	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	ant-Angotti			07/04/2023	\$50.00
Mailing Addre					
129 Hedge	es Cv				
City, State, Zi	<b>p Code</b> IS 38655-1146				
Name of Emp	loyer (Required)				
Kent Stat	e University				
Occupation (I				Aggregate year-to-date	\$285.00
Source:	Corporation	PAC Individual	Loan	Date	Amount of each
	Other (please spec	cify)		(Mo., Day, Year)	receipt this period
Full Name Dana Gonz	alez			07/15/2023	\$25.00
Mailing Addre	ess				
3663 Jame	es Monroe Dr				
City, State, Zi					
	MS 39213-3020				
Name of Emp	loyer (Required) oyed				
Occupation (I				Aggregate year-to-date	\$280.00
Source:	Corporation	PAC Individual	Loan	Date	Amount of each receipt this
	Other (please spec	cify)		(Mo., Day, Year)	period
Full Name Shirley N	Martin			07/16/2023	\$250.00
Mailing Addre					
113 Estel					
City, State, Zi					
ATCHODUTE	ρ <b>ιοαθ</b> , MS 39180-9799	3			
Name of Emp	, MS 39180-9799 loyer (Required)	)			
Name of Emp	NS 39180-9799 loyer (Required) byed	)			
Name of Emp	loyer (Required) yed Required)	)		Aggregate year-to-date	\$800.00
Name of Emplo	loyer (Required) yed Required)	□PAC ✓Individual	Loan	year-to-date  Date	Amount of each
Name of Emplo Not Emplo Occupation (I	NS 39180-9799 loyer (Required) byed Required) byed	PAC ✓Individual	☐ Loan	year-to-date	
Name of Emplo Not Emplo Occupation (I	loyer (Required) byed Required) byed Corporation Other (please spec	PAC ✓Individual	☐ Loan	year-to-date  Date	Amount of each receipt this
Name of Emplo Not Emplo Occupation (I Not Emplo Source: Full Name Russell S Mailing Addre	loyer (Required) byed  Required) byed  Corporation  Other (please specialists)	PAC ✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (I Not Emplo Source: Full Name Russell S Mailing Addre	NS 39180-9799  loyer (Required)  eyed  Required)  yed  Corporation  Other (please specially)  mith  ess  agton Rd	PAC ✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (I Not Emplo Source:  Full Name Russell S Mailing Addre 158 Arlir City, State, Zi	NS 39180-9799  loyer (Required)  oyed  Required)  oyed  Corporation  Other (please specially assumed to the please specially a	PAC ✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (I Not Emplo Source:  Full Name Russell S Mailing Addre 158 Arlir City, State, Zi Beaumont,	NS 39180-9799  loyer (Required)  eyed  Required)  yed  Corporation  Other (please specially)  mith  ess  agton Rd	PAC ✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (I Not Emplo Source:  Full Name Russell S Mailing Addre 158 Arlir City, State, Zi Beaumont, Name of Emp	NS 39180-9799  Nover (Required)  Oyed  Corporation  Other (please special spec	PAC ✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Russell S Mailing Addra 158 Arlir City, State, Zi Beaumont, Name of Emp Bentley S Occupation (I	NS 39180-9799  Nover (Required)  Noved  Required)  Oyed  Corporation  Other (please specially assessed as a second	□PAC ☑Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Duncan M. Gray III	07/17/2023	\$50.00
Mailing Address		
110 Philip Rd		
City, State, Zip Code		
Oxford, MS 38655-2014		
Name of Employer (Required) Nativity Episcopal Church		
	A	
Occupation (Required) Clergy	Aggregate year-to-date	\$550.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Raleigh Byars	07/08/2023	\$25.00
Mailing Address		
48 County Road 229U		
City, State, Zip Code		
Oxford, MS 38655		
Name of Employer (Required)		
Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$675.00
Source: Corporation PAC /Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this
		period
Full Name Ashley N. Wicks	07/29/2023	\$500.00
Full Name Ashley N. Wicks Mailing Address	07/29/2023	<u>.</u>
Full Name Ashley N. Wicks  Mailing Address 63 Springridge Cir	07/29/2023	<u>.</u>
Full Name Ashley N. Wicks Mailing Address	07/29/2023	<u>.</u>
Full Name Ashley N. Wicks  Mailing Address 63 Springridge Cir  City, State, Zip Code Jackson, MS 39211-2903	07/29/2023	<u>.</u>
Full Name Ashley N. Wicks  Mailing Address 63 Springridge Cir  City, State, Zip Code	07/29/2023	<u>.</u>
Full Name Ashley N. Wicks  Mailing Address 63 Springridge Cir  City, State, Zip Code Jackson, MS 39211-2903  Name of Employer (Required) Butler Snow  Occupation (Required)	Aggregate year-to-date	<u>.</u>
Full Name Ashley N. Wicks  Mailing Address 63 Springridge Cir  City, State, Zip Code Jackson, MS 39211-2903  Name of Employer (Required) Butler Snow	Aggregate	\$500.00 \$700.00 <b>Amount of each</b>
Full Name Ashley N. Wicks  Mailing Address 63 Springridge Cir  City, State, Zip Code Jackson, MS 39211-2903  Name of Employer (Required) Butler Snow  Occupation (Required) Attorney	Aggregate year-to-date	\$500.00 \$700.00
Full Name Ashley N. Wicks  Mailing Address 63 Springridge Cir  City, State, Zip Code Jackson, MS 39211-2903  Name of Employer (Required) Butler Snow  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan	Aggregate year-to-date	\$700.00  Amount of each receipt this
Full Name Ashley N. Wicks  Mailing Address 63 Springridge Cir  City, State, Zip Code Jackson, MS 39211-2903  Name of Employer (Required) Butler Snow  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Ann M. Steinmetz  Mailing Address	Aggregate year-to-date  Date (Mo., Day, Year)	\$700.00  Amount of each receipt this period
Full Name Ashley N. Wicks  Mailing Address 63 Springridge Cir  City, State, Zip Code Jackson, MS 39211-2903  Name of Employer (Required) Butler Snow  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Ann M. Steinmetz  Mailing Address PO Box 2412	Aggregate year-to-date  Date (Mo., Day, Year)	\$700.00  Amount of each receipt this period
Full Name Ashley N. Wicks  Mailing Address 63 Springridge Cir  City, State, Zip Code Jackson, MS 39211-2903  Name of Employer (Required) Butler Snow  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Ann M. Steinmetz  Mailing Address PO Box 2412  City, State, Zip Code	Aggregate year-to-date  Date (Mo., Day, Year)	\$700.00  Amount of each receipt this period
Full Name Ashley N. Wicks  Mailing Address 63 Springridge Cir  City, State, Zip Code Jackson, MS 39211-2903  Name of Employer (Required) Butler Snow  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Ann M. Steinmetz  Mailing Address PO Box 2412  City, State, Zip Code Bay St Louis, MS 39521-2412	Aggregate year-to-date  Date (Mo., Day, Year)	\$700.00  Amount of each receipt this period
Full Name Ashley N. Wicks  Mailing Address 63 Springridge Cir  City, State, Zip Code Jackson, MS 39211-2903  Name of Employer (Required) Butler Snow  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Ann M. Steinmetz  Mailing Address PO Box 2412  City, State, Zip Code	Aggregate year-to-date  Date (Mo., Day, Year)	\$700.00  Amount of each receipt this period
Full Name Ashley N. Wicks  Mailing Address 63 Springridge Cir  City, State, Zip Code Jackson, MS 39211-2903  Name of Employer (Required) Butler Snow  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Ann M. Steinmetz  Mailing Address PO Box 2412  City, State, Zip Code Bay St Louis, MS 39521-2412  Name of Employer (Required)	Aggregate year-to-date  Date (Mo., Day, Year)	\$700.00  Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please spec	☐ PAC ✓ Individual ify)	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Pl	unkett			07/21/2023	\$200.00
Mailing Addre				-	
138 N Rid					
City, State, Zi					
	MS 38866-5763				
Name of Emp	loyer (Required) yed				
Occupation (F	Required)			Aggregate year-to-date	\$1,628.45
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
	Other (please spec			(Mo., Day, Year)	receipt this period
Full Name Eric Goff	-			07/16/2023	\$500.00
Mailing Addre				1	
City, State, Zi				-	
-	x 78701-2862				
Name of Emp	loyer (Required)				
Goff Poli	су				
Occupation (F				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
oource.			Loan	(Mo., Day, Year)	receipt this
	Other (please spec	іту)			period
Full Name Augusta S		iry)		07/26/2023	\$25.00
Augusta S  Mailing Addre	cattergood	iry)		07/26/2023	<del>-</del>
Augusta S Mailing Addre	cattergood ess tary Rd NW	iry)		07/26/2023	<del>-</del>
Augusta S  Mailing Addre 3050 Mili  City, State, Zi	cattergood ess tary Rd NW			07/26/2023	<del>-</del>
Augusta S Mailing Addre 3050 Mili City, State, Zi Washingto	cattergood ess tary Rd NW p Code en, DC 20015-134 loyer (Required)			07/26/2023	<del>-</del>
Augusta S Mailing Addre 3050 Milii City, State, Zi Washingto Name of Emp	cattergood ess tary Rd NW p Code on, DC 20015-134 loyer (Required) eyed Required)			Aggregate year-to-date	<del>-</del>
Augusta S Mailing Addre 3050 Milii City, State, Zi Washingto Name of Emp Not Emplo	cattergood ess tary Rd NW p Code on, DC 20015-134 loyer (Required) eyed Required)	4	□Loan	Aggregate	\$25.00
Augusta S Mailing Addre 3050 Milii City, State, Zi Washingto Name of Emp Not Emplo Occupation (F Not Emplo	cattergood ess tary Rd NW p Code on, DC 20015-134 loyer (Required) eyed Required)	4 □PAC ☑Individual	Loan	Aggregate year-to-date	\$25.00
Augusta S Mailing Addre 3050 Milii City, State, Zi Washingto Name of Emp Not Emplo Occupation (F Not Emplo Source:	cattergood ess tary Rd NW p Code on, DC 20015-134 loyer (Required) oyed Required) oyed Corporation Other (please spec	4 □PAC ☑Individual	Loan	Aggregate year-to-date Date	\$25.00 \$275.00 Amount of each receipt this
Augusta S Mailing Addre 3050 Milii City, State, Zi Washingto Name of Emplo Occupation (F Not Emplo Source: Full Name Juanita E	cattergood  ess tary Rd NW p Code on, DC 20015-134 loyer (Required) oyed  Corporation  Other (please spec	4 □PAC ☑Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$25.00 \$275.00  Amount of each receipt this period
Augusta S Mailing Addre 3050 Milii City, State, Zi Washingto Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name Juanita B Mailing Addre PO Box 40	scattergood ess tary Rd NW p Code on, DC 20015-134 loyer (Required) byed Corporation Other (please spec	4 □PAC ☑Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$25.00 \$275.00  Amount of each receipt this period
Augusta S Mailing Addre 3050 Milii City, State, Zi Washingto Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name Juanita B Mailing Addre PO Box 40 City, State, Zi	scattergood ess tary Rd NW p Code on, DC 20015-134 loyer (Required) byed Corporation Other (please spec	4 □PAC ☑Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$25.00 \$275.00  Amount of each receipt this period
Augusta S Mailing Addre 3050 Milli City, State, Zi Washingto Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name Juanita E Mailing Addre PO Box 40 City, State, Zi Oxford, M Name of Emp	cattergood  css tary Rd NW  p Code on, DC 20015-134  loyer (Required) oyed  Corporation  Other (please spec  soutin  css co p Code as 38655-0400  loyer (Required)	4 □PAC ☑Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$25.00 \$275.00  Amount of each receipt this period
Augusta S Mailing Addre 3050 Milii City, State, Zi Washingto Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name Juanita E Mailing Addre PO Box 40 City, State, Zi Oxford, M	Cattergood  PSS  tary Rd NW  P Code  On, DC 20015-134  Required)  Oyed  Corporation  Other (please spector)  Soutin  PSS  OP Code  IS 38655-0400  Required)  Oyed	4 □PAC ☑Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$25.00 \$275.00  Amount of each receipt this period

Name of Candidate or	Committee	Brandon	Presley

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 Reporting Period
 7/1/2023
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 7/29/2023

Source:	☐ Corporation☐ Other (please spe	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jessica E	Parkins				07/18/2023	\$500.00
Mailing Addre						
71 Woodla						
City, State, Zi	p Code					
Starkvill	e, MS 39759-26	97				
Name of Emp	loyer (Required)					
<b>Occupation (I</b> Librariar	• •				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	cify)			(Mo., Day, Year)	receipt this period
Full Name Ann M. St	teinmetz				07/29/2023	\$500.00
Mailing Addre						
City, State, Zi						
	ouis, MS 39521-	2412				
Name of Emp	loyer (Required) oyed					
Occupation (I	Required)				Aggregate year-to-date	\$600.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	ecify)			(Mo., Day, Year)	receipt this period
<b>Full Name</b> Edson Gri	swold				07/01/2023	\$22.50
Mailing Addre	256					
1 C O O O D -						
	menton St					
City, State, Zi	p Code					
City, State, Zi	menton St					
City, State, Zi	p Code co 80231-5602 loyer (Required)					
City, State, Zi Denver, C	p Code co 80231-5602 loyer (Required) byed Required)				Aggregate year-to-date	\$307.50
City, State, Zi Denver, C Name of Emp Not Emplo Occupation (I	p Code co 80231-5602  loyer (Required) cyed  Required) cyed  Corporation	PAC	☐Individual	Loan	year-to-date Date	Amount of each
City, State, Zi Denver, C Name of Emplo Not Emplo Occupation (I Not Emplo	p Code CO 80231-5602  loyer (Required) byed  Required) byed	_	☐Individual	Loan	year-to-date	
City, State, Zi Denver, C Name of Emp Not Emplo Occupation (I Not Emplo Source:	p Code co 80231-5602  loyer (Required) cyed  Required) cyed  Corporation	_	☐Individual	Loan	year-to-date Date	Amount of each receipt this
City, State, Zi Denver, C Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Horne & E Mailing Addre	renton St  p Code  co 80231-5602  loyer (Required)  byed  Corporation  Corporation  Payne, PLLC  ess	_	☐ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Denver, C Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Horne & E Mailing Addre	renton St  p Code  co 80231-5602  loyer (Required)  byed  Required)  yed  Corporation  Other (please species)  Payne, PLLC  ess  254	_	☐ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Denver, C Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Horne & E Mailing Addre PO Box 27 City, State, Zi	renton St  p Code  co 80231-5602  loyer (Required)  byed  Corporation  Other (please specially of the place o	_	☐ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Denver, C Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Horne & E Mailing Addre PO Box 27 City, State, Zi Madison,	renton St  p Code  co 80231-5602  loyer (Required)  byed  Required)  yed  Corporation  Other (please species)  Payne, PLLC  ess  254	_	☐ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Denver, C Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Horne & E Mailing Addre PO Box 27 City, State, Zi Madison,	renton St p Code co 80231-5602  loyer (Required) byed  Corporation  Other (please spectage)  Payne, PLLC  Payse  Code MS 39130-2754  loyer (Required)	_	☐ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate	e or Committee Brandon	Presley	
Reporting Period	7/1/2023	through	7/29/2023

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Source:	Corporation Other (please speci	☐PAC ✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jan F. Ga	adow			07/25/2023	\$100.00
Mailing Addre					
144 Brae					
City, State, Zi Jackson,	<b>p Code</b> MS 39211-2501				
	loyer (Required)				
Not Emplo					
Occupation (I	Required)			Aggregate year-to-date	\$550.00
Source:	Corporation	PAC Individual	Loan	Date	Amount of each receipt this
	Other (please speci	ify)		(Mo., Day, Year)	period
Full Name Rheta Joh	nnson			07/25/2023	\$25.00
Mailing Addre	ess			1	
	ty Road 259			_	
City, State, Zi	<b>p Code</b> 38852-8542				
	loyer (Required)			1	
Not Emplo	• ,				
Occupation (I				Aggregate year-to-date	\$1,296.00
Source:	Corporation	PAC Individual	Loan	Date	Amount of each
				1	rocoint thic
	Other (please speci	ify)		(Mo., Day, Year)	receipt this period
Full Name Ted Atkin		ify)		(Mo., Day, Year)	
	nson	ify)			period
Ted Atkin  Mailing Addre  1000 E Br	ess coad St	ify)			period
Ted Atkin  Mailing Addre  1000 E Br  City, State, Zi	ess coad St				period
Mailing Address 1000 E Br City, State, Zi West Poin Name of Emp	ess coad St p Code nt, MS 39773-3230 loyer (Required)	6			period
Mailing Address 1000 E Br City, State, Zi West Poir Name of Emp Mississip	nson  proad St  proad St	6		07/06/2023	<b>period</b> \$20.00
Mailing Address 1000 E Br City, State, Zi West Poin Name of Emp	nson  poss  coad St  p Code  nt, MS 39773-3230  cloyer (Required)  ppi State Universe	6			period
Mailing Address 1000 E Br City, State, Zi West Poin Name of Emp Mississip Occupation (I	nson  poss  coad St  p Code  nt, MS 39773-3230  cloyer (Required)  ppi State Universe	6	Loan	Aggregate year-to-date  Date	\$20.00 \$280.00 Amount of each
Mailing Address 1000 E Br City, State, Zi West Poir Name of Emp Mississir Occupation (I	p Code nt, MS 39773-3230 loyer (Required) ppi State Universe	6 sity □PAC ☑Individual	Loan	Aggregate year-to-date	\$20.00 \$280.00
Mailing Address 1000 E Br City, State, Zi West Poir Name of Emp Mississip Occupation (I Professor Source:	p Code nt, MS 39773-3230 loyer (Required) opi State Universe Required)  Corporation Other (please speci	6 sity □PAC ☑Individual	Loan	Aggregate year-to-date  Date	\$20.00 \$280.00 Amount of each receipt this
Mailing Address 1000 E Br City, State, Zi West Poir Name of Emp Mississir Occupation (I Professor Source:	ason  pss  coad St  p Code  nt, MS 39773-3230  loyer (Required)  ppi State Universe  Required)  Corporation  Other (please specient)	6 sity □PAC ☑Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$20.00 \$280.00 Amount of each receipt this period
Mailing Address 1000 E Br City, State, Zi West Poir Name of Emp Mississip Occupation (I Professor Source:	ason  pss  coad St  p Code  nt, MS 39773-3230  cloyer (Required)  ppi State Universe  Required)  Corporation  Other (please speciently  pss	6 sity □PAC ☑Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$20.00 \$280.00 Amount of each receipt this period
Mailing Address 1000 E Br City, State, Zi West Poir Name of Emp Mississip Occupation (I Professor Source:  Full Name Robert Ke Mailing Addres PO Box 10 City, State, Zi	ason  pss  coad St  p Code  at, MS 39773-3230  loyer (Required)  ppi State Universe  Required)  Corporation  Other (please specially  pss  1687  p Code	6 sity  ☐PAC ☑Individual ify)	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$20.00 \$280.00 Amount of each receipt this period
Mailing Address 1000 E Br City, State, Zi West Poir Name of Emp Mississir Occupation (I Professor Source:  Full Name Robert Ke Mailing Addres PO Box 10 City, State, Zi Birmingha	p Code  Corporation  Corporation  Other (please specient)  P Code  Corporation  Corporation  Double (please specient)  Corporation  A Corporation  Double (please specient)  Corporation  A Corporation  Double (please specient)  Corporation  A Corporation	6 sity  ☐PAC ☑Individual ify)	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$20.00 \$280.00 Amount of each receipt this period
Mailing Address 1000 E Br City, State, Zi West Poir Name of Emp Mississip Occupation (I Professor Source:  Full Name Robert Ke Mailing Address PO Box 10 City, State, Zi Birmingha Name of Emp	ason  pss  coad St  p Code  at, MS 39773-3230  loyer (Required)  ppi State Universe  Required)  Corporation  Other (please specially  pss  1687  p Code	6 sity  ☐PAC ☑Individual ify)	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$20.00 \$280.00 Amount of each receipt this period
Mailing Address 1000 E Br City, State, Zi West Poir Name of Emp Mississip Occupation (I Professor Source:  Full Name Robert Ke Mailing Address PO Box 10 City, State, Zi Birmingha Name of Emp	coad St p Code nt, MS 39773-3230 loyer (Required) ppi State Universe Required) c Corporation Other (please specially pess 01687 p Code nm, AL 35210-6687 loyer (Required) nd Builders	6 sity  ☐PAC ☑Individual ify)	Loan	Aggregate year-to-date  Date (Mo., Day, Year)  07/26/2023  Aggregate	\$20.00 \$280.00 Amount of each receipt this period
Mailing Address 1000 E Br City, State, Zi West Poin Name of Emp Mississip Occupation (I Professor Source:  Full Name Robert Ke Mailing Addres PO Box 10 City, State, Zi Birmingha Name of Emp	coad St p Code nt, MS 39773-3230 loyer (Required) ppi State Universe Required) c Corporation Other (please specially pess 01687 p Code nm, AL 35210-6680 loyer (Required) nd Builders Required)	6 sity  ☐PAC ☑Individual ify)	Loan	Aggregate year-to-date  Date (Mo., Day, Year)  07/26/2023	\$280.00 \$280.00  Amount of each receipt this period \$1,000.00

Name of Candidate or	Committee	Brandon	Presley

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: October ORAC Chathidael Otto	T Data	Amount of each
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full Name David W. Baria	07/29/2023	\$1,000.00
Mailing Address		
424 Main St		
City, State, Zip Code Bay Saint Louis, MS 39520-3425		
Name of Employer (Required)		
Cosmich		
Occupation (Required) Attorney	Aggregate year-to-date	\$4,500.00
Source: ☐ Corporation ☐ PAC ✓ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	07/21/2023	\$25.00
Kenneth Groue		
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	\$725.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Philip B. Jones	07/16/2023	\$250.00
Mailing Address 1141 19th Ave E		
City, State, Zip Code		
Seattle, WA 98112-3504		
Name of Employer (Required)		
Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan	Date	Amount of each receipt this
Other (please specify)	(Mo., Day, Year)	period
Full Name Lee Jackson	07/28/2023	\$100.00
Mailing Address 5157 MONTAVALE		
City, State, Zip Code Southaven, MS 38672		
Name of Employer (Required)	$\dashv$	
Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
		\$300.0

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name	07/11/2023	\$5.00
Suzanne Robinson		40.00
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	\$1,030.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name	07/13/2023	\$6.00
Graham Slakie		Ŷ O • O O
Mailing Address 4706 Buckingham Dr		
City, State, Zip Code		
Chattanooga, TN 37421-1108		
Name of Employer (Required) Regal		
Occupation (Required)	Aggregate	\$658.60
Usher	year-to-date	
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	07/04/2023	\$20.00
Edson Griswold		420.00
Mailing Address 1699 S Trenton St		
City, State, Zip Code		
Denver, CO 80231-5602		
Name of Employer (Required)		
Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$307.50
Source: ☐ Corporation ☐ PAC ✓ Individual ☐ Loan	Date	Amount of each receipt this
Other (please specify)	(Mo., Day, Year)	period
Full Name	07/14/2023	\$100.00
Linda E. McDaniel		
Linda E. McDaniel  Mailing Address		
Linda E. McDaniel  Mailing Address 110 Greenbriar Pl  City, State, Zip Code		
Linda E. McDaniel  Mailing Address  110 Greenbriar Pl  City, State, Zip Code  Hattiesburg, MS 39402-2532  Name of Employer (Required)		
Linda E. McDaniel  Mailing Address  110 Greenbriar Pl		

Name of Candidate or Committee	Brandon	Presley	
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 Reporting Period
 7/1/2023
 through
 7/29/2023

Source:	Corporation Other (please spec	□ PAC	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
<b>Full Name</b> Anita Yar	brough			07/25/2023	\$25.00
Mailing Addre					
City, State, Zi					
•	MS 38851-7432				
Name of Emp	loyer (Required) oyed				
Occupation (I				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please spec	city)		- (Mo., Day, Tear)	period
Full Name Richard A	lycock			07/17/2023	\$500.00
Mailing Address					
City, State, Zi	-				
Sardis, M	IS 38666-3401				
Name of Emp One GI	loyer (Required)				
Occupation (I				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
	Other (please spec	cify)		(Mo., Day, Year)	receipt this period
Full Name Sally W.	Featherstone			07/28/2023	\$300.00
Mailing Addre					
City, State, Zi	p Code				
Oxford, M	IS 38655-2918				
Name of Emp Not Emplo	loyer (Required) oyed				
Occupation (I				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC Individual	Loan	Date	Amount of each receipt this
	Other (please spec	cify)		(Mo., Day, Year)	period
<b>Full Name</b> Joanna Sh	10WS			07/21/2023	\$75.00
Mailing Addre					
City, State, Zi	p Code				
Hattiesbu	irg, MS 39402-87	23			
	loyer (Required)				
Not Emplo	yed				
Occupation (I				1	
Not Emplo				Aggregate year-to-date	\$625.00

Name of Candidate or	Committee	Brandon	Presley

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please specif	☐ PAC ✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brad Pigott				07/05/2023	\$1,000.00
Mailing Address				1	
775 N Congr					
City, State, Zip C			-	1	
	39202-3009			<b>!</b>	
Name of Employ	er (Required)			1	
Pigott Firm	1				
Occupation (Req	juired)			Aggregate year-to-date	\$2,000.00
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
	Other (please specif			(Mo., Day, Year)	receipt this period
Full Name Meredith Go	owan Le Goff			07/15/2023	\$25.00
Mailing Address 1629 Acadia					
City, State, Zip C				1	
-	39211-5644			<b>!</b>	
Name of Employe				1	
Self Employ					
Occupation (Req	luired)			Aggregate year-to-date	\$271.00
		DAC Zindividual		Date	Amount of each
Source:	Corporation  Other (please specif	PAC ✓Individual	Loan	(Mo., Day, Year)	receipt this period
Full Name Kenneth Gro	oue			07/25/2023	\$25.00
Mailing Address 128 Seaside					
City, State, Zip C Ocean Sprin	ode ngs, MS 39564-5	5145			
Name of Employe					
Occupation (Req				Aggregate year-to-date	\$725.00
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
	Other (please specif		Loan	(Mo., Day, Year)	receipt this period
Full Name William H.	Jones			07/18/2023	\$500.00
Mailing Address PO Box 282					
City, State, Zip C Petal, MS 3					
Name of Employe					
Occupation (Req				Aggregate	\$1,500.00

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation ☐ ☐ Other (please specify)	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	+ h a m			07/29/2023	\$100.00
Robert La Mailing Addre					
Ū	erson Pkwy				
City, State, Zi	-				
Hernando,	MS 38632-5905				
Name of Emplo	loyer (Required) yed				
Occupation (F				Aggregate year-to-date	\$950.00
Source:	Corporation	PAC ✓ Individual	Loan	Date	Amount of each
	Other (please specify	)		(Mo., Day, Year)	receipt this period
Full Name William R	. Ruffin			07/11/2023	\$500.00
Mailing Addre					
City, State, Zi					
	gs, MS 39422-0565				
Name of Emp	loyer (Required)			•	
Occupation (F				Aggregate	\$1,500.00
Attorney	,			year-to-date	71,300.00
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each receipt this
	Other (please specify	)		(Mo., Day, Year)	
Full Name	Other (please specify	)		(Mo., Day, Year)	period \$250.00
Kelly R.	O'Neal Jr	)			period
Kelly R.  Mailing Addre	O'Neal Jr	)			period
Kelly R.	O'Neal Jr ss yant Rd	)			period
Kelly R.  Mailing Addre 56 J C Br  City, State, Zi	O'Neal Jr ss yant Rd				period
Kelly R.  Mailing Addre 56 J C Br  City, State, Zi Hattiesbu  Name of Emp	O'Neal Jr ss yant Rd p Code				period
Kelly R.  Mailing Addre 56 J C Br  City, State, Zi Hattiesbu  Name of Emp	O'Neal Jr  ss yant Rd p Code rg, MS 39401-8447 loyer (Required) rg Clinic Required)				period
Kelly R.  Mailing Address 56 J C Br  City, State, Zij Hattiesbu  Name of Emp Hattiesbu  Occupation (F Physician	O'Neal Jr  SS  yant Rd  p Code  rg, MS 39401-8447  loyer (Required)  rg Clinic  Required)		□Loan	07/24/2023  Aggregate year-to-date	\$250.00 \$250.00
Kelly R.  Mailing Addre 56 J C Br  City, State, Zin Hattiesbu  Name of Emp Hattiesbu  Occupation (F	O'Neal Jr  ss yant Rd p Code rg, MS 39401-8447 loyer (Required) rg Clinic Required)	PAC ☑Individual	Loan	07/24/2023 Aggregate	<b>period</b> \$250.00
Mailing Address 56 J C Br City, State, Zig Hattiesbu Name of Emp Hattiesbu Occupation (F Physician Source:	O'Neal Jr  SS  yant Rd  COde  rg, MS 39401-8447  Corporation  Corporation  Other (please specify	PAC ☑Individual	Loan	Aggregate year-to-date  Date	\$250.00 \$250.00 Amount of each receipt this
Kelly R.  Mailing Addres 56 J C Br  City, State, Zin Hattiesbu Name of Emp Hattiesbu Occupation (F Physician Source:  Full Name David Kay	O'Neal Jr  SS  yant Rd  p Code  rg, MS 39401-8447  loyer (Required)  rg Clinic  Required)  Corporation  Other (please specify	PAC ☑Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$250.00 Amount of each receipt this period
Kelly R.  Mailing Addres 56 J C Br  City, State, Zij Hattiesbu Name of Emp Hattiesbu Occupation (F Physician Source:  Full Name David Kay Mailing Addres 123 Notti	O'Neal Jr  ss yant Rd p Code rg, MS 39401-8447 loyer (Required) rg Clinic Required)  Corporation  Other (please specify ee ss ngham Ter	PAC ☑Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$250.00 Amount of each receipt this period
Kelly R.  Mailing Addres 56 J C Br  City, State, Zij Hattiesbu  Name of Emp Hattiesbu  Occupation (F Physician  Source:  Full Name David Kay  Mailing Addres 123 Notti  City, State, Zij	O'Neal Jr  ss yant Rd p Code rg, MS 39401-8447 loyer (Required) rg Clinic Required)  Corporation  Other (please specify ee ss ngham Ter	PAC ☑Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$250.00 Amount of each receipt this period
Kelly R.  Mailing Address 56 J C Br  City, State, Zig Hattiesbu  Name of Emp Hattiesbu  Occupation (F Physician Source:  Full Name David Kay  Mailing Address 123 Notti  City, State, Zig Buffalo, Name of Emp	O'Neal Jr  SS  yant Rd  Code  rg, MS 39401-8447  Coyer (Required)  rg Clinic  Required)  Corporation  Other (please specify  e  SS  ngham Ter  Code  NY 14216-3504  Coyer (Required)	PAC ☑Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$250.00 Amount of each receipt this period
Kelly R.  Mailing Address 56 J C Br  City, State, Zig Hattiesbu  Name of Emp Hattiesbu  Occupation (F Physician Source:  Full Name David Kay  Mailing Address 123 Notti  City, State, Zig Buffalo, Name of Emp	O'Neal Jr  SS  yant Rd  P Code  rg, MS 39401-8447  loyer (Required)  rg Clinic  Required)  Corporation  Other (please specify  se  ss  ngham Ter  P Code  NY 14216-3504  loyer (Required)  y at Buffalo	PAC ☑Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$250.00 Amount of each receipt this period

Name of Candidate or Committee Brandon Presle	эy
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Reporting Period 7/1/2023

1/2023 **thro**u

through 7/29/2023

Source:	□ Corporation       □ PAC       ✓ Individual       □ Loan         □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslee Li	nn	07/15/2023	\$250.00
Mailing Addre			
601 Thras			
City, State, Zip			
	IS 38655-5971		
Name of Empl	loyer (Required)		
Not Emplo	yed		
Occupation (F		Aggregate year-to-date	\$450.00
Source:	Corporation PAC ✓Individual Loan	Date	Amount of each
	Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Herman M.	Taylor	07/15/2023	\$200.00
Mailing Addre	ty Road 506		
City, State, Zij			
	MS 38868-9133		
Name of Empl	loyer (Required)		
Universit	y of Mississippi Medical Center		
Occupation (F		Aggregate year-to-date	\$300.00
Source:	Corporation PAC ✓Individual Loan	Date	Amount of each
Source.	Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name		07/01/0000	
Emily Fox		07/21/2023	\$25.00
Emily Fox  Mailing Addre  215 N Ran	ess	07/21/2023	\$25.00
Mailing Addre 215 N Ran City, State, Zip	kin St p Code	07/21/2023	\$25.00
Mailing Addre 215 N Ran City, State, Zij Natchez,	p Code MS 39120-3339 loyer (Required)	07/21/2023	\$25.00
Mailing Addre 215 N Ran City, State, Zip Natchez,	p Code MS 39120-3339 loyer (Required)	Aggregate year-to-date	\$25.00
Mailing Addre 215 N Ran City, State, Zip Natchez, Name of Empl Not Emplo Occupation (F	p Code MS 39120-3339 Hoyer (Required) yed Required)	Aggregate	·
Mailing Addre 215 N Ran City, State, Zig Natchez, Name of Empl Not Emplo Occupation (F Retired Source:	p Code MS 39120-3339 loyer (Required)	Aggregate year-to-date	\$625.00
Mailing Addre 215 N Ran City, State, Zin Natchez, Name of Emplo Not Emplo Occupation (F Retired	p Code MS 39120-3339  loyer (Required)  yed  Corporation PAC Individual Loan  Other (please specify)	Aggregate year-to-date	\$625.00  Amount of each receipt this
Mailing Addre 215 N Ran City, State, Zin Natchez, Name of Emplo Not Emplo Occupation (F Retired Source:	p Code MS 39120-3339 loyer (Required) yed  Required)  Corporation PAC Individual Loan Other (please specify)	Aggregate year-to-date  Date (Mo., Day, Year)	\$625.00  Amount of each receipt this period
Mailing Addre 215 N Ran City, State, Zip Natchez, Name of Emplo Occupation (F Retired Source: Full Name Henry Hol Mailing Addre 1517 Belm City, State, Zip	Required)  Corporation PAC Individual Loan Other (please specify)  mes  pss  pcode  MS 39120-3339  Ioyer (Required)  yed  Corporation PAC Individual Loan  Other (please specify)	Aggregate year-to-date  Date (Mo., Day, Year)	\$625.00  Amount of each receipt this period
Mailing Addre 215 N Ran City, State, Zin Natchez, Name of Emplo Not Emplo Occupation (F Retired Source: Full Name Henry Hol Mailing Addre 1517 Belm City, State, Zin Jackson,	p Code MS 39120-3339  loyer (Required)  yed  Required)  Corporation PAC Individual Loan  Other (please specify)  mes  iss iont St p Code MS 39202-1202  loyer (Required)	Aggregate year-to-date  Date (Mo., Day, Year)	\$625.00  Amount of each receipt this period
Mailing Addre 215 N Ran City, State, Zin Natchez, Name of Emplo Occupation (F Retired Source: Full Name Henry Hol Mailing Addre 1517 Belm City, State, Zin Jackson, Name of Emplo	kin St p Code MS 39120-3339 loyer (Required) yed Required)  Corporation PAC Individual Loan Other (please specify)  mes ess cont St p Code MS 39202-1202 loyer (Required) yed Required)	Aggregate year-to-date  Date (Mo., Day, Year)	\$625.00  Amount of each receipt this period

Name of Candidate or Committee Ba	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Wig	raina				07/29/2023	\$500.00
Mailing Addre						
•	nmerce St					
City, State, Zi						
	MS 39120-3507					
Not Emplo	oloyer (Required) Dyed					
Occupation (					Aggregate year-to-date	\$1,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name James Kee	eton				07/24/2023	\$200.00
Mailing Addre						
1333 Belv						
City, State, Zi	•					
	MS 39202-1208					
Name of Emp	oloyer (Required) Loyed					
Occupation (I					Aggregate year-to-date	\$950.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Madeline	Farmer				07/05/2023	\$100.00
Mailing Addre						
City, State, Zi						
•	phia, PA 19146	-4040				
Name of Emp	oloyer (Required) Water					
Occupation (						
	Required)				Aggregate	\$600.00
Attorney	Required)				Aggregate year-to-date	\$600.00
	Corporation	PAC	✓Individual	Loan	year-to-date Date	Amount of each receipt this
Source:			✓ Individual	Loan	year-to-date	Amount of each receipt this period
Attorney	Corporation Other (please sp		✓ Individual	Loan	year-to-date Date	Amount of each receipt this
Source: Full Name Harold Fi	Corporation Other (please sp		✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Source:  Full Name Harold Fi  Mailing Addre 118 W Jef City, State, Zi	Corporation Other (please space) Lore ess Efferson Ave ip Code	pecify)	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold Fi Mailing Addre 118 W Jef City, State, Zi Greenwood	Corporation Other (please space) Lore ess Eferson Ave p Code d, MS 38930-353	pecify)	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold Fi Mailing Addre 118 W Jef City, State, Zi Greenwood	Corporation Other (please space) Core Core Core Core Core Core Core Core	pecify)	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Harold Fi Mailing Addre 118 W Jef City, State, Zi Greenwood Name of Emp	Corporation Other (please space) Core Core Core Core Core Core Core Core	pecify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dan Webb					07/28/2023	\$250.00
Mailing Addre						
PO Box 49						
City, State, Zip	Code S 38802-0496					
	l <b>oyer(Required)</b> ers & Williams	s PLLC				
Occupation (Required) Attorney					Aggregate year-to-date	\$10,250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Linda Foshee					07/19/2023	\$4.60
Mailing Addre						
Not Emplo	<u> </u>					
City, State, Zip	<b>p Code</b> rg, MS 39402					
	loyer (Required)					
Not Emplo	• • • •					
Occupation (Required) Not Employed					Aggregate year-to-date	\$482.60
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)		_	(Mo., Day, Year)	receipt this period
Full Name Odell Tho	mpson Jr				07/13/2023	\$100.00
Mailing Addre						
001 00110						
City State Zi						
	<b>Code</b> S 39532-7023					
Biloxi, M	Code S 39532-7023 Coyer (Required)					
Biloxi, M	code is 39532-7023 loyer (Required) yed Required)				Aggregate year-to-date	\$600.00
Biloxi, Mame of Emp	code is 39532-7023 loyer (Required) yed Required)	PAC	✓Individual	Loan		Amount of each
Biloxi, M Name of Emp Not Emplo Occupation (F Not Emplo	o Code IS 39532-7023 loyer (Required) yed Required) yed		✓Individual	Loan	year-to-date	
Biloxi, M Name of Emp Not Emplo Occupation (F Not Emplo	o Code as 39532-7023 loyer (Required) yed Required) yed Corporation		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Biloxi, M Name of Emp Not Emplo Occupation (F Not Emplo Source:	p Code IS 39532-7023 loyer (Required) yed Required) yed Corporation Other (please sp		✓Individual	Loan	year-to-date Date	Amount of each receipt this
Biloxi, M Name of Emp Not Emplo Occupation (F Not Emplo Source:	co Code SS 39532-7023  Required) Yed Corporation Other (please spoke11y  SS		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Biloxi, M Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name Michael S Mailing Addres 317 Samps City, State, Zi	code as 39532-7023 aloyer (Required) aged aged aged aged aged aged aged aged		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Biloxi, M Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name Michael S Mailing Addre 317 Samps City, State, Zig Houston,	p Code IS 39532-7023 loyer (Required) yed Required) yed Corporation Other (please sp kelly ss on St p Code TX 77003-2411		✓Individual	☐ <b>L</b> oan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Biloxi, M Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name Michael S Mailing Addre 317 Samps City, State, Zi Houston, Name of Emp	p Code IS 39532-7023 loyer (Required) yed Required) yed Corporation Other (please sp kelly ss on St p Code TX 77003-2411 loyer (Required)		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Biloxi, M Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name Michael S Mailing Addre 317 Samps City, State, Zig Houston,	code IS 39532-7023  loyer (Required) yed  Corporation  Other (please specially session Stop Code TX 77003-2411  loyer (Required) ed		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committe	<b>e</b> Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles H	Benvenutti				07/14/2023	\$250.00
Mailing Addre	ess					
City, State, Zi						
Bay Saint	Louis, MS 395	521-2639				
Name of Emp	oloyer (Required)					
Occupation (					Aggregate year-to-date	\$1,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Debra B.	Young				07/24/2023	\$100.00
Mailing Addre	ess y Road 3024					
City, State, Zi						
	MS 38655-9786					
-	oloyer (Required) Cy of Mississip	ppi				
Occupation (	Required)				Aggregate	\$550.00
Academic	Dean				year-to-date	
Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					- 07/06/0000	<u>-</u>
Ethel Tru	ıly				07/06/2023	\$250.00
Mailing Addre						
414 S Rar						
City, State, Zin Natchez,	ip Code MS 39120-3539					
Name of Emp	oloyer (Required)					
Occupation (	Required)				Aggregate year-to-date	\$450.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
000.001	Other (please sp	_	V marviadai	Louii	(Mo., Day, Year)	receipt this period
Full Name William N	McHenry				07/07/2023	\$100.00
Mailing Addre	ess					
	nsview Cv					
City, State, Zi	ip Code MS 39110-7844					
Name of Emp	oloyer (Required)					
Occupation (	Required)				Aggregate year-to-date	\$300.00
Administ	ration				year-to-uate	

Name of Candidate or Committee	Brandon	Presley
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 Reporting Period
 7/1/2023
 through
 7/29/2023

Source:	Corporation Other (please spec	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
<b>Full Name</b> Keith Joh	nnson			07/27/2023	\$50.00
Mailing Addre					
City, State, Zi	ip Code 4S 38651-0421				
Name of Emp	oloyer (Required)				
Occupation (				Aggregate year-to-date	\$600.00
Source:	Corporation Other (please spec	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name Michael E				07/29/2023	<b>period</b> \$1,000.00
Mailing Addre	ess				
City, State, Zi					
Name of Emp	oloyer (Required) Dyed				
Occupation (				Aggregate year-to-date	\$1,000.00
Source:	Corporation Other (please spec	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa Walk	ker			07/21/2023	\$75.00
Mailing Addre	ess nehedge Dr				
<b>City, State, Zi</b> Southaver	<b>p Code</b> n, MS 38671-8876	6			
Name of Emp	oloyer (Required) oyed				
Occupation (Not Emplo				Aggregate year-to-date	\$225.00
Source:	Corporation Other (please spec	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Martha Ki		· //		07/14/2023	\$50.00
Mailing Addre					
_	ess nblewood Dr				
1716 Bran City, State, Zi	nblewood Dr				
1716 Bran City, State, Zi Columbus,	nblewood Dr ip Code MS 39705-1507 ployer (Required)				
1716 Bran City, State, Zi Columbus, Name of Emp	p Code MS 39705-1507  bloyer (Required)  Dyed  Required)			Aggregate year-to-date	\$550.00

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please spe	□ PAC ✓ Indivi		Date (Mo., Day, Year)	Amount of each receipt this period
Full Name				07/26/2023	\$25.00
Don A. Za	troch				¥23.00
Mailing Addre					
2366 17th					
City, State, Zip	<b>p Code</b> 1, MN 55112-52	0.4			
	loyer (Required)	0 1			
Not Emplo					
Occupation (F				Aggregate year-to-date	\$225.00
					A
Source:	Corporation	PAC ✓ Indivi	dualLoan	Date	Amount of each receipt this
	Other (please spe	ecify)		(Mo., Day, Year)	period
Full Name				07/07/2023	\$19.60
Nancy Sel					
Mailing Addre		NT.			
City, State, Zi	gor Chapel Rd	IN			
	MS 38863-9159				
	loyer (Required)				
Not Emplo					
Occupation (F	Required)			Aggregate	\$519.60
Retired				year-to-date	10-000
Source:	Corporation	PAC / Indivi	dual Loan	Date	Amount of each
	Other (please spe		_	(Mo., Day, Year)	receipt this
Full Name				-	receipt this period
Full Name Edson Gri	Other (please spe			(Mo., Day, Year) - 07/08/2023	receipt this
Edson Gri Mailing Addre	Other (please spe			-	receipt this period
Edson Gri Mailing Addre 1699 S Tr	Other (please spensor) swold ss enton St			-	receipt this period
Edson Gri  Mailing Addre  1699 S Tr  City, State, Zi	Swold sss enton St p Code			-	receipt this period
Edson Gri Mailing Addre 1699 S Tr City, State, Zij Denver, C	Swold sss enton St p Code 0 80231-5602			-	receipt this period
Edson Gri Mailing Addre 1699 S Tr City, State, Zij Denver, C	Swold ss enton St Code S0231-5602 Coyer (Required)			-	receipt this period
Edson Gri Mailing Addre 1699 S Tr City, State, Zip Denver, C Name of Emplo	Swold sss enton St p Code 0 80231-5602 loyer (Required) yed			07/08/2023	receipt this period \$25.00
Edson Gri Mailing Addre 1699 S Tr City, State, Zip Denver, C Name of Empl	Swold ss enton St p Code 0 80231-5602 loyer (Required) yed Required)			-	receipt this period
Edson Gri Mailing Addre 1699 S Tr City, State, Zip Denver, C Name of Empl Not Emplo Occupation (F	Swold ss enton St p Code 0 80231-5602 loyer (Required) yed Required)			07/08/2023 Aggregate	\$25.00 \$307.50
Edson Gri Mailing Addre 1699 S Tr City, State, Zip Denver, C Name of Emplo Not Emplo Occupation (F Not Emplo	Swold ss enton St Code 0 80231-5602 loyer (Required) yed Required)	PAC Indivi	dualLoan	Aggregate year-to-date	receipt this period \$25.00
Edson Gri Mailing Addre 1699 S Tr City, State, Zip Denver, C Name of Emplo Not Emplo Occupation (F Not Emplo	Swold  Ss enton St Code O 80231-5602  Coyer (Required) yed Corporation	PAC Indivi	dualLoan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$307.50  Amount of each receipt this period
Edson Gri Mailing Addre 1699 S Tr City, State, Zip Denver, C Name of Emplo Not Emplo Occupation (F Not Emplo Source:	Swold ss enton St Code 0 80231-5602 loyer (Required) yed Required) yed Corporation Other (please specific	PAC Indivi	dual	Aggregate year-to-date  Date	\$25.00 \$307.50 Amount of each receipt this
Edson Gri Mailing Addre 1699 S Tr City, State, Zip Denver, C Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Gail Nich Mailing Addre	Swold  Sss enton St D Code O 80231-5602  Required) yed Corporation Other (please specials)	PAC Indivi	dualLoan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$307.50  Amount of each receipt this period
Edson Gri Mailing Addre 1699 S Tr City, State, Zip Denver, C Name of Empl Not Emplo Occupation (F Not Emplo Source: Full Name Gail Nich Mailing Addre 1822 23rd	Swold  Ss enton St Code O 80231-5602  Coyer (Required) yed Corporation Corporation Other (please specials) olson Ss Ave	PAC Indivi	dual □Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$307.50  Amount of each receipt this period
Edson Gri Mailing Addre 1699 S Tr City, State, Zij Denver, C Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Gail Nich Mailing Addre 1822 23rd City, State, Zij	Swold  Ss enton St Code O 80231-5602  Coyer (Required) yed Corporation Corporation Other (please specials) olson Ss Ave	PAC Indivi	dual	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$307.50  Amount of each receipt this period
Edson Gri Mailing Addre 1699 S Tr City, State, Zip Denver, C Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Gail Nich Mailing Addre 1822 23rd City, State, Zip Gulfport,	Swold  Ss enton St p Code O 80231-5602  loyer (Required) yed Corporation Other (please specials) olson Ss Ave p Code	PAC Indivi	dualLoan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$307.50  Amount of each receipt this period
Edson Gri Mailing Addre 1699 S Tr City, State, Zip Denver, C Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Gail Nich Mailing Addre 1822 23rd City, State, Zip Gulfport,	Swold  Ss enton St Code O 80231-5602  loyer (Required) yed  Corporation Corporation Other (please specials) ss Ave Code MS 39501-2963  loyer (Required)	PAC Indivi	dual	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$307.50  Amount of each receipt this period
Edson Gri Mailing Addre 1699 S Tr City, State, Zip Denver, C Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Gail Nich Mailing Addre 1822 23rd City, State, Zip Gulfport, Name of Emplo	Swold Ss enton St p Code O 80231-5602 Oyer (Required) yed Corporation Other (please specials) Ss Ave D Code MS 39501-2963 Oyer (Required) Oyed	PAC Indivi	dual	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$307.50  Amount of each receipt this period

Name of Candidate or	Committee	Brandon	Presley

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 Reporting Period
 7/1/2023
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	CEIPTS	
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this
Other (please specify)	(IMO., Day, Teal)	period
Full Name Edson Griswold	07/18/2023	\$25.00
Mailing Address		
1699 S Trenton St		
City, State, Zip Code Denver, CO 80231-5602		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$307.50
Source: Corporation PAC / Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name		<u>-</u>
Molly Zuckerman	07/28/2023	\$25.00
Mailing Address 414 Meadow Rd		
City, State, Zip Code		
Starkville, MS 39759-5955		
Name of Employer (Required) Mississippi State University		
Occupation (Required) Professor	Aggregate year-to-date	\$275.00
	Date	Amount of each
Source: Corporation PAC Individual Loan Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Luke M. Dove	07/29/2023	\$500.00
Mailing Address		
1941 E Bourne Pl		
City, State, Zip Code Jackson, MS 39211-6714		
Name of Employer (Required) Self Employed		
Occupation (Required)	Aggregate	\$500.00
Attorney	year-to-date	\$300.00
Source: Corporation PAC Individual Loan	Date (Mo. Pour Your)	Amount of each receipt this
Other (please specify)	(Mo., Day, Year)	period
Full Name	07/21/2023	\$25.00
Richard Courtney		
Richard Courtney  Mailing Address PO Box 23126  City, State, Zip Code		
Richard Courtney  Mailing Address PO Box 23126  City, State, Zip Code Jackson, MS 39225-3126		
Richard Courtney  Mailing Address PO Box 23126  City, State, Zip Code		
Richard Courtney  Mailing Address PO Box 23126  City, State, Zip Code Jackson, MS 39225-3126  Name of Employer (Required)	Aggregate year-to-date	\$625.00

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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Source: Corporation PAC Individual Loan	Date	Amount of each
Source: Corporation PAC Individual Loan  Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name James Plunkett	07/21/2023	\$200.00
Mailing Address		
138 N Ridge Dr		
City, State, Zip Code		
Saltillo, MS 38866-5763		
Name of Employer (Required) Sanctuary Hospice		
Occupation (Required) CEO	Aggregate year-to-date	\$550.00
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	07/24/2023	\$1,000.00
David Clark	07/24/2023	71,000.00
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	\$12,003.00
Source: Corporation PAC / Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Nan Tarlton	07/07/2023	\$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	\$850.00
Source: Corporation PAC Individual Loan	Date	Amount of each receipt this
Other (please specify)	(Mo., Day, Year)	period
Full Name William Denman	07/18/2023	\$50.00
Mailing Address 417 Main St		
City, State, Zip Code Winchester, MA 01890-2925		
Name of Employer (Required)		
Mgpo		
Occupation (Required) Physician	Aggregate year-to-date	\$268.30
	i	

Name of Candidate or	Committee	Brandon	Presley

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Source:	Corporation Other (please spec		Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	lorri s				07/19/2023	\$100.00
Mailing Addre						
2218 Redb						
City, State, Zi	p Code					
Jackson,	MS 39212-2349					
Name of Emp St Domini	loyer (Required) .C					
<b>Occupation (I</b> Respirato	Required) ory Therapist				Aggregate year-to-date	\$400.00
Source:	Corporation	PAC 🗸	Individual	Loan	Date	Amount of each
	Other (please spec	cify)			(Mo., Day, Year)	receipt this period
<b>Full Name</b> Marian Ku	ırz				07/29/2023	\$10.00
Mailing Addre						
City, State, Zi						
Evanston,	IL 60201-1676					
Name of Emp Self Empl	loyer (Required) Loyed					
Occupation (I					Aggregate year-to-date	\$270.00
Source:	Corporation	PAC 🗸	Individual	Loan	Date	Amount of each
					(Mo., Day, Year)	receipt this
	Other (please spec	city)				period
<b>Full Name</b> Elizabeth		<u> </u>			07/29/2023	\$2,500.00
Elizabeth	n Naftali	<u> </u>				
Elizabeth  Mailing Addre  11971 Loc	n Naftali ess ckridge Rd	<u> </u>				
Elizabeth Mailing Addre 11971 Loc City, State, Zi	n Naftali ess ckridge Rd					
Elizabeth Mailing Addre 11971 Loc City, State, Zi Studio Ci Name of Emp	n Naftali ess ckridge Rd p Code ty, CA 91604-41 loyer(Required)					
Elizabeth Mailing Addre 11971 Loc City, State, Zi Studio Ci Name of Emp	n Naftali ess ckridge Rd p Code ty, CA 91604-41 loyer (Required)					
Elizabeth Mailing Addre 11971 Loc City, State, Zi Studio Ci Name of Emp Self Empl Occupation (I	n Naftali ess ckridge Rd p Code ty, CA 91604-41 loyer (Required) oyed Required)	.70	Individual	Loan	Aggregate year-to-date  Date	\$2,500.00 \$2,500.00 Amount of each
Mailing Address 11971 Loc City, State, Zi Studio Ci Name of Emp Self Empl Occupation (I	n Naftali ess ckridge Rd p Code ty, CA 91604-41 loyer (Required) oyed Required)	.70	Individual	Loan	Aggregate year-to-date	\$2,500.00
Mailing Address 11971 Loc City, State, Zi Studio Ci Name of Emp Self Empl Occupation (I	n Naftali ess ckridge Rd p Code ty, CA 91604-41 loyer (Required) oyed Required)  Corporation V Other (please spec	.70	Individual	Loan	Aggregate year-to-date  Date	\$2,500.00 \$2,500.00 Amount of each receipt this
Mailing Addre 11971 Loc City, State, Zi Studio Ci Name of Emp Self Empl Occupation (I Investor Source: Full Name Solv Ener	Naftali  PSS Ekridge Rd  P Code  ty, CA 91604-41  Required)  Oyed  Corporation  Other (please spec	.70	Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,500.00 \$2,500.00  Amount of each receipt this period
Mailing Address 11971 Loc City, State, Zi Studio Ci Name of Emp Self Empl Occupation (I Investor Source: Full Name Solv Ener Mailing Address 16680 W E	Naftali  PSS Ekridge Rd  P Code  ty, CA 91604-41  Noyed  Required  Other (please spectors)  Type LLC  PSS Pernardo Dr	.70	Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,500.00 \$2,500.00  Amount of each receipt this period
Mailing Address 11971 Loc City, State, Zi Studio Ci Name of Emp Self Empl Occupation (I Investor Source: Full Name Solv Ener Mailing Address 16680 W E City, State, Zi	n Naftali  pess ckridge Rd  p Code ty, CA 91604-41  loyer (Required) oyed  Required)  Corporation  Other (please spectors)  regy LLC  pess Bernardo Dr  p Code	PAC Cify) LLC	Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,500.00 \$2,500.00  Amount of each receipt this period
Mailing Address 11971 Loc City, State, Zi Studio Ci Name of Emp Self Empl Occupation (I Investor Source: Full Name Solv Ener 16680 W E City, State, Zi San Diego	Naftali  PSS Ekridge Rd  P Code  ty, CA 91604-41  Noyed  Required  Other (please spectors)  Type LLC  PSS Pernardo Dr	PAC Cify) LLC	Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,500.00 \$2,500.00  Amount of each receipt this period
Mailing Address 11971 Loc City, State, Zi Studio Ci Name of Emp Self Empl Occupation (I Investor Source: Full Name Solv Ener Mailing Address 16680 W E City, State, Zi San Diego	Naftali  PSS Ekridge Rd  P Code  ty, CA 91604-41  Noyed  Required)  Corporation  Other (please spectors)  P Code  O, CA 92127-1900  Noyed  Required)	PAC Cify) LLC	Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,500.00 \$2,500.00  Amount of each receipt this period

Name of Candidate or	Committee	Brandon	Presley

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Source:	Corporation Other (please spec	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	£l				07/12/2023	\$8.60
Russ Brad						
Mailing Addre	<b>ss</b> l Valley Rd					
City, State, Zip						
	, TN 37214-4219	9				
Name of Empl	oyer (Required)					
Cognosant	е					
Occupation (R	dequired)				Aggregate year-to-date	\$414.00
Source:	Corporation	PAC	Individual	Loan	Date	Amount of each
	✓ Other (please spec	cify) LLC			(Mo., Day, Year)	receipt this period
<b>Full Name</b> Helen Bur	ks Agency LLC				07/14/2023	\$250.00
Mailing Addre						
102 Maiso						
City, State, Zip	Code					
Vicksburg	, MS 39180-5385	5				
Name of Empl	oyer (Required)					
Occupation (R	equired)				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spec	cify)			(Mo., Day, Year)	receipt this period
Full Name Joanna Sh	OWS				07/27/2023	\$100.00
Mailing Addre	ss					
3 S Heron						
	Cv					
City, State, Zip						
City, State, Zip		723				
City, State, Zip Hattiesbu Name of Empl	o Code rg, MS 39402-87 oyer (Required)	723				
<b>City, State, Zip</b> Hattiesbu	o Code rg, MS 39402-87 oyer (Required)	723				
City, State, Zip Hattiesbu Name of Empl	o Code rg, MS 39402-87 oyer (Required) yed (equired)	723			Aggregate year-to-date	\$625.00
City, State, Zip Hattiesbu Name of Empl Not Emplo Occupation (R	o Code rg, MS 39402-87 oyer (Required) yed (equired)	723	✓Individual	Loan		Amount of each
City, State, Zip Hattiesbu Name of Emplo Not Emplo Occupation (R Not Emplo	o Code rg, MS 39402-87 oyer (Required) yed Required) yed	PAC	✓ Individual	Loan	year-to-date	
City, State, Zip Hattiesbu Name of Empl Not Emplo Occupation (R Not Emplo Source:	o Code rg, MS 39402-87 oyer (Required) yed required) yed Corporation Other (please spec	PAC	✓Individual	Loan	year-to-date Date	Amount of each receipt this
City, State, Zip Hattiesbu Name of Empl Not Emplo Occupation (R Not Emplo Source: Full Name Johanna R	o Code rg, MS 39402-87 oyer (Required) yed lequired) yed Corporation Other (please specials)	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Hattiesbu Name of Empl Not Emplo Occupation (R Not Emplo Source:	o Code rg, MS 39402-87 oyer (Required) yed lequired) yed Corporation Other (please specials)	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Hattiesbu Name of Empl Not Emplo Occupation (R Not Emplo Source: Full Name Johanna R Mailing Addre	o Code rg, MS 39402-87 oyer (Required) yed lequired) yed Corporation Other (please specials ice ss St	PAC	✓Individual	☐ <b>L</b> oan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Hattiesbu Name of Empl Not Emplo Occupation (R Not Emplo Source: Full Name Johanna R Mailing Addre 167 Court City, State, Zip	o Code rg, MS 39402-87 oyer (Required) yed lequired) yed Corporation Other (please specials ice ss St	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Hattiesbu Name of Emplo Not Emplo Occupation (R Not Emplo Source:  Full Name Johanna R Mailing Addre 167 Court City, State, Zip West Poin	o Code rg, MS 39402-87 oyer (Required) yed lequired) yed Corporation Other (please specials ss St O Code	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Hattiesbu Name of Emplo Not Emplo Occupation (R Not Emplo Source:  Full Name Johanna R Mailing Addre 167 Court City, State, Zip West Poin	o Code rg, MS 39402-87 oyer (Required) yed required) yed Corporation Other (please specials ss St O Code t, MS 39773-799 oyer (Required)	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Hattiesbu Name of Emplo Not Emplo Occupation (R Not Emplo Source:  Full Name Johanna R Mailing Addre 167 Court City, State, Zip West Poin Name of Empl	o Code rg, MS 39402-87 oyer (Required) yed required) yed Corporation Other (please specials ss St O Code t, MS 39773-799 oyer (Required) ice, LLC required)	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or	Committee	Brandon	Presley

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Source:	Corporation Other (please spec		/ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
<b>Full Name</b> Mary L. I	Landrieu				07/18/2023	\$1,000.00
Mailing Addre	ess Ditol St SE					
City, State, Zi						
Washingto	on, DC 20003-381	L O				
Name of Emp Van Ness	<b>loyer (Required)</b> Feldman					
Occupation (I	Required) olicy Advisor				Aggregate year-to-date	\$1,000.00
Source:	Corporation		/ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please spec	city)			— (Mo., Bay, Tear)	period
Full Name Christoph	ner C. Van Cleav	<i>r</i> e			07/28/2023	\$50.00
<b>Mailing Addre</b> 985 Wildw						
City, State, Zi Biloxi, M	<b>p Code</b> 4S 39532-3203					
Name of Emp	loyer (Required)					
Occupation (I	Required)				Aggregate year-to-date	\$650.00
Source:	Corporation	PAC V	/ Individual	Loan	Date	Amount of each
oource.	_ '	cify)	_	Loan	(Mo., Day, Year)	receipt this period
Full Name Michael C					07/28/2023	\$5.00
	Oneal ess				07/28/2023	\$5.00
Michael C	Oneal  ess Line St				07/28/2023	\$5.00
Michael C Mailing Addre 1011 Adel City, State, Zi	Oneal  ess Line St	022			07/28/2023	\$5.00
Michael C Mailing Addre 1011 Adel City, State, Zi Hattiesbu Name of Emp	Oneal  Poss Line St  p Code	)22			07/28/2023	\$5.00
Michael C Mailing Addre 1011 Adel City, State, Zi Hattiesbu Name of Emp	oneal  process  line St  proces  proce	022			Aggregate year-to-date	\$1,601.00
Michael C Mailing Addre 1011 Adel City, State, Zi Hattiesbu Name of Emp Hattiesbu Occupation (I	oneal  pss line St  p Code  arg, MS 39401-50  ployer (Required)  arg Clinic  Required)	□PAC v	∕ Individual	Loan	Aggregate year-to-date	
Michael C Mailing Addre 1011 Adel City, State, Zi Hattiesbu Name of Emp Hattiesbu Occupation (I Physician Source:	Oneal  ess  ine St  p Code  arg, MS 39401-50  eloyer (Required)  arg Clinic  Required)	□PAC v	∕∐ndividual	Loan	Aggregate year-to-date	\$1,601.00  Amount of each
Michael C Mailing Addre 1011 Adel City, State, Zi Hattiesbu Name of Emp Hattiesbu Occupation (I	Dineal  pess  Line St  p Code  prode	□PAC v	∕ Individual	Loan	Aggregate year-to-date	\$1,601.00  Amount of each receipt this
Michael C Mailing Addre 1011 Adel City, State, Zi Hattiesbu Name of Emp Hattiesbu Occupation (I Physician Source: Full Name Dianne Ma	Oneal  pess line St  p Code  arg, MS 39401-50  ployer (Required)  arg Clinic  Required)  Corporation  Other (please spec	□PAC v	<b>∕</b> Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,601.00  Amount of each receipt this period
Michael C Mailing Addre 1011 Adel City, State, Zi Hattiesbu Name of Emp Hattiesbu Occupation (I Physician Source: Full Name Dianne Ma Mailing Addre 211 Pebbl City, State, Zi	Dineal  pess Line St p Code arg, MS 39401-50 ployer (Required) arg Clinic Required)  Corporation Other (please special content of the component of the componen	□PAC v	∕ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,601.00  Amount of each receipt this period
Michael C Mailing Addre 1011 Adel City, State, Zi Hattiesbu Name of Emp Hattiesbu Occupation (I Physician Source: Full Name Dianne Ma Mailing Addre 211 Pebbl City, State, Zi Clinton,	Dineal  pess  line St  p Code  arg, MS 39401-50  ployer (Required)  arg Clinic  Required)  Corporation  Other (please special content of the code)  artin  pess  Le Brook Dr  p Code	□PAC v	∕Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,601.00  Amount of each receipt this period
Michael C Mailing Addre 1011 Adel City, State, Zi Hattiesbu Name of Emp Hattiesbu Occupation (I Physician Source: Full Name Dianne Ma Mailing Addre 211 Pebbl City, State, Zi Clinton,	Dineal  pess  Line St  p Code  larg, MS 39401-50  ployer (Required)  larg Clinic  Required)  Corporation  Other (please special content of the code of	□PAC v	/ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,601.00  Amount of each receipt this period
Michael C Mailing Addre 1011 Adel City, State, Zi Hattiesbu Name of Emp Hattiesbu Occupation (I Physician Source:  Full Name Dianne Ma Mailing Addre 211 Pebbl City, State, Zi Clinton, Name of Emp	Dineal  pess  line St  p Code  larg, MS 39401-50  loyer (Required)  larg Clinic  Required)  Corporation  Other (please special content of the code)  MS 39056-5819  loyer (Required)  byed	□PAC v	/ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,601.00  Amount of each receipt this period

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Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/29/2023	\$250.00
LaVon Ste	nnis-Williams					+200 <b>:</b> 00
Mailing Address 8919 NO 5	ess 6 AVENUE Cir					
City, State, Zi Omaha, NE						
Name of Emp	loyer (Required)					
Occupation (I	Required)				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Clarence	Smith				07/12/2023	\$50.00
Mailing Addre						
City, State, Zi	<b>p Code</b> IS 38804-3821					
	loyer (Required)					
Occupation (I	Required)				Aggregate year-to-date	\$215.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp		<u> </u>		(Mo., Day, Year)	receipt this period
Full Name Sarah Bro	oom				07/13/2023	\$250.00
Mailing Addre						
City, State, Zi						
Jackson,	MS 39211-6716					
Name of Emp	loyer (Required) yed					
Occupation (I	• •				Aggregate year-to-date	\$350.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name James Hut	.to				07/25/2023	\$25.00
Mailing Addre						
City, State, Zi	<b>p Code</b> 3 39465-9415					
Name of Emp	loyer (Required)					
Self Empl Occupation (					Aggregate	\$615.00
	Consultant				year-to-date	7013.00

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Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Etta Smit	- h				07/06/2023	\$15.00
Mailing Addre						
•	ry Hill Dr					
City, State, Zi	•					
	MS 39110-7501					
Name of Emp	oloyer (Required) oyed					
Occupation (					Aggregate year-to-date	\$215.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Kathy Hov	vard				07/16/2023	\$25.00
Mailing Addre						
	ccliff Way					
Clinton	<b>p Code</b> MS 39056-3425					
	loyer (Required)					
Occupation (					Aggregate	\$250.00
Not Emplo					year-to-date	7230.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name William I	). Booth				07/16/2023	\$50.00
Mailing Address 2829 NE 3						
City, State, Zi	•					
	derdale, FL 33	306-2028				
Self Empl	oloyer (Required) Loyed					
Occupation (	Required)				Aggregate year-to-date	\$300.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Kwesi Cha	appin				07/17/2023	\$250.00
Mailing Address						
City, State, Zi						
	MD 20785-310	7				
	loyer (Required)					
Self Empl						
Occupation (	Required)				Aggregate	\$250.00
Political	l Consultant				year-to-date	

Name of Candidate or (	Committee	Brandon	Presley

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation ☐ P.☐ Other (please specify)	AC ✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name				-	period
Douglas N	Masterson			07/29/2023	\$25.00
Mailing Addre					
43 Palm 7					
City, State, Zi					
-	3 39465-9251				
	oloyer(Required) ty of Southern Missi:	ssippi			
Occupation (	Required)			Aggregate year-to-date	\$385.00
Source:	Corporation P.	AC ✓ Individual	Loan	Date	Amount of each
	Other (please specify)			(Mo., Day, Year)	receipt this period
Full Name Jeffrey V	Villiams			07/29/2023	\$1,000.00
Mailing Addre					
755 Hazel					
City, State, Zi					
	e, CA 94550-2332				
	olover (Required)				
Not Emplo	, , ,				
Occupation (	Poquirod)			Aggregate	<u> </u>
Retired	Kequirea			year-to-date	\$1,000.00
Source:	☐ Corporation ☐ P.	AC / Individual	Loan	Date	Amount of each
	Other (please specify)			(Mo., Day, Year)	receipt this
Full Name	Other (please specify)			-	period
Full Name Randy Cla				(Mo., Day, Year) - 07/01/2023	•
	ark			-	period
Randy Cla	ark			-	period
Randy Cla  Mailing Addre  507 Storm  City, State, Zi	erk ess n Ave p Code			-	period
Mailing Address 507 Storm City, State, Zi Brookhave	erk  pess n Ave pCode en, MS 39601-3775			-	period
Randy Cla Mailing Addre 507 Storm City, State, Zi Brookhave Name of Emp	ess n Ave ip Code en, MS 39601-3775			-	period
Mailing Address 507 Storm City, State, Zi Brookhave Name of Emp	erk ess n Ave p Code en, MS 39601-3775 eloyer (Required) eyed			07/01/2023	period
Randy Cla Mailing Addre 507 Storm City, State, Zi Brookhave Name of Emp	erk ess n Ave p Code en, MS 39601-3775 eloyer (Required) eyed			-	period
Randy Cla Mailing Addre 507 Storm City, State, Zi Brookhave Name of Emp Not Emplo	ess n Ave p Code en, MS 39601-3775 ployer (Required) byed Required)	AC ☑Individual	Loan	07/01/2023 Aggregate	\$75.25 \$315.35
Randy Cla  Mailing Addre 507 Storm City, State, Zi Brookhave Name of Emp Not Emplo Occupation (I Retired Source:	ess n Ave p Code en, MS 39601-3775 ployer (Required) byed Required)	AC <b>√</b> Individual	Loan	Aggregate year-to-date	\$75.25 \$315.35
Randy Cla  Mailing Addre 507 Storm City, State, Zi Brookhave Name of Emp Not Emplo Occupation (I Retired Source:	ark  ess a Ave  ip Code  en, MS 39601-3775  bloyer (Required)  byed  Required)  Corporation	AC ☑Individual	Loan	Aggregate year-to-date  Date	\$75.25 \$315.35 Amount of each receipt this
Randy Cla  Mailing Addres 507 Storm City, State, Zi Brookhave Name of Emplo Occupation (I Retired Source:  Full Name Susan Rei Mailing Addres	ark  ess  a Ave  ip Code  en, MS 39601-3775  bloyer (Required)  byed  Required)  Corporation  Other (please specify)  ifers-Stewart	AC ✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$75.25 \$315.35  Amount of each receipt this period
Randy Cla  Mailing Addre 507 Storm City, State, Zi Brookhave Name of Emp Not Emplo Occupation (I Retired Source:  Full Name Susan Rei Mailing Addre PO Box 22	ark  ess a Ave p Code en, MS 39601-3775  ployer (Required) pyed  Required)  Corporation  Other (please specify)  ifers-Stewart ess 234	AC ✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$75.25 \$315.35  Amount of each receipt this period
Randy Cla  Mailing Addre 507 Storm City, State, Zi Brookhave Name of Emp Not Emplo Occupation (I Retired Source:  Full Name Susan Rei Mailing Addre PO Box 22 City, State, Zi	ark  ess a Ave p Code en, MS 39601-3775  ployer (Required) pyed  Required)  Corporation  Other (please specify)  ifers-Stewart ess 234 p Code	AC ☑Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$75.25 \$315.35  Amount of each receipt this period
Randy Clas  Mailing Addres 507 Storm City, State, Zi Brookhave Name of Emp Not Emplo Occupation (I Retired Source:  Full Name Susan Rei Mailing Addre PO Box 22 City, State, Zi Madison,	ark  ess a Ave  p Code en, MS 39601-3775  ployer (Required)  pyed  Required)  Corporation  Other (please specify)  ifers-Stewart  ess 234  p Code MS 39130-2234	AC ✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$75.25 \$315.35  Amount of each receipt this period
Randy Clas  Mailing Addres 507 Storm City, State, Zi Brookhave Name of Emp Not Emplo Occupation (I Retired Source:  Full Name Susan Rei Mailing Addre PO Box 22 City, State, Zi Madison,	ark  ess a Ave  p Code en, MS 39601-3775  ployer (Required)  pyed  Required)  Corporation  Other (please specify)  ifers-Stewart  ess 234  p Code MS 39130-2234  ployer (Required)	AC ✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$75.25 \$315.35  Amount of each receipt this period
Randy Cla  Mailing Addres 507 Storm City, State, Zi Brookhave Name of Emp Not Emplo Occupation (I Retired Source:  Full Name Susan Rei Mailing Addre PO Box 22 City, State, Zi Madison, Name of Emp	ark  ess  Ave  p Code  en, MS 39601-3775  ployer (Required)  pyed  Required)  Corporation  Other (please specify)  afers-Stewart  ess  234  p Code  MS 39130-2234  ployer (Required)  pyed	AC ☑Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$75.25 \$75.25 \$315.35  Amount of each receipt this period \$500.00
Randy Cla  Mailing Addre 507 Storm City, State, Zi Brookhave Name of Emp Not Emplo Occupation (I Retired Source:  Full Name Susan Rei Mailing Addre PO Box 22 City, State, Zi Madison, Name of Emp Not Emplo	ark  ess  Ave  p Code  en, MS 39601-3775  ployer (Required)  pyed  Required)  Corporation  Other (please specify)  afers-Stewart  ess  234  p Code  MS 39130-2234  ployer (Required)  pyed	AC VIndividual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)  07/12/2023	\$75.25 \$315.35  Amount of each receipt this period

Name of Candidate or Committee B	3randon	Presley	У
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	,				07/13/2023	\$50.00
Mailing Addre						
12 Estate						
City, State, Zi	•					
	ch, MS 39560-3	912				
-	loyer(Required) Health Admini	stration				
Occupation (I	. ,				Aggregate year-to-date	\$275.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name	Jilliams				07/04/2023	\$25.00
Mailing Addre						
297 Road						
City, State, Zi						
	1S 38804-9637					
Name of Emp	lloyer (Required) byed					
Occupation (I					Aggregate year-to-date	\$225.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Nan Einha	art				07/16/2023	\$250.00
Mailing Addre	ess					
5100 Lees						
City, State, Zi Pensacola	<b>p Code</b> a, FL 32504-43	09				
-	loyer (Required)					
Not Emplo	oyed 					
Occupation (I					Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	pecify)			(Mo., Day, Year)	period
Full Name Christina	a Glick				07/28/2023	\$500.00
Mailing Addre						
	n Lakes Cir					
City, State, Zi	p Code MS 39211-6758					
	loyer (Required)					
	ppi Lactation	Services				
Occupation (I	Required)				Aggregate	\$500.00
Physiciar					year-to-date	4300.00

Name of Candidate or Committee B	3randon	Presley	У
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**Reporting Period** 7/1/2023 **through** 7/29/2023

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Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Ca	rroll				07/29/2023	\$100.00
Mailing Addre	ess h Grove Rd					
City, State, Zi					_	
Pontotoc,	MS 38863-7704	1				
-	loyer(Required) stribution Ser	rvices				
Occupation (I					Aggregate year-to-date	\$420.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Leslie St	everson				07/29/2023	\$25.00
Mailing Addre						
City, State, Zi					_	
	MS 39507-2222	2				
Name of Emp	loyer (Required) oyed					
Occupation (I	Required)				Aggregate year-to-date	\$205.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
oouroc.	Other (please sp		v marviduai		(Mo., Day, Year)	receipt this period
Full Name Paul E. M	McDaniel				07/20/2023	\$250.00
Mailing Addre						
607 Adeli						
City, State, Zi	<b>p Code</b> arg, MS 39401-3	8843				
	loyer (Required)					
	re Glass Specia	alist				
Occupation (I	• '				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Raleigh E	Syars				07/11/2023	\$50.00
Mailing Addre	ess					
	Road 229U					
City, State, Zi						
Name of Emp	loyer (Required)					
Occupation (I	Required)				Aggregate	\$675.00
Not Emplo	yed				year-to-date	

Name of Candidate or Committe	<b>e</b> Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name	07/05/2023	\$5,000.00
Charles Merinoff		40,000.00
Mailing Address		
4980 Windham Hill Rd		
City, State, Zip Code Windham, VT 05359-9651		
Name of Employer (Required) Breakthru Beverage		
Occupation (Required) Chairman	Aggregate year-to-date	\$5,000.00
Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt this
Other (please specify)Full Name	_ (,,	period
Roger Klingler	07/15/2023	\$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	\$845.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Bill Stone	07/15/2023	\$500.00
Mailing Address		
200 Johnson Park		
City, State, Zip Code		
Holly Springs, MS 38635-2809		
Name of Employer (Required) North Mississippi Primary Health Care		
Occupation (Required) Chief Operating Officer	Aggregate year-to-date	\$539.40
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
	07/17/2023	\$750,000.00
Full Name Democratic Governors Association	0771772020	
Democratic Governors Association		
Democratic Governors Association  Mailing Address  1225 I St NW		
Democratic Governors Association  Mailing Address 1225 I St NW  City, State, Zip Code		
Democratic Governors Association  Mailing Address  1225 I St NW  City, State, Zip Code  Washington, DC 20005-3914		
Democratic Governors Association  Mailing Address 1225 I St NW  City, State, Zip Code		

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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 Reporting Period
 7/1/2023
 through
 7/29/2023

Full Name Jacob Weixler  07/18/2023	nount of each receipt this period
	\$250.00
Mailing Address	
1926 Washington Ave	
City, State, Zip Code	
New Orleans, LA 70113-1730	
Name of Employer (Required) Weixler Law LLC	
Occupation (Required) Attorney  Aggregate year-to-date	\$250.00
	nount of each
Other (please specify) (Mo., Day, Year)	period
Full Name James P. Smith  07/28/2023	\$100.00
Mailing Address 14077 W Old River Trl	
City, State, Zip Code Gulfport, MS 39503-9057	
Name of Employer (Required) Not Employed	
Occupation (Required)  Retired  Aggregate year-to-date	\$1,100.00
Source: Corporation PAC / Individual Loan Date An	nount of each
Other (please specify) (Mo., Day, Year)	receipt this period
Full Name Charles Griffith  07/29/2023	\$100.00
Charles Griffith	\$100.00
Charles Griffith  Mailing Address 102 Mamie St	\$100.00
Charles Griffith  Mailing Address  102 Mamie St  City, State, Zip Code	\$100.00
Charles Griffith  Mailing Address 102 Mamie St  City, State, Zip Code  Hattiesburg, MS 39401-3873	\$100.00
Charles Griffith  Mailing Address 102 Mamie St  City, State, Zip Code Hattiesburg, MS 39401-3873  Name of Employer (Required)	\$400.00
Charles Griffith  Mailing Address  102 Mamie St  City, State, Zip Code  Hattiesburg, MS 39401-3873  Name of Employer (Required) Forrest General Hospital  Occupation (Required) Physician  Aggregate year-to-date  Source: Corporation PAC Individual Loan  Date An	\$400.00
Charles Griffith  Mailing Address  102 Mamie St  City, State, Zip Code Hattiesburg, MS 39401-3873  Name of Employer (Required) Forrest General Hospital  Occupation (Required) Physician  Source: Corporation PAC Individual Loan  Date An	\$400.00
Charles Griffith  Mailing Address  102 Mamie St  City, State, Zip Code Hattiesburg, MS 39401-3873  Name of Employer (Required) Forrest General Hospital  Occupation (Required) Physician  Source: Corporation PAC Individual Loan Other (please specify)  Date (Mo., Day, Year)	\$400.00
Charles Griffith  Mailing Address  102 Mamie St  City, State, Zip Code Hattiesburg, MS 39401-3873  Name of Employer (Required) Forrest General Hospital  Occupation (Required) Physician  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Cris Pickering	\$400.00 nount of each receipt this period
Charles Griffith  Mailing Address  102 Mamie St  City, State, Zip Code  Hattiesburg, MS 39401-3873  Name of Employer (Required) Forrest General Hospital  Occupation (Required) Physician  Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Cris Pickering  Mailing Address 232 Calumet Dr	\$400.00 nount of each receipt this period
Charles Griffith  Mailing Address  102 Mamie St  City, State, Zip Code  Hattiesburg, MS 39401-3873  Name of Employer (Required) Forrest General Hospital  Occupation (Required) Physician  Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Cris Pickering  Mailing Address 232 Calumet Dr	\$400.00 nount of each receipt this period
Charles Griffith  Mailing Address  102 Mamie St  City, State, Zip Code  Hattiesburg, MS 39401-3873  Name of Employer (Required) Forrest General Hospital  Occupation (Required) Physician  Source: Corporation PAC Individual Loan (Mo., Day, Year)  Full Name Cris Pickering  Mailing Address 232 Calumet Dr  City, State, Zip Code Madison, MS 39110-8685  Name of Employer (Required)	\$400.00 nount of each receipt this period
Charles Griffith  Mailing Address  102 Mamie St  City, State, Zip Code Hattiesburg, MS 39401-3873  Name of Employer (Required) Forrest General Hospital  Occupation (Required) Physician  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Cris Pickering  Mailing Address 232 Calumet Dr  City, State, Zip Code Madison, MS 39110-8685	\$400.00 nount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please speci	☐PAC ✓Indiv	idual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name				07/11/0000	
Carol Har	tman			07/11/2023	\$100.00
Mailing Addre	SS				
•	t Lake Dr				
City, State, Zip	Code				
Madison,	MS 39110-9421				
Name of Empl Self Empl	oyer (Required) oyed				
Occupation (F	• •			Aggregate year-to-date	\$250.00
Source:	Corporation	PAC ✓ Indiv	idual Loan	Date	Amount of each
	Other (please speci	fy)		(Mo., Day, Year)	receipt this period
Full Name				07/24/2023	\$500.00
Peter F.	Wirth			07/24/2023	\$300.00
Mailing Addre	ss				
1035 Cami	no De Cruz Blan	ca			
City, State, Zip	o Code				
	NM 87505-0390				
-	oyer (Required)				
Self Empl	oyed				
Occupation (F Attorney	Required)			Aggregate year-to-date	\$500.00
Source:	Corporation	PAC / Indiv	idual Loan	Date	Amount of each
					receipt this
	Other (please spec	fy)		(Mo., Day, Year)	period
		fy)		(Mo., Day, Year)	
John Brad  Mailing Addre	ley	fy)			period
John Brad <b>Mailing Addre</b> 107 Phili	ley ss p Rd	fy)			period
John Brad Mailing Addre 107 Phili City, State, Zip	ley ss p Rd	fy)			period
John Brad  Mailing Addre  107 Phili  City, State, Zip  Oxford, M	ley ss p Rd c Code	fy)			period
John Brad  Mailing Addre  107 Phili  City, State, Zip  Oxford, M  Name of Empl	ley ss p Rd c Code S 38655-2013 loyer (Required)	fy)			period
John Brad  Mailing Addre 107 Phili  City, State, Zip Oxford, M  Name of Emplo  Occupation (F	ley ss p Rd c Code s 38655-2013 coyer (Required) yed Required)	fy)			period
John Brad  Mailing Addre 107 Phili  City, State, Zip Oxford, M  Name of Emplo  Occupation (F	ley ss p Rd c Code s 38655-2013 coyer (Required) yed Required)	fy)	idual □Loan	07/24/2023 Aggregate	\$1,000.00 \$8,050.00 Amount of each
John Brad Mailing Addre 107 Phili City, State, Zip Oxford, M Name of Empl Not Emplo Occupation (F	ley ss p Rd c Code S 38655-2013 loyer (Required) yed Required) yed	PAC ✓Indiv	idual	Aggregate year-to-date	\$1,000.00 \$8,050.00
John Brad  Mailing Addre  107 Phili  City, State, Zip  Oxford, M  Name of Empl  Not Emplo  Occupation (F  Not Emplo  Source:	ley ss p Rd c Code S 38655-2013 loyer (Required) yed Required) yed Corporation	PAC ✓Indiv	idual	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00 \$8,050.00  Amount of each receipt this period
John Brad  Mailing Addre 107 Phili  City, State, Zip Oxford, M  Name of Empl Not Emplo  Occupation (F Not Emplo  Source:	ley ss p Rd c Code S 38655-2013 loyer (Required) yed Required) yed Corporation Other (please speci	PAC ✓Indiv	idual □Loan	Aggregate year-to-date  Date	\$1,000.00 \$8,050.00 Amount of each receipt this
John Brad Mailing Addre 107 Phili City, State, Zip Oxford, M Name of Emplo Occupation (F Not Emplo Source: Full Name Susan Har Mailing Addre	ley ss p Rd c Code S 38655-2013 loyer (Required) yed Required) yed Corporation Other (please speci	PAC ✓Indiv	idual	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00 \$8,050.00  Amount of each receipt this period
John Brad  Mailing Addre 107 Phili  City, State, Zig Oxford, M Name of Empl Not Emplo  Occupation (F Not Emplo  Source:  Full Name Susan Har  Mailing Addre 2022 E Bo	ley ss p Rd c Code S 38655-2013 loyer (Required) yed Required) yed Corporation Cother (please special	PAC ✓Indiv	idual	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00 \$8,050.00  Amount of each receipt this period
John Brad  Mailing Addre 107 Phili  City, State, Zip Oxford, M Name of Empl Not Emplo  Occupation (F Not Emplo  Source:  Full Name Susan Har  Mailing Addre 2022 E Bo City, State, Zip	ley ss p Rd c Code S 38655-2013 oyer (Required) yed Corporation Cother (please special	PAC ✓Indiv	idual □Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00 \$8,050.00  Amount of each receipt this period
John Brad  Mailing Addre 107 Phili City, State, Zip Oxford, M Name of Empl Not Emplo Occupation (F Not Emplo Source:  Full Name Susan Har Mailing Addre 2022 E Bo City, State, Zip Jackson,	ley ss p Rd c Code S 38655-2013 loyer (Required) yed Required) yed Corporation Other (please special t ss urne Pl c Code MS 39211-6715	PAC ✓Indiv	idual	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00 \$8,050.00  Amount of each receipt this period
John Brad  Mailing Addre 107 Phili City, State, Zig Oxford, M Name of Empl Not Emplo Occupation (F Not Emplo Source:  Full Name Susan Har Mailing Addre 2022 E Bo City, State, Zig Jackson, Name of Empl	ley ss p Rd c Code S 38655-2013 loyer (Required) yed Required) yed Corporation Other (please special s	PAC ✓Indiv	idual	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00 \$8,050.00  Amount of each receipt this period
John Brad  Mailing Addre 107 Phili City, State, Zip Oxford, M Name of Empl Not Emplo Occupation (F Not Emplo Source:  Full Name Susan Har Mailing Addre 2022 E Bo City, State, Zip Jackson, Name of Empl Not Emplo	ley ss p Rd c Code S 38655-2013 coyer (Required) yed Corporation Cother (please special t ss urne Pl c Code MS 39211-6715 coyer (Required) yed	PAC ✓Indiv	idual	Aggregate year-to-date  Date (Mo., Day, Year)  07/15/2023	\$1,000.00 \$8,050.00  Amount of each receipt this period
Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Susan Har Mailing Addre 2022 E Bo City, State, Zip Jackson,	ley ss p Rd c Code S 38655-2013 coyer (Required) yed Corporation Cother (please special t ss urne Pl c Code MS 39211-6715 coyer (Required) yed Required)	PAC ✓Indiv	idual	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00 \$8,050.00  Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC Individual Lo Other (please specify)	an Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	07/25/2023	\$30.00
Charles Buchanan		
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	\$764.71
Source: Corporation PAC /Individual Lo	an Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Leonard A. Blackwell II	07/28/2023	\$250.00
Mailing Address		
11857 Lorraine Rd		
City, State, Zip Code Gulfport, MS 39503-3951		
Name of Employer (Required) Brunini Law Firm		
Occupation (Required) Attorney	Aggregate year-to-date	\$2,000.00
Source: Corporation PAC / Individual Lo	an Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Edson Griswold	07/29/2023	\$25.00
Mailing Address		
1600 C Tropton Ct		
1699 S Trenton St		
1699 S Trenton St  City, State, Zip Code  Denver, CO 80231-5602		
City, State, Zip Code Denver, CO 80231-5602  Name of Employer (Required)		
City, State, Zip Code Denver, CO 80231-5602		
City, State, Zip Code Denver, CO 80231-5602  Name of Employer (Required)	Aggregate year-to-date	\$307.50
City, State, Zip Code Denver, CO 80231-5602  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Lo	year-to-date  an Date	Amount of each
City, State, Zip Code Denver, CO 80231-5602  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed	year-to-date	
City, State, Zip Code Denver, CO 80231-5602  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Lo	year-to-date  an Date	Amount of each receipt this
City, State, Zip Code Denver, CO 80231-5602  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Lo Other (please specify)  Full Name Michael Oneal  Mailing Address	year-to-date  an Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Code Denver, CO 80231-5602  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Lo Cother (please specify)  Full Name Michael Oneal  Mailing Address 1011 Adeline St  City, State, Zip Code	year-to-date  an Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Code Denver, CO 80231-5602  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Lo Other (please specify)  Full Name Michael Oneal  Mailing Address 1011 Adeline St  City, State, Zip Code Hattiesburg, MS 39401-5022	year-to-date  an Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Code Denver, CO 80231-5602  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Lo  Other (please specify)  Full Name Michael Oneal  Mailing Address 1011 Adeline St  City, State, Zip Code	year-to-date  an Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Code Denver, CO 80231-5602  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Lo Other (please specify)  Full Name Michael Oneal  Mailing Address 1011 Adeline St  City, State, Zip Code Hattiesburg, MS 39401-5022  Name of Employer (Required)	year-to-date  an Date (Mo., Day, Year)	Amount of each receipt this period

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	LIF 13	
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	07/04/0000	
Mary Vi Risser	07/24/2023	\$250.00
Mailing Address		
377 County Road 653B		
City, State, Zip Code		
Saltillo, MS 38866-5716		
Name of Employer (Required)		
Not Employed		
Occupation (Required)	Aggregate	\$1,100.00
Not Employed	year-to-date	\$1,100.00
	Date	Amount of each
		receipt this
Other (please specify)	(Mo., Day, Year)	period
Full Name	07/26/2023	\$25.00
C. Jackson Williams	07,20,2020	720.00
Mailing Address		
PO Box 69		
City, State, Zip Code		
Taylor, MS 38673-0069		
Name of Employer (Required)		
University of Mississippi		
Occupation (Required)	Aggregate	\$275.00
Teacher	year-to-date	7273.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name	07/07/2022	<u>-</u>
William Parham	07/07/2023	\$500.00
Mailing Address		
202 Autumn Ridge Dr		
City, State, Zip Code		
Jackson, MS 39211-5954		
Name of Employer (Required)		
Parham Group LLC		
	Aggregate	<u> </u>
Occupation (Required)	Aggregate year-to-date	\$500.00
Occupation (Required) Consultant	year-to-date	
Occupation (Required)	year-to-date Date	Amount of each
Occupation (Required) Consultant	year-to-date	
Occupation (Required) Consultant  Source: Corporation PAC Individual Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (Required)  Consultant  Source: Corporation PAC Individual Loan  Other (please specify)	year-to-date Date	Amount of each receipt this
Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Maureen McKerns  Mailing Address	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Maureen McKerns  Mailing Address 813 42nd Ave	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Maureen McKerns  Mailing Address 813 42nd Ave  City, State, Zip Code	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Maureen McKerns  Mailing Address 813 42nd Ave  City, State, Zip Code Gulfport, MS 39501-1451	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Maureen McKerns  Mailing Address 813 42nd Ave  City, State, Zip Code Gulfport, MS 39501-1451  Name of Employer (Required)	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Maureen McKerns  Mailing Address 813 42nd Ave  City, State, Zip Code Gulfport, MS 39501-1451  Name of Employer (Required) Not Employed	year-to-date  Date (Mo., Day, Year)  07/27/2023	Amount of each receipt this period \$25.00
Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Maureen McKerns  Mailing Address 813 42nd Ave  City, State, Zip Code Gulfport, MS 39501-1451  Name of Employer (Required)	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

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Source:	Corporation Other (please spe	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles F	. Wilson				07/14/2023	\$50.00
Mailing Addre	ess					
114 Leigh						
City, State, Zi	<b>p Code</b> IS 38655-2010					
Name of Emp	loyer (Required) yed					
Occupation (I	• •				Aggregate year-to-date	\$550.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	ecify)			(Mo., Day, Year)	receipt this period
Full Name Ann Smith					07/14/2023	\$200.00
Mailing Addre						
City, State, Zi						
Gulfport,	MS 39502-1865					
Name of Emp	loyer (Required) yed					
Occupation (I					Aggregate year-to-date	\$290.00
						A
Source:	☐ Corporation☐ Other (please spe	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David G.	Hill				07/24/2023	\$1,000.00
Mailing Addre						
City, State, Zi	p Code					
	(S 38655-0429 loyer (Required)					
Self Empl						
Occupation (I	Required)				Aggregate year-to-date	\$2,000.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please spe	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/24/2023	\$25.00
Marian Ku						
Mailing Address 1300 Cent						
City, State, Zi	p <b>Code</b> IL 60201-1676					
	loyer (Required)					
Self Empl						
Occupation (I					Aggregate year-to-date	\$270.00

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		<del></del>			_	
Source:	Corporation Other (please sp	□ PAC ☑ Indiv	idual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ken Hippl	_e				07/06/2023	\$100.00
Mailing Addre						
-	er Oak Trl					
City, State, Zi Madison,	<b>p Code</b> MS 39110-9147					
Name of Emp	loyer (Required) oyed					
Occupation (I					Aggregate year-to-date	\$1,100.00
Source:	Corporation	PAC Indiv	idual	Loan	Date	Amount of each
	✓ Other (please sp	ecify) LLC	_		(Mo., Day, Year)	receipt this period
Full Name Ready Law	<i>ı</i> Firm				07/26/2023	\$500.00
Mailing Address						
City, State, Zi	<b>p Code</b> MS 39301-5630	<u> </u>				
	loyer (Required)	,				
Occupation (I	Required)				Aggregate year-to-date	\$1,500.00
Source:	☐ Corporation☐ Other (please sp	PAC Indiv	idual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nan Tarlt	ion.				07/27/2023	\$50.00
Mailing Addre	ess					
City, State, Zi	p Code					
	MS 39110-9611 loyer (Required)					
Not Emplo	yed					
Occupation (I					Aggregate year-to-date	\$850.00
Source:	Corporation	☐ PAC ✓ Indiv	idual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Molly Zuc	ckerman				07/28/2023	\$250.00
Mailing Addre						
City, State, Zi	p Code	)				
	loyer (Required)	<b>ງ</b> ວວ				
	ppi State Unive	ersity				
Occupation (I					Aggregate year-to-date	\$275.00

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Source:	☐ Corporation ☐ Other (please speci	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name		<u> </u>			07/00/0000	·
Glenn Oli	lver				07/28/2023	\$10.00
Mailing Addre	ess					
5642 Gibs						
City, State, Zi	p Code					
	g, MS 39180-6320					
Name of Emp	loyer (Required)					
Not Emplo	oyed					
Occupation (I	Required)				Aggregate	\$210.00
Not Emplo					year-to-date	\$210.00
Source:		PAC	✓ Individual		Date	Amount of each
Source:	Corporation	_	<b>✓</b> individual	Loan		receipt this
	Other (please speci	ify)			(Mo., Day, Year)	period
Full Name					07/10/2023	\$500.00
Mike Lux					0771072023	+000.00
Mailing Addre	ess					
10300 Lar	riston Ln					
City, State, Zi	p Code					
Silver Sp	oring, MD 20903-1	1313				
Name of Emp	loyer (Required)					
Mike Lux	Media					
Occupation (I	Required)				Aggregate	\$3,000.00
	L Consultant				year-to-date	73,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
Source.	_	_	_	_		receipt this
	Other (please speci	ify)			(Mo., Day, Year)	period
Full Name					07/21/2023	\$25.00
Gayle Mas	ssey					,
Mailing Addre						
186 Parke	e Dr					
City, State, Zi	p Code					
Ridgeland	d, MS 39157-9402					
Name of Emp	loyer (Required)					
Not Emplo	oyed					
Occupation (I	Required)				Aggregate	\$300.00
Not Emplo	• •				year-to-date	7500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
Source.		_	V IIIuiviuuai	Loan		receipt this
	Other (please speci	ify)			(Mo., Day, Year)	period
Full Name					07/12/2023	\$50.00
Full Name Cynthia Y					07/12/2023	\$50.00
Cynthia Y  Mailing Addre	ess				07/12/2023	\$50.00
Cynthia Y  Mailing Addre					07/12/2023	\$50.00
Cynthia Y  Mailing Addre	ess os Ferry Rd				07/12/2023	\$50.00
Cynthia Y Mailing Addre 1955 Popp City, State, Zi	ess os Ferry Rd				07/12/2023	\$50.00
Cynthia Y Mailing Addre 1955 Popp City, State, Zi Biloxi, M Name of Emp	ps Ferry Rd pCode 4S 39532-2024 sloyer (Required)				07/12/2023	\$50.00
Cynthia Y Mailing Addre 1955 Popp City, State, Zi Biloxi, M	ps Ferry Rd pCode 4S 39532-2024 sloyer (Required)				07/12/2023	\$50.00
Cynthia Y Mailing Addre 1955 Popp City, State, Zi Biloxi, M Name of Emp	pess pess Ferry Rd prode 4S 39532-2024 ployer (Required) pyed					
Cynthia Y Mailing Addre 1955 Popp City, State, Zi Biloxi, M Name of Emp Not Emplo	pess os Ferry Rd op Code 4S 39532-2024 oloyer (Required) oyed Required)				Aggregate year-to-date	\$50.00
Cynthia Y Mailing Addre 1955 Popp City, State, Zi Biloxi, M Name of Emp	pess os Ferry Rd op Code 4S 39532-2024 oloyer (Required) oyed Required)				Aggregate	

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Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/24/2023	\$100.00
Mailing Address 142 Road						
City, State, Zi						
Plantersv	ville, MS 38862	2-4901				
Name of Emp	loyer (Required) oyed					
Occupation (I					Aggregate year-to-date	\$350.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Cherri Li	ghtsey				07/26/2023	\$25.00
Mailing Addre						
3701 Craw	ford Rd					
City, State, Zi	•					
	MS 39743-9629	9				
Name of Emp	loyer (Required) oyed					
Occupation (I					Aggregate year-to-date	\$330.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Kathy Ols	sen				07/28/2023	\$10,000.00
Mailing Addre						
4416 Sunr	nybrook Dr					
City, State, Zi	<b>p Code</b> e, TN 37205-386					
Name of Emp	•	60				
Not Emplo	loyer (Required)	60				
Not Emplo	loyer (Required) oyed	60				
Not Emplo Occupation (I Retired	loyer (Required) oyed	60			Aggregate year-to-date	\$65,000.00
Occupation (I	loyer (Required) oyed		✓ Individual	Loan	year-to-date Date	Amount of each
Occupation (I	loyer (Required) oyed Required)	□PAC	✓ Individual	Loan	year-to-date	
Occupation (I	loyer (Required)  yed  Required)  Corporation Other (please sp	□PAC	✓ Individual	Loan	year-to-date Date	Amount of each receipt this
Occupation (I Retired Source: Full Name Paul C. M	loyer (Required) byed  Required)  Corporation Other (please sp	□PAC	<b>☑</b> Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Retired Source: Full Name Paul C. M Mailing Addre 2335 East	loyer (Required) byed  Required)  Corporation  Other (please sp  Morrison  ess  cover Dr	□PAC	✓Individual	☐ Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Retired Source:  Full Name Paul C. M Mailing Addre 2335 East City, State, Zi	loyer (Required) byed  Required)  Corporation  Other (please sp  Morrison  ess  cover Dr	□PAC	✓ Individual	☐ Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Cocupation (I Retired Source: Full Name Paul C. Mailing Addre 2335 East City, State, Zi Jackson,	loyer (Required) byed  Required)  Corporation  Other (please sp  forrison ess cover Dr p Code	□PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Cocupation (I Retired Source: Full Name Paul C. Mailing Addre 2335 East City, State, Zi Jackson,	loyer (Required) byed  Required)  Corporation  Other (please spectors on east over Dr  p Code  MS 39211-6724  loyer (Required)	□PAC	<b>√</b> Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paul C. M Mailing Addre 2335 East City, State, Zi Jackson, Name of Emp Self Empl	loyer (Required) byed  Required)  Corporation  Other (please sp  forrison  es  cover Dr  p Code  MS 39211-6724  loyer (Required)  coyed	□PAC	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

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Source:	☐ Corporation ☐ Other (please spec		Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Len Melvi	n				07/20/2023	\$500.00
Mailing Addre					-	
PO Box 22						
City, State, Zi					-	
	rg, MS 39403-02	21				
Name of Emp	loyer (Required) oyed					
Occupation (F Attorney	Required)				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC 🗸	Individual	Loan	Date	Amount of each
	Other (please spec	cify)			(Mo., Day, Year)	receipt this period
Full Name Mack Lowe	ry				07/11/2023	\$25.00
Mailing Addre					-	
City, State, Zi	p Code				-	
	39170-9429				-	
-	loyer (Required) nsmission					
Occupation (F					Aggregate year-to-date	\$350.00
Source:	Corporation	PAC 🗸	Individual	Loan	Date	Amount of each
Source.	Other (please spec		Individual	LOGII	(Mo., Day, Year)	receipt this period
Full Name					07/23/2023	\$25.00
Elvin Sun	ds					
Mailing Addre					-	
Mailing Addre	dewater Ln					
Mailing Addre	dewater Ln	urch				
Mailing Addre	dewater Ln p Code MS 39110-8942 loyer (Required) is of Assisi Ch	urch			Aggregate year-to-date	\$430.00
Mailing Addre 4000 W Ti City, State, Zin Madison, Name of Emp St. Franc Occupation (F	dewater Ln p Code MS 39110-8942 loyer (Required) is of Assisi Ch		Individual	Loan		Amount of each
Mailing Addre 4000 W Ti City, State, Zin Madison, Name of Emp St. Franc Occupation (F Clergy	dewater Ln p Code MS 39110-8942 loyer (Required) is of Assisi Ch Required)	□PAC ✓	]Individual	Loan	year-to-date	
Mailing Addre 4000 W Ti City, State, Zig Madison, Name of Emp St. Franc Occupation (F Clergy Source:	dewater Ln  p Code  MS 39110-8942  loyer (Required)  is of Assisi Ch  Required)  Corporation  Other (please spec	□PAC ✓	]Individual	Loan	year-to-date Date	Amount of each receipt this
Mailing Addre 4000 W Ti City, State, Zi Madison, Name of Emp St. Franc Occupation (F Clergy Source: Full Name Eugene Br	dewater Ln p Code MS 39110-8942 loyer (Required) is of Assisi Ch Required)  Corporation Other (please spec	□PAC ✓	Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Addre 4000 W Ti City, State, Zin Madison, Name of Emp St. France Occupation (F Clergy Source: Full Name Eugene Br Mailing Addre 3535 Milii	dewater Ln p Code MS 39110-8942 loyer (Required) is of Assisi Ch Required)  Corporation Other (please spec	□PAC ✓	Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Addre 4000 W Ti City, State, Zi Madison, Name of Emp St. Franc Occupation (F Clergy Source:  Full Name Eugene Br Mailing Addre 3535 Mili City, State, Zi	dewater Ln p Code MS 39110-8942 loyer (Required) is of Assisi Ch Required)  Corporation Other (please spec	□PAC ✓	Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Addre 4000 W Ti City, State, Zi Madison, Name of Emp St. Franc Occupation (F Clergy Source:  Full Name Eugene Br Mailing Addre 3535 Mili City, State, Zi Columbus, Name of Emp	dewater In p Code MS 39110-8942 loyer (Required) is of Assisi Ch Required)  Corporation Other (please spectamlett Jr ess tary Rd p Code	□PAC ✓	Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Addre 4000 W Ti City, State, Zi Madison, Name of Emp St. Franc Occupation (F Clergy Source:  Full Name Eugene Br Mailing Addre 3535 Mili City, State, Zi Columbus, Name of Emp	dewater In  p Code  MS 39110-8942  loyer (Required)  is of Assisi Ch  Required)  Corporation  Other (please spectament Jr  ss  tary Rd  p Code  MS 39705-9179  loyer (Required)  ted Methodist C	□PAC ✓	Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

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Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name					—	period
Sean Gall	lagher				07/16/2023	\$500.00
Mailing Addre	ess					
805 Contr	ra Costa Ave					
City, State, Zi	•					
	CA 94707-1919	)				
	oloyer(Required) ergy Industries	a Associat	ion			
			21011		A	
Occupation (I	Requirea)				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/08/2023	\$25.00
Edson Gri	iswold				07/06/2023	\$25.00
Mailing Addre	ess					
1699 S Tr	renton St					
City, State, Zi	•					
	CO 80231-5602					
Name of Emp	oloyer (Required) oyed					
Occupation (Not Emplo					Aggregate year-to-date	\$307.50
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	corporation		va.v.aaa.			
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Charles E		ecify)			(Mo., Day, Year) 07/01/2023	•
Charles E	Barland	ecify)				period
Charles E Mailing Addre	Barland PSS Mola Rd	ecify)				period
Charles E Mailing Addre 13114 Ron City, State, Zi	Barland PSS Mola Rd					period
Charles E Mailing Addre 13114 Ron City, State, Zi Hermanvil Name of Emp	Barland  Pess  Mola Rd  Pp Code  Lle, MS 39086-9					period
Charles E Mailing Addre 13114 Ron City, State, Zi Hermanvil Name of Emp	Barland  PSS  Mola Rd  P Code  Lle, MS 39086-9  Ployer (Required)  Loyed				07/01/2023	<b>period</b> \$50.00
Charles E Mailing Addre 13114 Ron City, State, Zi Hermanvil Name of Emp	Barland  Pess  Mola Rd  Pp Code  Lle, MS 39086-9  Ployer (Required)  Loyed  Required)					period
Charles E Mailing Addre 13114 Ron City, State, Zi Hermanvil Name of Emp Self Empl Occupation (I	Barland  Pess  Mola Rd  Ip Code  Lle, MS 39086-9  Poloyer (Required)  Loyed  Required)  Ancher  Corporation	9776 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date	<b>period</b> \$50.00
Charles E Mailing Addre 13114 Ron City, State, Zi Hermanvil Name of Emp Self Empl Occupation (I Cattle Ra	Barland  ess  nola Rd  p Code  lle, MS 39086-9  lloyer (Required)  Loyed  Required)  ancher	9776 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date	\$50.00 \$275.00 Amount of each
Charles E Mailing Addre 13114 Ron City, State, Zi Hermanvil Name of Emp Self Empl Occupation (I Cattle Ra	Barland  ess  nola Rd  p Code  lle, MS 39086-9  lloyer (Required)  Loyed  Required)  ancher  Corporation  Other (please sp	9776 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date	\$50.00 \$275.00 Amount of each receipt this
Charles E Mailing Addre 13114 Ron City, State, Zi Hermanvil Name of Emp Self Empl Occupation (I Cattle Ra Source:	Barland  Poss  Mola Rd  Ip Code  Lle, MS 39086-9  Poloyer (Required)  Loyed  Required)  Ancher  Corporation  Other (please sp	9776 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$275.00  Amount of each receipt this period
Charles E Mailing Addre 13114 Ron City, State, Zi Hermanvil Name of Emp Self Empl Occupation (I Cattle Ra Source: Full Name Edson Gri Mailing Addre 1699 S Tr	Barland  Bar	9776 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$275.00  Amount of each receipt this period
Charles E Mailing Addre 13114 Ron City, State, Zi Hermanvil Name of Emp Self Empl Occupation (I Cattle Ra Source: Full Name Edson Gri Mailing Addre 1699 S Tr City, State, Zi	Barland  Bar	9776 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$275.00  Amount of each receipt this period
Charles E Mailing Addre 13114 Ron City, State, Zi Hermanvil Name of Emp Self Empl Occupation (I Cattle Ra Source:  Full Name Edson Gri Mailing Addre 1699 S Tr City, State, Zi Denver, C	Barland  Bar	9776 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$275.00  Amount of each receipt this period
Charles E Mailing Addre 13114 Ron City, State, Zi Hermanvil Name of Emp Self Empl Occupation (I Cattle Ra Source:  Full Name Edson Gri Mailing Addre 1699 S Tr City, State, Zi Denver, C	Barland  PSS  Nola Rd  PCode  Lle, MS 39086-9  Noloyer (Required)  Loyed  Required)  Ancher  Corporation  Other (please sp	9776 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$275.00  Amount of each receipt this period
Charles F Mailing Addre 13114 Ron City, State, Zi Hermanvil Name of Emp Self Empl Occupation (I Cattle Ra Source:  Full Name Edson Gri Mailing Addre 1699 S Tr City, State, Zi Denver, C Name of Emp	Barland  pss  mola Rd  p Code  lle, MS 39086-9  lloyer (Required)  Loyed  Required)  ancher  Corporation  Other (please sp  Lswold  pss  centon St  p Code  co 80231-5602  lloyer (Required)  byed  Required)  Required)	9776 □ <b>PAC</b>	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$275.00  Amount of each receipt this period

Reporting Period

7/1/2023

7/29/2023

Data	Amount of each
(Mo., Day, Year)	receipt this period
07/21/2023	\$100.00
Aggregate year-to-date	\$380.00
Date (Mo., Day, Year)	Amount of each receipt this
_	period
07/21/2023	\$100.00
Aggregate year-to-date	\$350.00
Date	Amount of each
(Mo., Day, Year)	receipt this period
07/22/2023	\$200.00
Aggregate year-to-date	\$400.00
year-to-date  Date	Amount of each
year-to-date	·
year-to-date  Date	Amount of each receipt this
year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
	Aggregate year-to-date  Aggregate year-to-date  Aggregate year-to-date  Date (Mo., Day, Year)  Aggregate year-to-date  Date (Mo., Day, Year)

Name of Candidate	e or Committee Brandon	Presley	
Reporting Period _	7/1/2023	through	7/29/2023

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Source:	Corporation Other (please spec	☐ PAC ✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name				07/27/2023	\$100.00
James Plu	nkett				,
Mailing Addre					
138 N Rid				_	
City, State, Zip					
	MS 38866-5763			_	
	loyer (Required)				
Sanctuary	Hospice				
Occupation (R	(equired)			Aggregate year-to-date	\$550.00
Source:	Corporation	PAC Individual	Loan	Date	Amount of each
	Other (please spec	cify)		(Mo., Day, Year)	receipt this period
Full Name Edson Gri	swold			07/08/2023	\$25.00
Mailing Addre				-	
1699 S Tr					
City, State, Zip	Code			-	
	0 80231-5602				
Name of Empl	loyer (Required)			┦	
Not Emplo				<u> </u>	
Occupation (R				Aggregate year-to-date	\$307.50
					A
Source:	<ul><li>☐ Corporation</li><li>☐ Other (please spec</li></ul>	PAC ✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name				07/11/2022	-
Shannon C	lark			07/11/2023	\$250.00
Mailing Addre	SS			7	
500 SOUTH	St				
City, State, Zip	Code			7	
Waynesbor	o, MS 39367				
	loyer (Required)			7	
Not Emplo	yed				
Occupation (R Retired	lequired)			Aggregate year-to-date	\$250.00
ICCLICA				1 , 1	
Source:	Corporation	✓ PAC Individual	Loan	Date	Amount of each
	Corporation Other (please spec	✓PAC Individual	Loan		Amount of each receipt this period
Source:	Other (please spec	cify)	Loan	Date (Mo., Day, Year)	receipt this period
Source: Full Name Lee Count	Other (please spec		Loan	Date	receipt this
Source:	Other (please spec	cify)	Loan	Date (Mo., Day, Year)	receipt this period
Full Name Lee Count Mailing Addres 1800 W Ma City, State, Zip	Other (please spec	cify)	Loan	Date (Mo., Day, Year)	receipt this period
Full Name Lee Count Mailing Addre 1800 W Ma City, State, Zig Tupelo, M	Other (please specy Democratic Exessin Stop Code SS 38801-3256	cify)	Loan	Date (Mo., Day, Year)	receipt this period
Full Name Lee Count Mailing Addre 1800 W Ma City, State, Zig Tupelo, M	Other (please spec	cify)	Loan	Date (Mo., Day, Year)	receipt this period

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please sp	есіту)				period
Full Name Laura Ham	nilton				07/21/2023	\$46.00
Mailing Addre						
_	olph Ave SE					
City, State, Zi	p Code					
Huntsvill	le, AL 35801-36	506				
Name of Emp	oloyer (Required) oyed					
Occupation (I					Aggregate year-to-date	\$343.51
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)		<b>_</b>	(Mo., Day, Year)	receipt this period
Full Name Howard Pi	ttman				07/14/2023	\$1,000.00
Mailing Addre	ess					
•	rson St NW					
City, State, Zi	p Code					
Washingto	on, DC 20011-38	327				
Name of Emp	lloyer (Required) byed					
Occupation (I					Aggregate year-to-date	\$1,000.00
			[] lin altitutation		Dete	Amount of soch
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name	Other (please sp	ecify)				period
Full Name Laura Ham		ecify)			(Mo., Day, Year) 07/25/2023	•
Laura Ham	milton	ecify)				period
Laura Ham	nilton ess olph Ave SE	ecify)				period
Laura Ham  Mailing Addre 707 Rando  City, State, Zi	nilton ess olph Ave SE					period
Laura Ham Mailing Addre 707 Rando City, State, Zi Huntsvill	principle of the set o					period
Laura Ham Mailing Addre 707 Rando City, State, Zi Huntsvill Name of Emp	p Code Le, AL 35801-36 loyer (Required)				07/25/2023 Aggregate	<b>period</b> \$25.00
Laura Ham Mailing Addre 707 Rando City, State, Zi Huntsvill Name of Emp	p Code Le, AL 35801-36 Dioyer (Required) Dioyed Required)				07/25/2023	period
Laura Ham Mailing Addre 707 Rando City, State, Zi Huntsvill Name of Emp Not Emplo	p Code Le, AL 35801-36 Dioyer (Required) Dioyed Required)		✓Individual	Loan	Aggregate year-to-date  Date	\$25.00 \$343.51
Mailing Addre 707 Rando City, State, Zi Huntsvill Name of Emp Not Emplo Occupation (I Not Emplo	principle of the set o	606 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date	\$25.00 \$343.51
Mailing Addre 707 Rando City, State, Zi Huntsvill Name of Emp Not Emplo Occupation (I Not Emplo	principle of the control of the cont	606 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date	\$25.00 \$343.51 Amount of each receipt this
Mailing Addre 707 Rando City, State, Zi Huntsvill Name of Emp Not Emplo Occupation (I Not Emplo	principle of the control of the cont	606 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$343.51  Amount of each receipt this period
Laura Ham  Mailing Addre 707 Rando  City, State, Zi Huntsvill  Name of Emplo  Occupation (I Not Emplo  Source:  Full Name  Robbie D.	principle of the control of the cont	606 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$343.51  Amount of each receipt this period
Mailing Addres 707 Rando City, State, Zi Huntsvill Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Robbie D. Mailing Addres 723 W Lee City, State, Zi	milton  pess plph Ave SE p Code pe, AL 35801-36 ployer (Required) pyed  Corporation  Other (please sp pess pess pess pess pess pess	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$343.51  Amount of each receipt this period
Mailing Address 707 Rando City, State, Zi Huntsvill Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Robbie D. Mailing Addres 723 W Lee City, State, Zi Water Val	milton  pss plph Ave SE p Code pe, AL 35801-36 ployer (Required) pyed  Corporation Other (please sp price of the second s	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$343.51  Amount of each receipt this period
Laura Ham Mailing Addre 707 Rando City, State, Zi Huntsvill Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Robbie D. Mailing Addre 723 W Lee City, State, Zi Water Val Name of Emp	milton  pess plph Ave SE p Code pe, AL 35801-36 ployer (Required) pyed  Corporation  Other (please sp pess pess pess pess pess pess	□ PAC necify)	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$343.51  Amount of each receipt this period
Laura Ham Mailing Addre 707 Rando City, State, Zi Huntsvill Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Robbie D. Mailing Addre 723 W Lee City, State, Zi Water Val Name of Emp	milton  pess plph Ave SE p Code Le, AL 35801-36 ployer (Required) pyed  Corporation  Other (please sp Fisher  pess e St p Code Lley, MS 38965- ployer (Required) coductions, LL6 Required)	□ PAC necify)	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$343.51  Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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 Reporting Period
 7/1/2023
 through
 7/29/2023

Source:	Corporation Other (please specify	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name				07/27/2023	\$100.00
Jean Fenw					
Mailing Addres				[	
208 S Mad					
City, State, Zip Kosciusko	Code , MS 39090-3946				
Name of Empl	oyer (Required)			1	
Not Emplo	yed				
Occupation (R				Aggregate year-to-date	\$1,325.00
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
ooul cc.	Other (please specify			(Mo., Day, Year)	receipt this period
Full Name				07/08/2023	\$50.00
Judy Wien	er				,
Mailing Address					
City, State, Zip				1	
	MS 39202-1314				
Name of Empl	oyer (Required)			1	
Not Emplo	yed				
Occupation (R	equired)			Aggregate year-to-date	\$300.00
Source:	Corneration			Date	Amount of each
Source.	Corporation  Other (please specify	PAC ✓ Individual	Loan	(Mo., Day, Year)	receipt this period
	Other (please specify	<u> </u>			portou
Full Name Johnny B.		,		07/18/2023	\$1,000.00
Johnny B.	Breaux	/		07/18/2023	·
	Breaux	<u> </u>		07/18/2023	·
Johnny B.  Mailing Addre	Breaux ss de Ln	,		07/18/2023	·
Johnny B.  Mailing Addres 24 Docksi City, State, Zip	Breaux ss de Ln			07/18/2023	·
Johnny B.  Mailing Addre 24 Docksi City, State, Zip Key Largo Name of Empl	Breaux ss de Ln Code FL 33037-5267 over (Required)	,		07/18/2023	·
Johnny B.  Mailing Addre 24 Docksi City, State, Zip Key Largo	Breaux ss de Ln Code FL 33037-5267 over (Required)			07/18/2023	·
Johnny B.  Mailing Addre 24 Docksi City, State, Zip Key Largo Name of Empl	Breaux  ss de Ln Code FL 33037-5267  over (Required) ggs equired)			07/18/2023  Aggregate year-to-date	·
Mailing Addre 24 Docksi City, State, Zip Key Largo Name of Empl Patton Bo Occupation (R Senior Co	Breaux ss de Ln Code FL 33037-5267 over (Required) ggs equired) unsel		□Loan	Aggregate year-to-date	\$1,000.00
Mailing Addre 24 Docksi City, State, Zip Key Largo Name of Empl Patton Bo Occupation (R	Breaux  ss de Ln Code FL 33037-5267  over (Required) ggs equired)	PAC ☑Individual	Loan	Aggregate	\$1,000.00
Johnny B.  Mailing Addre 24 Docksi City, State, Zip Key Largo Name of Empl Patton Bo Occupation (R Senior Co Source:	Breaux  ss de Ln  Code  FL 33037-5267  over (Required)  ggs  equired)  unsel  Corporation  Other (please specify	PAC ☑Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$1,000.00  \$1,000.00  Amount of each receipt this period
Johnny B.  Mailing Addre 24 Docksi City, State, Zip Key Largo Name of Empl Patton Bo Occupation (R Senior Co Source:	Breaux  ss de Ln  Code  FL 33037-5267  over (Required)  ggs  equired)  unsel  Corporation  Other (please specify	PAC ☑Individual	Loan	Aggregate year-to-date Date	\$1,000.00 \$1,000.00 Amount of each receipt this
Johnny B.  Mailing Addre 24 Docksi City, State, Zip Key Largo Name of Empl Patton Bo Occupation (R Senior Co Source:  Full Name Jack R. R Mailing Addre	Breaux  de Ln  Code  FL 33037-5267  oyer (Required)  ggs  equired)  unsel  Corporation  Other (please specify  eed Jr	PAC ☑Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$1,000.00 \$1,000.00  Amount of each receipt this period
Johnny B.  Mailing Addree 24 Docksid City, State, Zip Key Largo Name of Empl Patton Bod Occupation (R Senior Cod Source:  Full Name Jack R. Re Mailing Addree 2059 Parc City, State, Zip	Breaux  ss de Ln Code FL 33037-5267  oyer (Required) ggs equired) unsel Corporation Other (please specify  eed Jr ss Monceau Dr W Code	PAC ☑Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$1,000.00 \$1,000.00  Amount of each receipt this period
Johnny B.  Mailing Addre: 24 Docksi: City, State, Zip Key Largo Name of Empl Patton Boo Occupation (R Senior Coo Source:  Full Name Jack R. R  Mailing Addre: 2059 Parc City, State, Zip Tupelo, M	Breaux  ss  de Ln  Code  FL 33037-5267  oyer (Required)  ggs  equired)  unsel  Corporation  Other (please specify  ss  Monceau Dr W  Code  S 38804-1068	PAC ☑Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$1,000.00 \$1,000.00  Amount of each receipt this period
Johnny B.  Mailing Addre: 24 Docksi: City, State, Zip Key Largo Name of Empl Patton Boo Occupation (R Senior Coo Source:  Full Name Jack R. R  Mailing Addre: 2059 Parc City, State, Zip Tupelo, M	Breaux  ss de Ln  Code  FL 33037-5267  oyer (Required)  ggs  equired)  unsel  Corporation  Other (please specify  ss  Monceau Dr W  Code  S 38804-1068  oyer (Required)	PAC ☑Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$1,000.00 \$1,000.00  Amount of each receipt this period
Johnny B.  Mailing Addre 24 Docksi City, State, Zip Key Largo Name of Empl Patton Boo Occupation (R Senior Coo Source:  Full Name Jack R. R Mailing Addre 2059 Parc City, State, Zip Tupelo, M Name of Empl	Breaux  ss de Ln Code FL 33037-5267  over (Required) ggs equired) unsel Corporation Other (please specify  eed Jr ss Monceau Dr W Code S 38804-1068 over (Required) Co	PAC ☑Individual	Loan	Aggregate year-to-date Date (Mo., Day, Year)	\$1,000.00 \$1,000.00  Amount of each receipt this period

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					. •	
Source:	Corporation Other (please spec	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Ball	ard				07/16/2023	\$25.00
Mailing Addre					1	
City, State, Zi	=				1	
	loyer (Required)				1	
Occupation (F	Required)				Aggregate year-to-date	\$475.00
Source:	Corporation Other (please spec	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debbie Fo	rd				07/17/2023	\$500.00
Mailing Addre					1	
	MS 39301-9730				]	
Name of Emp	loyer (Required) yed					
Occupation (F	Required)				Aggregate year-to-date	\$500.00
Source:	Corporation Other (please spec	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James P.	Johnstone				07/20/2023	\$500.00
Mailing Addre					1	
City, State, Zi					1	
-	loyer (Required) Johnstone PLLC				]	
Occupation (F	Required)				Aggregate year-to-date	\$500.00
Source:	Corporation Other (please spec	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name E. K. Pru	itt				07/22/2023	\$50.00
Mailing Addre	ess				1	
City, State, Zip	p Code MS 39216-3420				1	
	loyer (Required)				1	
Occupation (F					Aggregate year-to-date	\$475.00

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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Source:	Corporation	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please sp	есіту)			(moi, buy, rour)	period
Full Name Willy Che	. 20 20 7				07/14/2023	\$250.00
Mailing Address 17 Christ						
City, State, Zi	p Code					
Cleveland	l, MS 38732-878	30				
Name of Emp	loyer (Required) e Plus					
Occupation (I	• •				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name William F	ainter				07/28/2023	\$500.00
Mailing Addre						
203 Easth						
City, State, Zi						
•	MS 39216-4716					
Name of Emp	loyer (Required)					
Occupation (I	Required)				Aggregate	\$750.00
Attorney	. ,				year-to-date	Ÿ 730 <b>.</b> 00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Inez Kell	eher				07/29/2023	\$100.00
Mailing Addre	ess					
914 N Cou	ntry Club Ln					
City, State, Zi	<b>p Code</b> IS 39532-3204					
Name of Emp	loyer (Required)					
	Hospital Gulfp	port				
Occupation (I					Aggregate year-to-date	\$1,250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Etta Smit	.h				07/29/2023	\$50.00
Mailing Addre						
•	y Hill Dr					
City, State, Zi						
Madison,	MS 39110-7501					
Name of Emp	loyer (Required)					
Occupation (I					Aggregate year-to-date	\$215.00

Name of Candidate or Committe	<b>e</b> Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC Individual Loan	Date	Amount of each
Source: ☐ Corporation ☐ PAC ✓ Individual ☐ Loan ☐ Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Michael Ubertini	07/13/2023	\$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	\$275.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Leslie Steverson	07/15/2023	\$25.00
Mailing Address		
2313 Farrell Cir		
City, State, Zip Code		
Gulfport, MS 39507-2222		
Name of Employer (Required)		
Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$205.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Morton Brilliant	07/18/2023	\$250.00
Mailing Address 101 Duddington Pl SE		
City, State, Zip Code Washington, DC 20003-2610		
Name of Employer (Required)		
The Strategy Group		
The Strategy Group	A	
The Strategy Group  Occupation (Required)  Consultant	Aggregate year-to-date	\$503.00
Occupation (Required) Consultant Source: Corporation PAC Individual Loan	year-to-date Date	\$503.00  Amount of each receipt this
Occupation (Required)  Consultant  Source: Corporation PAC Individual Loan  Other (please specify)	year-to-date	Amount of each
Occupation (Required) Consultant Source: Corporation PAC Individual Loan	year-to-date Date	Amount of each receipt this
Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Edward F. Donovan  Mailing Address 2559 River Place Blvd  City, State, Zip Code	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Edward F. Donovan  Mailing Address 2559 River Place Blvd  City, State, Zip Code Biloxi, MS 39531-2752	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Edward F. Donovan  Mailing Address 2559 River Place Blvd  City, State, Zip Code	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Edward F. Donovan  Mailing Address 2559 River Place Blvd  City, State, Zip Code Biloxi, MS 39531-2752  Name of Employer (Required)	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate	or Committee Brandon	Presley	
Reporting Period _	7/1/2023	through	7/29/2023

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Source: Corporation PAC Individual Loan Obter (No., Day, Year) Proceing this period  Full Name Donald Sittman  Mailing Address 1022 Devine St  Crity, State, Zip Code Jackson, MS 39202-1317  Name of Employer (Required) Not Employed  Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Mailing Address 28 Nate-offed PI  City, State, Zip Code Jackson, MS 39201-1327  Name of Employer (Required) Not Employed  Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Mailing Address 28 Nate-offed PI  City, State, Zip Code Jackson, MS 39211-2945  Name of Employer (Required) Not Employer (Required)  Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Gienn Taylor  Mailing Address 30 Name of Employer (Required) Actionney  Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Gienn Taylor & Bush  City, State, Zip Code Action Required) Actionney  Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Gienn Taylor & Bush  Cocupation (Required) Actionney  Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Source: Corporation PAC Individual Loan PAC (Mo., Day, Year)  Full Name Source: Corporation PAC Individual Source (Mo., Day, Year)  Full Name Source: Corporation PAC Individual Source (Mo., Day, Year)  Full Name Source: Corporation PAC Individual Source (Mo., Day, Year)  Full Name Source: Corporation PAC Individual Source (Mo., Day, Year)  Full Name Source: Corporation PAC Individual Source (Mo., Day, Year)  Full Name Source: Corporation PAC Individual Source (Mo., Day, Year)  Full	TI LIVIIZED IXEO	LIF 13	
Full Name   Docupation (Required)   Not Employer (Required)			receipt this
Donald Sittman   Mailing Addross   1822 Devine St   City, State, Zip Code   Jackson, MS 39202-1317   Name of Employer (Required)   Mot Employer (R		07/02/0002	<u>-</u>
1822 Devine St City, State, Zip Code   Jackson, MS 39202-1317   Name of Employer (Required)   Not Employed		07/23/2023	\$50.00
1822 Devine St City, State, Zip Code   Jackson, MS 39202-1317   Name of Employer (Required)   Not Employed	Mailing Address		
Jackson, MS 39202-1317   Name of Employer (Required)   Not Employed   PAC   Individual   Loan   Date (Mo., Day, Year)   PAC   Individual   Loan   Date (Mo., Day, Year)   PAC   PAC   Individual   Date (Mo., Day, Year)   PAC   P			
Jackson, MS 39202-1317   Name of Employer (Required)   Not Employed   PAC   Individual   Loan   Date (Mo., Day, Year)   PAC   Individual   Loan   Date (Mo., Day, Year)   PAC   PAC   Individual   Date (Mo., Day, Year)   PAC   P	City, State, Zip Code		
Not Employed  Occupation (Required) Not Employed  Source:			
Occupation (Required)     Aggregate year-to-date     \$1,350.00       Not Employed     Individual Loan     Amount of each receipt this period       Other (please specify)     07/24/2023     \$1,000.00       Full Name William N. Reed     07/24/2023     \$1,000.00       Mailing Address     23 Waterford PI     City, State, Zjp Code       Jackson, MS 39211-2945     Aggregate     \$2,000.00       Name of Employer (Required)     Self Employed     \$2,000.00       Source: Corporation PAC Individual Loan     Corporation (Mo, Day, Year)     Amount of each receipt this period       Full Name Glenn Taylor     07/15/2023     \$50.00       Glenn Taylor     07/15/2023     \$50.00       Mailing Address     3644 Old Canton Rd     City, State, Zip Code       Jackson, MS 39216-3313     Aggregate     \$325.00       Name of Employer (Required)     Aggregate     \$325.00       Source: Corporation PAC Individual Loan     Corporation (Mo, Day, Year)     Amount of each receipt this period       Full Name Raleigh Byars     07/15/2023     \$25.00       Walling Address     48 Country Road 229U     Amount of each receipt this period       City, State, Zip Code Oxford, MS 38655     Amount of each receipt this period       Not Employer (Required)     Aggregate year-do-date     \$675.00       Not Employed     Aggregate year-do-da	Name of Employer (Required)		
Note   Employed   Source:   Corporation   PAC   Vindividual   Loan   Date   Corporation   PAC   Vindividual   Loan   Corporation   PAC   Vindividual   Corporation   Vindividual   Vindivi	Not Employed		
Note   Employed   Source:   Corporation   PAC   Vindividual   Loan   Date   Corporation   PAC   Vindividual   Loan   Corporation   PAC   Vindividual   Corporation   Vindividual   Vindivi	Occupation (Required)	Aggregate	¢1 3E0 00
Source: Corporation PAC Individual Loan Date (Mo., Day, Year) Period    Other (please specify)			\$1,330.00
Other (please specify)   CMO, Day, Year)   period   Port		Doto	Amount of cook
Other (please specify)   Milling Address   S1,000.00			
Mailing Address 28 Waterford P1  City, State, Zip Code Jackson, MS 39211-2945  Name of Employer (Required) Attorney  Source: Corporation PAC Individual Loan Gity, State, Zip Code Jackson, MS 39216-3313  Name of Employer (Required) Attorney  Full Name City, State, Zip Code Jackson, MS 39216-3313  Name of Employer (Required) Attorney  Aggregate year-to-date  ### Amount of each receipt this period  ### Amo	Other (please specify)	(Mo., Day, Year)	
Mailing Address 28 Waterford P1 City, State, Zip Code Jackson, MS 39211-2945 Name of Employer (Required) Source: Corporation PAC Individual Loan Mailing Address 3644 Old Canton Rd City, State, Zip Code Jackson, MS 39216-3313 Name of Employer (Required) Source: Corporation PAC Individual Loan Mailing Address 3644 Old Canton Rd City, State, Zip Code Jackson, MS 39216-3313 Name of Employer (Required) Cocupation (Required) Attorney  Source: Corporation Address Source: Corporation Deate Mailing Address Source: Corporation Deate Mount of Employer (Required) Cocupation (Required) Attorney  Source: Corporation PAC Individual Loan Date Mon, Day, Year) Source: Corporation PAC Individual Dean Date Mon, Day, Year) Source: Corporation PAC Individual Dean Date Mon, Day, Year) Source: Corporation PAC Individual Dean Date Mon, Day, Year) Source: Corporation PAC Individual Dean Date Mon, Day, Year) Source: Corporation PAC Individual Source Mon, Day, Year) Source: Corporation PAC Individual Source Mailing Address Als County Road 229U City, State, Zip Code Oxford, MS 38655 Name of Employer (Required) Not Employed  Cocupation (Required) Not Employed  Source Source Source Aggregate year-to-date Source Source Aggregate year-to-date	Full Name	07/24/2023	\$1.000 00
28 Waterford P1 City, State, Zip Code Jackson, MS 39211-2945  Name of Employer (Required) Source: Corporation PAC Individual Loan Date (Mo., Day, Year) Other (please specify) Full Name Glenn Taylor Mailing Address 3644 Old Canton Rd City, State, Zip Code Date (Mo., Day, Year) Source: Corporation PAC Individual Loan City, State, Zip Code Source: Corporation Required) Copeland Cook Taylor & Bush  Cocupation (Required) Aggregate year-to-date Saction PAC Individual Loan Companion (Required) Copeland Cook Taylor & Bush  Cocupation (Required) Aggregate year-to-date Source: Corporation PAC Individual Loan Cother (please specify)  Full Name Raleigh Byars  Mailing Address 48 County Road 2290 City, State, Zip Code Oxford, MS 38655 Name of Employer (Required) Not Employed  Aggregate year-to-date Saction Aggregate year-to-date Saction Sac	William N. Reed	07,21,2020	+1 <b>,</b> 000 <b>.</b> 00
City, State, Zip Code Jackson, MS 39211-2945 Name of Employer (Required) Self Employed  Cocupation (Required) Attorney  Source: Corporation PAC Individual Loan (Mo., Day, Year) Other (please specify)  Full Name Glenn Taylor  Mailing Address Jackson, MS 39216-3313 Name of Employer (Required) Actorney  Source: Corporation PAC Individual Loan Glenn Taylor  Mailing Address Jackson, MS 39216-3313  Name of Employer (Required) Cope Land Cook Taylor & Bush  Cocupation (Required) Actorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Raleigh Byars  Mailing Address  48 County Road 2290  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Aggregate year-to-date  Aggregate year-to-date  Amount of each receipt this period  Amount of each receipt this period  Aggregate year-to-date  Aggregate year-to-date  \$ 25.00  Aggregate year-to-date  \$ 48 County Road 2290  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Cocupation (Required) Not Employed	Mailing Address		
Name of Employer (Required) Source: Corporation PAC Individual Loan Date (Mo., Day, Year)    Comparison   Comparison   PAC   Co	28 Waterford Pl		
Name of Employer (Required) Self Employed  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Glenn Taylor  Mailing Address Aggregate year-to-date  Source: Corporation PAC Individual Loan Glenn Taylor  Mailing Address Aggregate year-to-date  \$22,000.00  Amount of each receipt this period receipt this period  \$50.00  Amount of each receipt this period  \$50.00  Aggregate year-to-date  \$325.00  Aggregate year-to-date  \$325.00  Full Name Ral eigh Byars  Mailing Address 48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Cocupation (Required) Not Employed  Aggregate year-to-date  \$400.00  Aggregate year-to-date			
Self Employed  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Glenn Taylor  Mailing Address 3644 Old Canton Rd  City, State, Zip Code Jackson, MS 39216-3313  Name of Employer (Required) Attorney  Source: Corporation PAC Individual Loan Occupation (Required) Attorney  Aggregate year-to-date  \$325.00  Anount of each receipt this period  \$325.00  Amount of each receipt this period  \$325.00  Aggregate year-to-date \$325.00  Aggregate (Mo., Day, Year)  \$325.00  Amount of each receipt this period  \$325.00  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Coccupation (Required) Not Employed  Aggregate year-to-date \$325.00  Aggregate year-to-date \$325.00  Aggregate year-to-date \$325.00	Jackson, MS 39211-2945		
Occupation (Required) Attorney  Source:	Name of Employer (Required)		
Source:   Corporation   PAC   Individual   Loan   Date (Mo., Day, Year)   Period	Self Employed		
Source:   Corporation   PAC   Individual   Loan   Date (Mo., Day, Year)   Period	Occupation (Required)	Aggregate	\$2,000,00
Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Glenn Taylor  Mailing Address 3644 Old Canton Rd  City, State, Zip Code Jackson, MS 39216-3313  Name of Employer (Required) Copeland Cook Taylor & Bush  Cocupation (Required) PAC Individual Loan  Date (Mo., Day, Year)  PAC Individual Loan  Date (Mo., Day, Year)  PAC Individual Date (Mo., Day, Year)  Full Name Raleigh Byars  Mailing Address 48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Cocupation (Required) Not Employed  Aggregate year-to-date  Amount of each receipt this period  PAC Individual Loan  Date (Mo., Day, Year)  PAC Vindividual Date (Mo., Day, Year)  Amount of each receipt this period  Amount of each receipt this each receipt this period  Amount of each receipt this each receipt this period  Amount of each receipt this each re			\$2,000.00
Other (please specify)   CMo., Day, Year)   receipt this period		Data	Amount of cook
Other (please specify)   (Mo., Day, Tear)   period			
Glenn Taylor  Mailing Address 3644 Old Canton Rd  City, State, Zip Code Jackson, MS 39216–3313  Name of Employer (Required) Copeland Cook Taylor & Bush  Occupation (Required) Source: Corporation PAC Individual Loan Other (please specify)  Full Name Raleigh Byars  Mailing Address 48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Aggregate (Mo., Day, Year)  Full Name Ragregate (Mo., Day, Year)  \$25.00  Aggregate (Mo., Day, Year)  \$25.00  Aggregate (Mo., Day, Year)  \$25.00  Aggregate year-to-date	Other (please specify)	(Mo., Day, Year)	•
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  Source: Corporation PAC Individual Loan Date (Mo., Day, Year) Cother (please specify)  Full Name Raleigh Byars  Mailing Address 48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Aggregate year-to-date  \$25.00  Aggregate year-to-date  \$25.00  Aggregate year-to-date  \$25.00  Aggregate year-to-date	Full Name	07/15/2023	\$50.00
Source:	Glenn Taylor	07,10,2020	+00.00
City, State, Zip Code Jackson, MS 39216-3313  Name of Employer (Required) Copeland Cook Taylor & Bush  Coccupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Raleigh Byars  Mailing Address 48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Aggregate year-to-date  \$325.00  Aggregate (Mo., Day, Year) Pace (Mo., Day, Year)  \$25.00  \$25.00  Aggregate year-to-date  \$675.00	Mailing Address		
Jackson, MS 39216-3313     Name of Employer (Required)     Copeland Cook Taylor & Bush	3644 Old Canton Rd		
Name of Employer (Required) Copeland Cook Taylor & Bush  Cocupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Raleigh Byars  Mailing Address 48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Aggregate year-to-date  \$325.00  Amount of each receipt this period  07/15/2023 \$25.00  \$25.00  Aggregate year-to-date \$675.00	City, State, Zip Code		
Cocupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Raleigh Byars  Mailing Address 48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Cocupation (Required) Not Employed  Aggregate year-to-date  \$325.00  Amount of each receipt this period (Mo., Day, Year) (Mo., Day, Year)  \$25.00  \$25.00  Aggregate year-to-date	Jackson, MS 39216-3313		
Occupation (Required) Attorney Aggregate year-to-date \$325.00   Source: Corporation PAC Individual Loan Date (Mo., Day, Year) Amount of each receipt this period   Full Name Raleigh Byars 07/15/2023 \$25.00   Mailing Address 48 County Road 229U 48 County Road 229U   City, State, Zip Code Oxford, MS 38655 Oxford, MS 38655   Name of Employer (Required) Not Employed Aggregate year-to-date \$675.00	Name of Employer (Required)		
Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Raleigh Byars  Mailing Address 48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employed  Occupation (Required) Not Employed  Amount of each receipt this period  07/15/2023 \$25.00  Aggregate year-to-date  \$675.00	Copeland Cook Taylor & Bush		
Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Raleigh Byars  Mailing Address 48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employed  Occupation (Required) Not Employed  Amount of each receipt this period  07/15/2023 \$25.00  Aggregate year-to-date  \$675.00	Occupation (Required)	Aggregate	¢225 00
Source: Corporation PAC Individual Loan Date (Mo., Day, Year)  Full Name Raleigh Byars  Mailing Address 48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Amount of each receipt this period  07/15/2023 \$25.00  Amount of each receipt this period  07/15/2023 \$25.00  Aggregate year-to-date			7323.00
County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Other (please specify)  (Mo., Day, Year)  period  07/15/2023 \$25.00  07/15/2023 \$25.00  Aggregate year-to-date \$675.00		Data	Amount of each
Tull Name Raleigh Byars  Mailing Address 48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Aggregate year-to-date  \$675.00			
Raleigh Byars  Mailing Address  48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  \$675.00	Other (please specify)	(MO., Day, Year)	
Mailing Address 48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Aggregate year-to-date  \$675.00		07/15/2023	\$25.00
48 County Road 229U  City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Aggregate year-to-date \$675.00	Raleigh Byars		
City, State, Zip Code Oxford, MS 38655  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  \$675.00			
Oxford, MS 38655  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Aggregate year-to-date \$675.00	48 County Road 229U		
Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Aggregate year-to-date \$675.00			
Not Employed  Occupation (Required) Not Employed  Aggregate year-to-date \$675.00	Oxford, MS 38655		
Occupation (Required) Not Employed  Aggregate year-to-date \$675.00	Name of Employer (Required)		
Not Employed year-to-date	Not Employed		
Not Employed year-to-date	Occupation (Required)	Aggregate	\$675 00
			70/3.00
Day 02 2020			

Name of Candidate or	Committee	Brandon	Presley

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	<b>✓</b> Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	Rebentisch				07/15/2023	\$100.00
Mailing Addr						
-	ar Springs Dr					
City, State, Z	•					
	MS 38804-9234 Dloyer (Required)					
NMMC	noyer (required)					
Occupation (					Aggregate year-to-date	\$373.90
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Stephen S	Suitts				07/25/2023	\$1,000.00
Mailing Addr						
737 Myrt	le St NE					
City, State, Z	•					
	GA 30308-1402 Dloyer (Required)					
Not Emplo						
Occupation (					Aggregate year-to-date	\$4,550.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Juanita I	Boutin				07/07/2023	\$25.00
Mailing Addr						
PO Box 40						
City, State, Z	<b>ip Code</b> MS 38655-0400					
	oloyer (Required)					
Not Emplo						
Occupation (					Aggregate year-to-date	\$575.00
Source:	Corporation		✓ Individual	Loan	Date	Amount of each
		PAC	<b>✓</b> IIIuiviuuai	Loan		
	Other (please sp		V IIIdividuai	Loan	(Mo., Day, Year)	receipt this period
Full Name Ouida Me	Other (please sp		Mindividual	LUAII		receipt this
Ouida Mer	Other (please sp		V muividual	LUAII	(Mo., Day, Year)	receipt this period
Ouida Mer	Other (please spruvia ess King Jr Ave		V muividual	Loan	(Mo., Day, Year)	receipt this period
Ouida Mer  Mailing Addr  1 Dr Ml I  City, State, Z	Other (please spruvia ess King Jr Ave		V Individual	LUAII	(Mo., Day, Year)	receipt this period
Ouida Mer Mailing Addr 1 Dr Ml I City, State, Z Memphis, Name of Emp	Other (please spruvia ess King Jr Ave ip Code TN 38103-1766 bloyer (Required)		V IIIUIVIUUAI	LOAII	(Mo., Day, Year)	receipt this period
Ouida Mer Mailing Addr 1 Dr Ml I City, State, Z Memphis, Name of Emp US Dept (	Other (please sportuvia  ess  King Jr Ave  ip Code  TN 38103-1766  bloyer (Required)  of Justice		V IIIUIVIUUAI	LUAII	(Mo., Day, Year)	receipt this period
Ouida Mer Mailing Addr 1 Dr Ml I City, State, Z Memphis, Name of Emp	Other (please sportuvia  ess  King Jr Ave  ip Code  TN 38103-1766  bloyer (Required)  of Justice		V IIIUIVIUUAI	LUAII	(Mo., Day, Year)	receipt this period

Name of Candidate or	Committee	Brandon	Presley

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please spe	ecify)			(Mo., Day, Year)	period
Full Name					07/11/2023	\$500.00
Forrest M	orris					1
Mailing Addre	ss					
600 N Bea						
City, State, Zip		00 4604				
	Louis, MS 395	20-4604				
Name of Employ	oyer (Required) yed					
Occupation (R					Aggregate	\$750.00
Not Emplo	yed				year-to-date	
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/23/2023	\$200.00
John B. C	lark					1
Mailing Addre						
	ng Meadows Rd					
City, State, Zip						
	, MS 39157-948	8				
Name of Employ	oyer (Required) yed					
Occupation (R	Required)				Aggregate	\$2,000.00
Not Emplo					year-to-date	42,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
Source:	Corporation Other (please spe	_	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	Other (please spe	_	✓ Individual	Loan		receipt this
Full Name Virginia	Other (please spe	_	<b>√</b> Individual	Loan	(Mo., Day, Year)	receipt this period
Full Name Virginia Mailing Addre	Other (please spe	_	✓Individual	Loan	(Mo., Day, Year)	receipt this period
Full Name Virginia Mailing Addre	Terry ss mar Blvd	_	✓Individual	Loan	(Mo., Day, Year)	receipt this period
Full Name Virginia Mailing Addre 1106 S Lat City, State, Zip	Terry ss mar Blvd c Code	_	✓Individual	Loan	(Mo., Day, Year)	receipt this period
Full Name Virginia  Mailing Addre 1106 S Lau City, State, Zip Oxford, M	Terry ss mar Blvd c Code S 38655-4732	_	✓Individual	Loan	(Mo., Day, Year)	receipt this period
Full Name Virginia  Mailing Addre 1106 S Lau City, State, Zip Oxford, M	Terry ss mar Blvd c Code S 38655-4732 over (Required)	_	✓Individual	Loan	(Mo., Day, Year)	receipt this period
Full Name Virginia  Mailing Addre 1106 S Lai City, State, Zip Oxford, M Name of Empl	Terry ss mar Blvd c Code S 38655-4732 over (Required) yed	_	✓Individual	Loan	(Mo., Day, Year) 07/25/2023 Aggregate	receipt this period \$250.00
Full Name Virginia Mailing Addre 1106 S La City, State, Zip Oxford, M Name of Empl Not Emplo	Terry ss mar Blvd c Code S 38655-4732 coyer (Required) yed Required)	_	✓Individual	Loan	(Mo., Day, Year)	receipt this period
Full Name Virginia Mailing Addres 1106 S Las City, State, Zip Oxford, M Name of Empl Not Emplo	Terry ss mar Blvd c Code S 38655-4732 coyer (Required) yed Required)	_	✓ Individual	Loan	(Mo., Day, Year)  07/25/2023  Aggregate year-to-date  Date	\$250.00 \$250.00
Full Name Virginia Mailing Addre 1106 S Lai City, State, Zip Oxford, M Name of Empl Not Emplo Occupation (R Not Emplo	Terry ss mar Blvd c Code S 38655-4732 loyer (Required) yed Required)	PAC			(Mo., Day, Year)  07/25/2023  Aggregate year-to-date	\$250.00
Full Name Virginia Mailing Addre 1106 S Lai City, State, Zip Oxford, M Name of Empl Not Emplo Occupation (R Not Emplo Source:	Terry ss mar Blvd c Code S 38655-4732 loyer (Required) yed Required) yed Corporation Other (please specific	PAC			(Mo., Day, Year)  07/25/2023  Aggregate year-to-date  Date	\$250.00  \$250.00  Amount of each receipt this
Full Name Virginia Mailing Addres 1106 S Las City, State, Zip Oxford, M Name of Emplo Not Emplo Occupation (R Not Emplo Source: Full Name Emily Lile	Terry ss mar Blvd c Code S 38655-4732 coyer (Required) yed Corporation Corporation Other (please species	PAC			Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00  \$250.00  Amount of each receipt this period
Full Name Virginia Mailing Addre 1106 S Lai City, State, Zip Oxford, M Name of Empl Not Emplo Occupation (R Not Emplo Source:	Terry ss mar Blvd c Code S 38655-4732 coyer (Required) yed Required) yed Corporation Other (please species	PAC			Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00  \$250.00  Amount of each receipt this period
Full Name Virginia Mailing Addres 1106 S Las City, State, Zip Oxford, M Name of Empl Not Emplo Occupation (R Not Emplo Source:  Full Name Emily Lile Mailing Addres 6346 Nells City, State, Zip	Terry ss mar Blvd c Code S 38655-4732 coyer (Required) yed Corporation Corporation Cother (please specials) es ss wood Dr c Code	PAC			Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00  \$250.00  Amount of each receipt this period
Full Name Virginia Mailing Addres 1106 S Las City, State, Zip Oxford, M Name of Emplo Not Emplo Occupation (R Not Emplo Source:  Full Name Emily Lile Mailing Addres 6346 Nells City, State, Zip Olive Bras	Terry ss mar Blvd c Code S 38655-4732 loyer (Required) yed Corporation Cother (please specials) es ss wood Dr c Code nch, MS 38654-	PAC			Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00  \$250.00  Amount of each receipt this period
Full Name Virginia Mailing Addres 1106 S Las City, State, Zip Oxford, M Name of Emplo Not Emplo Occupation (R Not Emplo Source:  Full Name Emily Lile Mailing Addres 6346 Nells City, State, Zip Olive Bras	Terry  ss mar Blvd c Code S 38655-4732  oyer (Required) yed  Corporation Cother (please specials) es ss wood Dr c Code nch, MS 38654- oyer (Required)	PAC			Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00  \$250.00  Amount of each receipt this period
Full Name Virginia Mailing Addre 1106 S Lat City, State, Zip Oxford, M Name of Empl Not Emplo Occupation (R Not Emplo Source:  Full Name Emily Lile Mailing Addre 6346 Nell: City, State, Zip Olive Brat Name of Empl	Terry ss mar Blvd o Code S 38655-4732 oyer (Required) yed Corporation Other (please specials) es ss wood Dr o Code nch, MS 38654- oyer (Required) yed	PAC			Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00  \$250.00  Amount of each receipt this period

Name of Candidate	or Committee Brandon	Presley	
Reporting Period _	7/1/2023	through	7/29/2023

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IIZED NEGEIF 13	
al Date (Mo., Day, Year)	Amount of each receipt this period
	•
07/28/2023	\$200.00
Aggregate year-to-date	\$450.00
al Dan Date	Amount of each
(Mo., Day, Year)	receipt this period
07/09/2023	\$500.00
Aggregate year-to-date	\$1,296.00
el Dete	Amount of each
	receipt this period
07/19/2023	\$46.00
Aggregate year-to-date	\$646.00
al Loan Date	Amount of each
(Mo., Day, Year)	receipt this period
07/29/2023	\$29.00
	Mo., Day, Year)  O7/28/2023  Aggregate year-to-date  Ital

Name of Candidate or	Committee	Brandon	Presley

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please spe		Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Mana	Other (please spe	=City)			_   ( 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	period
Full Name Trey Jarr	rard				07/21/2023	\$2,500.00
Mailing Addre						
1425 Mays						
City, State, Zi						
	GA 30324-3903					
Name of Emp	loyer (Required)					
	Energy Corpora	tion				
Occupation (I	Required)				Aggregate	\$3,500.00
Solar Dev	• •				year-to-date	Ψ3 <b>,</b> 300.00
Source:	Corporation	□PAC □	/ Individual	Loan	Date	Amount of each
					(Mo., Day, Year)	receipt this
	Other (please spe	ecity)				period
Full Name Lee Jacks	ı on				07/14/2023	\$100.00
Mailing Addre						
5157 MONT						
City, State, Zi	<b>p Code</b> n <b>,</b> MS 38672					
	·					
Not Emplo	loyer (Required) oyed					
Occupation (I	Required)				Aggregate	\$300.00
Not Emplo	yed				year-to-date	
Source:	Corporation	PAC V	/ Individual	Loan	Date	Amount of each
			_	<del>_</del>	(Mo., Day, Year)	receipt this
	Other (please spe	ecify)			_ ` ` , , ,	period
Full Name Ronald Ja		ecify)			07/06/2023	<b>period</b> \$500.00
Ronald Ja  Mailing Addre	anis ess	ecify)				<u>-</u>
Ronald Ja  Mailing Addre  225 W 83r	enis ess ed St	ecify)				<u>-</u>
Ronald Ja  Mailing Addre 225 W 83r  City, State, Zi	ess ed St p Code					<u>-</u>
Ronald Ja Mailing Addre 225 W 83r City, State, Zi New York,	ess ed St p Code NY 10024-4960					<u>-</u>
Ronald Ja Mailing Addre 225 W 83r City, State, Zi New York,	enis ed St p Code NY 10024-4960 loyer (Required)					<u>-</u>
Ronald Ja  Mailing Addre 225 W 83r  City, State, Zi New York, Name of Emplo	enis ed St p Code NY 10024-4960 eloyer (Required) eyed				07/06/2023	\$500.00
Ronald Ja Mailing Addre 225 W 83r City, State, Zi New York, Name of Emp	enis ed St p Code NY 10024-4960 eloyer (Required) eyed					<u>-</u>
Ronald Ja  Mailing Addre 225 W 83r  City, State, Zi New York, Name of Emp Not Emplo	enis ess ed St p Code NY 10024-4960 loyer (Required) eyed Required)	PAC v	∕Individual	Loan	Aggregate year-to-date  Date	\$500.00
Ronald Ja  Mailing Addre 225 W 83r  City, State, Zi New York,  Name of Emp Not Emplo  Occupation (I Retired	ess ed St p Code NY 10024-4960 loyer (Required) byed Required)	PAC v	Individual	Loan	Aggregate year-to-date	\$500.00 \$1,000.00 Amount of each
Ronald Ja  Mailing Addre 225 W 83r  City, State, Zi New York,  Name of Emp Not Emplo  Occupation (I Retired	enis  ess ed St  p Code  NY 10024-4960  loyer (Required)  byed  Required)  Corporation  Other (please specials)	PAC v	∕ Individual	Loan	Aggregate year-to-date  Date	\$1,000.00  Amount of each receipt this
Ronald Ja  Mailing Addre 225 W 83r  City, State, Zi New York, Name of Emplo Occupation (I Retired Source:  Full Name R. Clark	enis  ess ed St  p Code  NY 10024-4960  loyer (Required)  byed  Required)  Corporation  Other (please specified)	PAC v	/ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00  Amount of each receipt this period
Ronald Ja  Mailing Addre 225 W 83r  City, State, Zi New York,  Name of Emp Not Emplo  Occupation (I Retired  Source:	anis  ess ed St  p Code  NY 10024-4960  loyer (Required)  eyed  Required)  Corporation  Other (please specified)  Webb	PAC v	Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00  Amount of each receipt this period
Ronald Ja  Mailing Addre 225 W 83r  City, State, Zi New York, Name of Emp Not Emplo  Occupation (I Retired  Source:  Full Name R. Clark  Mailing Addre	anis  ess ed St p Code NY 10024-4960  loyer (Required)  eyed  Required)  Corporation  Other (please specials)  Webb ess exs exs exs exs exs exs exs exs exs	PAC v	☑Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00  Amount of each receipt this period
Ronald Ja  Mailing Addre 225 W 83r  City, State, Zi New York, Name of Emp Not Emplo  Occupation (I Retired  Source:  Full Name R. Clark  Mailing Addre 846 Van D  City, State, Zi	anis  ess ed St p Code NY 10024-4960  loyer (Required)  eyed  Required)  Corporation  Other (please specials)  Webb ess exs exs exs exs exs exs exs exs exs	□PAC vecify)	<b>∕</b> Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00  Amount of each receipt this period
Ronald Ja  Mailing Addre 225 W 83r  City, State, Zi New York, Name of Emp Not Emplo  Occupation (I Retired  Source:  Full Name R. Clark  Mailing Addre 846 Van I City, State, Zi Staten Is	anis  ess ed St  p Code  NY 10024-4960  loyer (Required)  byed  Required)  Corporation  Other (please specially spec	□PAC vecify)	∕ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00  Amount of each receipt this period
Ronald Ja  Mailing Addre 225 W 83r  City, State, Zi New York, Name of Emp Not Emplo  Occupation (I Retired  Source:  Full Name R. Clark  Mailing Addre 846 Van I City, State, Zi Staten Is Name of Emp	Poss  anis  poss  and St  p Code  NY 10024-4960  poyed  Required)  Corporation  Other (please specially sp	□PAC vecify)		Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00  Amount of each receipt this period
Ronald Ja  Mailing Addre 225 W 83r  City, State, Zi New York, Name of Emp Not Emplo  Occupation (I Retired  Source:  Full Name R. Clark  Mailing Addre 846 Van I City, State, Zi Staten Is Name of Emp	Required)  Corporation  Other (please special and, NY 10304  loyer (Required)  PCode Sland, NY 10304  Required)  Carporation  Other (please special and, NY 10304  Required)  Carporation  Alloyer (Required)  Carporation  Carpor	□PAC vecify)		Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00  Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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 Reporting Period
 7/1/2023
 through
 7/29/2023

Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Jackson	07/27/2023	\$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	\$977.00
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Judy Cormier	07/18/2023	\$100.00
Mailing Address 164 E 72nd St		
City, State, Zip Code New York, NY 10021-4373		
Name of Employer (Required) Self Employed		
Occupation (Required) Interior Designer	Aggregate year-to-date	\$600.00
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name A. K. McCarthy	07/28/2023	\$200.00
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	\$450.00
Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jamie W. Rebentisch	07/28/2023	\$25.00
Mailing Address 141 Poplar Springs Dr		
City, State, Zip Code Tupelo, MS 38804-9234		
Name of Employer (Required)  NMMC		
Occupation (Required) Pharmacist	Aggregate year-to-date	\$373.90

Name of Candidate	e or Committee Brandon	Presley	
Reporting Period _	7/1/2023	through	7/29/2023

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Source:	<ul><li>☐ Corporation</li><li>☐ Other (please specify)</li></ul>	PAC ✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeff Rich	ardson			07/29/2023	\$250.00
Mailing Addre					
115 Brist					
City, State, Zip	Code				
	MS 39110-5021				
	oyer(Required) ower Generation				
Occupation (R Executive	equired)			Aggregate year-to-date	\$1,250.00
Source:	Corporation [ Other (please specify	PAC ✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Francis S	pringer			07/11/2023	\$1,000.00
Mailing Addre				-	
136 Wildw					
City, State, Zip					
	MS 39110-7044				
Name of Empl	oyer (Required) oyed				
Occupation (R	equired)			Aggregate year-to-date	\$2,350.00
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
	Other (please specify		Loan	(Mo., Day, Year)	receipt this period
Full Name Audrey Mc	Other (please specify				receipt this
Full Name Audrey Mc	Other (please specify  Bride ss			(Mo., Day, Year)	receipt this period
Full Name Audrey Mc Mailing Addre	Other (please specify Bride ss keshore Dr			(Mo., Day, Year)	receipt this period
Full Name Audrey Mc: Mailing Addre 1250 E La City, State, Zip	Other (please specify Bride ss keshore Dr			(Mo., Day, Year)	receipt this period
Full Name Audrey Mc Mailing Addre 1250 E La City, State, Zip Starkville Name of Empl	Other (please specify  Bride ss keshore Dr Code		LUGII	(Mo., Day, Year)	receipt this period
Full Name Audrey Mc Mailing Addre 1250 E La City, State, Zip Starkville Name of Empl	Other (please specify  Bride ss keshore Dr Code e, MS 39759-2482 over (Required) Co Real Estate		LUGII	(Mo., Day, Year)	receipt this period
Full Name Audrey Mc. Mailing Addres 1250 E La City, State, Zip Starkvill Name of Empl Mcbride & Occupation (R	Other (please specify  Bride ss keshore Dr Code e, MS 39759-2482 over (Required) Co Real Estate		Loan	(Mo., Day, Year) 07/23/2023	\$25.00 \$315.00
Full Name Audrey Mc. Mailing Addre 1250 E La City, State, Zip Starkvill Name of Empl Mcbride & Occupation (R	Other (please specify  Bride ss keshore Dr Code e, MS 39759-2482 oyer (Required) Co Real Estate equired)	PAC Individual		(Mo., Day, Year)  07/23/2023  Aggregate year-to-date	receipt this period \$25.00
Full Name Audrey Mc. Mailing Addre 1250 E La City, State, Zip Starkvill Name of Empl Mcbride & Occupation (R	Other (please specify  Bride  SS  keshore Dr  Code  e, MS 39759-2482  oyer (Required)  Co Real Estate  dequired)  Corporation  Other (please specify	PAC Individual		(Mo., Day, Year)  07/23/2023  Aggregate year-to-date  Date	\$25.00 \$315.00  Amount of each receipt this
Full Name Audrey Mci Mailing Addres 1250 E La City, State, Zip Starkvill Name of Empl Mcbride & Occupation (R Broker Source: Full Name Edson Gri Mailing Addres	Other (please specify  Bride ss keshore Dr Code e, MS 39759-2482 over (Required) Co Real Estate equired)  Corporation  Other (please specify  swold ss	PAC Individual		(Mo., Day, Year)  07/23/2023  Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$315.00  Amount of each receipt this period
Full Name Audrey Mc. Mailing Addres 1250 E La City, State, Zip Starkvill Name of Empl Mcbride & Occupation (R Broker Source: Full Name Edson Gri Mailing Addres 1699 S Tr	Other (please specify  Bride ss keshore Dr OCode e, MS 39759-2482 Over (Required) Co Real Estate equired)  Corporation Other (please specify swold ss enton St	PAC Individual		(Mo., Day, Year)  07/23/2023  Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$315.00  Amount of each receipt this period
Full Name Audrey Mc. Mailing Addres 1250 E La City, State, Zip Starkvill Name of Empl Mcbride & Occupation (R Broker Source: Full Name Edson Gri Mailing Addres 1699 S Tr City, State, Zip	Other (please specify  Bride ss keshore Dr OCode e, MS 39759-2482 Over (Required) Co Real Estate equired)  Corporation Other (please specify swold ss enton St	PAC Individual		(Mo., Day, Year)  07/23/2023  Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$315.00  Amount of each receipt this period
Full Name Audrey Mc. Mailing Addre 1250 E La City, State, Zip Starkvill Name of Empl Mcbride & Occupation (R Broker Source:  Full Name Edson Gri Mailing Addre 1699 S Tr City, State, Zip Denver, Co	Other (please specify  Bride  ss keshore Dr Ocode e, MS 39759-2482  oyer (Required)  Co Real Estate equired)  Corporation  Other (please specify  swold ss enton St Ocode 0 80231-5602  oyer (Required)	PAC Individual		(Mo., Day, Year)  07/23/2023  Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$315.00  Amount of each receipt this period
Full Name Audrey Mc. Mailing Addred 1250 E La City, State, Zip Starkville Name of Empl Mcbride & Occupation (R Broker Source: Full Name Edson Gri Mailing Addred 1699 S Tre City, State, Zip Denver, Co	Other (please specify  Bride  ss keshore Dr Ocode e, MS 39759-2482  oyer (Required)  Co Real Estate equired)  Corporation  Other (please specify  swold ss enton St Ocode 0 80231-5602  oyer (Required)	PAC Individual		(Mo., Day, Year)  07/23/2023  Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$315.00  Amount of each receipt this period
Full Name Audrey Mc. Mailing Addre 1250 E La City, State, Zip Starkville Name of Empl Mcbride & Occupation (R Broker Source:  Full Name Edson Gri Mailing Addre 1699 S Tr City, State, Zip Denver, Co	Other (please specify  Bride ss keshore Dr Ocode e, MS 39759-2482 over (Required) Co Real Estate equired)  Corporation Other (please specify swold ss enton St Ocode D 80231-5602 over (Required) yed equired)	PAC Individual		(Mo., Day, Year)  07/23/2023  Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$315.00  Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Penson	07/15/2023	\$100.00
Mailing Address 377 Huntington Pl		
City, State, Zip Code		
Tupelo, MS 38801-7965		
Name of Employer (Required) CME Church		
Occupation (Required) Pastor	Aggregate year-to-date	\$204.60
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name	07/07/2023	\$6.00
R. Clark Webb		
Mailing Address 846 Van Duzer St		
City, State, Zip Code		
Staten Island, NY 10304-1816		
Name of Employer (Required) Metropolitan Transportation Authority		
Occupation (Required) It Professional	Aggregate year-to-date	\$225.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Anita Yarbrough	07/27/2023	\$50.00
Inizoa Iazozoagii		
Mailing Address		
Mailing Address 202 Lakeside Dr		
202 Lakeside Dr  City, State, Zip Code		
202 Lakeside Dr  City, State, Zip Code  Houston, MS 38851-7432		
202 Lakeside Dr  City, State, Zip Code		
202 Lakeside Dr  City, State, Zip Code  Houston, MS 38851-7432  Name of Employer (Required)	Aggregate year-to-date	\$250.00
202 Lakeside Dr  City, State, Zip Code  Houston, MS 38851-7432  Name of Employer (Required)  Not Employed  Occupation (Required)		Amount of each
202 Lakeside Dr  City, State, Zip Code Houston, MS 38851-7432  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed	year-to-date	
202 Lakeside Dr  City, State, Zip Code  Houston, MS 38851-7432  Name of Employer (Required)  Not Employed  Occupation (Required)  Not Employed  Source: Corporation PAC Individual Loan  Other (please specify)	year-to-date  Date	Amount of each receipt this
202 Lakeside Dr  City, State, Zip Code  Houston, MS 38851-7432  Name of Employer (Required)  Not Employed  Occupation (Required)  Not Employed  Source: Corporation PAC Individual Loan  Other (please specify)  Full Name  Elise Gillespie	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
202 Lakeside Dr  City, State, Zip Code  Houston, MS 38851-7432  Name of Employer (Required)  Not Employed  Occupation (Required)  Not Employed  Source: Corporation PAC Individual Loan  Other (please specify)	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
202 Lakeside Dr  City, State, Zip Code  Houston, MS 38851-7432  Name of Employer (Required)  Not Employed  Occupation (Required)  Not Employed  Source: Corporation PAC Individual Loan  Other (please specify)  Full Name  Elise Gillespie  Mailing Address  1013 S Lamar Blvd  City, State, Zip Code	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
202 Lakeside Dr  City, State, Zip Code Houston, MS 38851-7432  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Elise Gillespie  Mailing Address 1013 S Lamar Blvd  City, State, Zip Code Oxford, MS 38655-4739  Name of Employer (Required)	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
202 Lakeside Dr  City, State, Zip Code Houston, MS 38851-7432  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Elise Gillespie  Mailing Address 1013 S Lamar Blvd  City, State, Zip Code Oxford, MS 38655-4739	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this	
	Other (please sp	ecify)			(Mo., Day, Year)	period	
Full Name					07/18/2023	\$43.30	
Harry Owe	en 					,	
Mailing Addre							
	d Valley Dr						
City, State, Zi	<b>p Code</b> MS 39211-6224						
Not Emplo	oloyer (Required) Oyed						
Occupation (I	Required)				Aggregate year-to-date	\$218.30	
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each	
oource.					(Mo., Day, Year)	receipt this	
	Utner (please sp	есіту)			(mo., buy, rear)	period	
Full Name Raleigh E	Byars				07/28/2023	\$25.00	
Mailing Addre							
•	Road 229U						
City, State, Zi	p Code						
Oxford, N	IS 38655						
Name of Emp	loyer (Required)						
Occupation (I	Required)				Aggregate	\$675.00	
Not Emplo					year-to-date	7073.00	
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each	
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period	
Full Name		ecify)			(Mo., Day, Year)		
Robert B.	Lampton III	ecify)				period	
Robert B.  Mailing Addre	Lampton III	ecify)				period	
Robert B.  Mailing Addre	Lampton III ess heryl Dr	ecify)				period	
Robert B.  Mailing Addre 2404 N Ch  City, State, Zi	Lampton III  pss neryl Dr p Code	ecify)				period	
Robert B.  Mailing Addre 2404 N Ch  City, State, Zi Jackson,	Lampton III  pss neryl Dr  p Code  MS 39211-4907	ecify)				period	
Robert B.  Mailing Addre 2404 N Ch  City, State, Zi Jackson,	Lampton III  pess heryl Dr  p Code  MS 39211-4907  lloyer (Required)	ecify)				period	
Mailing Addre 2404 N Ch City, State, Zi Jackson, Name of Emp Not Emplo	Lampton III  pess neryl Dr p Code MS 39211-4907 ployer (Required) pyed	ecify)			07/29/2023	\$1,000.00	
Robert B.  Mailing Addre 2404 N Ch  City, State, Zi Jackson,  Name of Emp	Lampton III  pess neryl Dr p Code MS 39211-4907 ployer (Required) pyed	ecify)				period	
Mailing Addre 2404 N Ch City, State, Zi Jackson, Name of Emp Not Emplo	Lampton III  pess neryl Dr p Code MS 39211-4907 ployer (Required) pyed	ecify)	✓Individual	Loan	Aggregate year-to-date  Date	\$1,000.00 \$2,000.00 Amount of each	
Mailing Addre 2404 N Ch City, State, Zi Jackson, Name of Emp Not Emplo Occupation (I Retired	Lampton III  ess heryl Dr p Code MS 39211-4907  loyer (Required) byed  Required)	PAC	✓Individual	Loan	Aggregate year-to-date	\$1,000.00 \$2,000.00	
Robert B.  Mailing Addre 2404 N Ch  City, State, Zi Jackson,  Name of Emp Not Emplo  Occupation (I Retired  Source:	Lampton III  pess heryl Dr p Code MS 39211-4907  ployer (Required) byed  Required)  Corporation  Other (please sp	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,000.00  Amount of each receipt this period	
Mailing Addre 2404 N Cr City, State, Zi Jackson, Name of Emp Not Emplo Occupation (I Retired	Lampton III  pess heryl Dr p Code MS 39211-4907  ployer (Required) byed  Required)  Corporation  Other (please sp	PAC	✓Individual	Loan	Aggregate year-to-date  Date	\$1,000.00 \$2,000.00 Amount of each receipt this	
Mailing Addre 2404 N Ch City, State, Zi Jackson, Name of Emplo Occupation (I Retired Source: Full Name Roy Decke	Lampton III  pss neryl Dr p Code MS 39211-4907  ployer (Required) pyed  Required)  Corporation  Other (please sp	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,000.00  Amount of each receipt this period	
Mailing Addre 2404 N Ch City, State, Zi Jackson, Name of Emplo Occupation (I Retired Source: Full Name Roy Decke	Lampton III  pss neryl Dr p Code MS 39211-4907  ployer (Required) pyed  Required)  Corporation  Other (please sp er ess ridge Dr	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,000.00  Amount of each receipt this period	
Robert B.  Mailing Addre 2404 N Cr City, State, Zi Jackson, Name of Emp Not Emplo Occupation (I Retired Source:  Full Name Roy Decke Mailing Addre 4044 Oakr City, State, Zi	Lampton III  pss neryl Dr p Code MS 39211-4907  ployer (Required) pyed  Required)  Corporation  Other (please sp er ess ridge Dr	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,000.00  Amount of each receipt this period	
Robert B.  Mailing Addre 2404 N Ch  City, State, Zi Jackson, Name of Emp Not Emplo  Occupation (I Retired  Source:  Full Name Roy Decket Mailing Addre 4044 Oakr  City, State, Zi Jackson, Name of Emp	Lampton III  pss neryl Dr p Code MS 39211-4907  ployer (Required) pyed  Required)  Corporation  Other (please sp er pss ridge Dr p Code MS 39216-3413  ployer (Required)	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,000.00  Amount of each receipt this period	
Robert B.  Mailing Addre 2404 N Ch  City, State, Zi Jackson,  Name of Emp Not Emplo  Occupation (I Retired  Source:  Full Name Roy Decket  Mailing Addre 4044 Oakr  City, State, Zi Jackson,	Lampton III  pss neryl Dr p Code MS 39211-4907  ployer (Required) pyed  Required)  Corporation  Other (please sp er pss ridge Dr p Code MS 39216-3413  ployer (Required)	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,000.00  Amount of each receipt this period	
Robert B.  Mailing Addre 2404 N Ch  City, State, Zi Jackson, Name of Emp Not Emplo  Occupation (I Retired  Source:  Full Name Roy Decket Mailing Addre 4044 Oakr  City, State, Zi Jackson, Name of Emp	Lampton III  pess heryl Dr p Code MS 39211-4907  loyer (Required) byed  Required)  Corporation  Other (please sp er pess ridge Dr p Code MS 39216-3413  loyer (Required) ecker  Required)	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,000.00  Amount of each receipt this period	

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Buchanan	07/11/2023	\$25.00
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	\$764.71
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Wilson Golden	07/05/2023	\$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	\$1,235.00
Source: ☐ Corporation ☐ PAC ✓ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nicole Burnett	07/26/2023	\$100.00
Mailing Address		
736 Central Ave		
City, State, Zip Code Sykesville, MD 21784-7509		
Name of Employer (Required)		
Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Richard Rhoden	07/27/2023	\$50.00
Mailing Address		
778 Gillespie St		
City, State, Zip Code Jackson, MS 39202-1711		
Name of Employer (Required) Self Employed		
Seri Empreyed		

Name of Candidate or Committe	<b>e</b> Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	✓ PAC Individual	Loan	Date	Amount of each receipt this
	Other (please spec	:ify)		(Mo., Day, Year)	period
Full Name				07/18/2023	\$25,000.00
Sheet Met	al Air Rail Tra	insportation Poli		0771072023	¥23 <b>,</b> 000.00
Mailing Addre	ss				
1750 New	York Ave NW				
City, State, Zi					
Washingto	n, DC 20006-530	1			
Name of Emp	oyer (Required)				
Occupation (F	Required)			Aggregate year-to-date	\$25,000.00
Source:	Corporation	PAC Individual	Loan	Date	Amount of each
	Other (please spec	cify)		(Mo., Day, Year)	receipt this period
Full Name				07/28/2023	\$100.00
Dalaney M	echam			0772072023	+100 <b>:</b> 00
Mailing Addre					
20 E 52nd	St				
City, State, Zi					
	MS 39507-4523				
	oyer (Required)				
Self Empl	oyed				
Occupation (F	Required)			Aggregate	\$250.00
Attorney				year-to-date	,
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
	Other (please spec	:ify)		(Mo., Day, Year)	receipt this period
Full Name				07/21/2023	\$4.60
Charles P					
Ma:I: A alalua	SS				
Mailing Addre					
377 Hunti	ngton Pl				
377 Hunti City, State, Zi	ngton Pl Code				
377 Hunti <b>City, State, Zi</b> Tupelo, M	ngton Pl Code S 38801-7965				
377 Hunti City, State, Zip Tupelo, M Name of Emp	ngton P1 o Code S 38801-7965 oyer (Required)				
377 Hunti City, State, Zi Tupelo, M Name of Emp CME Churc	ngton P1 o Code S 38801-7965 oyer (Required)				
377 Hunti City, State, Zip Tupelo, M Name of Emp	ngton P1 o Code S 38801-7965 oyer (Required)			Aggregate year-to-date	\$204.60
377 Hunti City, State, Zi Tupelo, M Name of Emp CME Churc Occupation (F	ngton P1 o Code S 38801-7965 oyer (Required)	□ PAC ✓ Individual	Loan	year-to-date Date	Amount of each
377 Hunti City, State, Zip Tupelo, M Name of Emp CME Churc Occupation (F Pastor	ngton P1 o Code S 38801-7965 loyer (Required) h		Loan	year-to-date	
377 Hunti City, State, Zig Tupelo, M Name of Emp CME Churc Occupation (F Pastor Source:	ngton P1  o Code S 38801-7965  oyer (Required) h  Required)  Corporation  Other (please spec		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
377 Hunti City, State, Zig Tupelo, M Name of Emp CME Churc Occupation (F Pastor Source:	ngton P1  o Code S 38801-7965  oyer (Required) h  Required)  Corporation  Other (please spec		Loan	year-to-date Date	Amount of each receipt this
377 Hunti City, State, Zi Tupelo, M Name of Emp CME Churc Occupation (F Pastor Source: Full Name Davis Dav Mailing Addre	ngton Pl c Code S 38801-7965 loyer (Required) h Required) Corporation Other (please species		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
377 Hunti City, State, Zij Tupelo, M Name of Emp CME Churc Occupation (F Pastor Source: Full Name Davis Dav Mailing Addre	ngton Pl c Code S 38801-7965  loyer (Required) h Required)  Corporation  Other (please specials ss e Sawmill Rd		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
377 Hunti City, State, Zi Tupelo, M Name of Emp CME Churc Occupation (F Pastor Source: Full Name Davis Dav Mailing Addre 179 Littl City, State, Zi	ngton Pl c Code S 38801-7965 loyer (Required) h Required)  Corporation  Other (please specials ss e Sawmill Rd c Code		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
377 Hunti City, State, Zip Tupelo, M Name of Emp CME Churce Occupation (F Pastor Source: Full Name Davis Dav Mailing Addres 179 Littl City, State, Zip Laurel, M	ngton Pl c Code S 38801-7965  oyer (Required) h Required)  Corporation Other (please specials ss e Sawmill Rd c Code S 39443-9157		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
377 Hunti City, State, Zig Tupelo, M Name of Emp CME Churce Occupation (F Pastor Source: Full Name Davis Dav Mailing Addre 179 Littl City, State, Zig Laurel, M Name of Emp	ngton Pl c Code S 38801-7965  oyer (Required) h Required)  Corporation Other (please specials ss e Sawmill Rd c Code S 39443-9157  loyer (Required)		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
377 Hunti City, State, Zip Tupelo, M Name of Emp CME Churce Occupation (F Pastor Source: Full Name Davis Dav Mailing Addres 179 Littl City, State, Zip Laurel, M	ngton Pl c Code S 38801-7965  oyer (Required) h Required)  Corporation Other (please specials ss e Sawmill Rd c Code S 39443-9157  loyer (Required)		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
377 Hunti City, State, Zig Tupelo, M Name of Emp CME Churco Occupation (F Pastor Source: Full Name Davis Dav Mailing Addred 179 Littl City, State, Zig Laurel, M Name of Emp Not Emploo Occupation (F	ngton Pl c Code S 38801-7965 Oyer (Required) h Required)  Corporation Other (please specials ss e Sawmill Rd c Code S 39443-9157 Oyer (Required) yed Required)		Loan	year-to-date  Date (Mo., Day, Year)  07/12/2023  Aggregate	Amount of each receipt this period
377 Hunti City, State, Zig Tupelo, M Name of Emp CME Churce Occupation (F Pastor Source: Full Name Davis Dav Mailing Addre 179 Littl City, State, Zig Laurel, M Name of Emp Not Emplo	ngton Pl c Code S 38801-7965 Oyer (Required) h Required)  Corporation Other (please specials ss e Sawmill Rd c Code S 39443-9157 Oyer (Required) yed Required)		Loan	year-to-date  Date (Mo., Day, Year)  07/12/2023	Amount of each receipt this period \$50.00

Name of Candidate	or Committee Brandon	Presley	
Reporting Period _	7/1/2023	through	7/29/2023

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Source:	Corporation Other (please spe		Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny Wr	.av				07/26/2023	\$200.00
Mailing Addre						
731 Milam						
City, State, Zi						
	f, MS 39741-90	21				
Name of Emplo	loyer (Required)					
Occupation (F Retired	Required)				Aggregate year-to-date	\$725.00
Source:	Corporation	PAC 🗸	Individual	Loan	Date	Amount of each
	Other (please spe	cify)			(Mo., Day, Year)	receipt this period
<b>Full Name</b> Richard R	hoden				07/07/2023	\$50.00
Mailing Addre						
778 Gille						
City, State, Zip	<b>p Code</b> MS 39202-1711					
	loyer (Required)					
Self Empl						
Occupation (F					Aggregate	\$575.00
Physician					year-to-date	4070.00
Source:	☐ Corporation☐ Other (please spe		Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name						
Louise Co	ole				07/17/2023	\$100.00
Mailing Addre						
518 N Chu						
City, State, Zip Okolona,	<b>p Code</b> MS 38860-1017					
Name of Emp	loyer (Required)					
Brandon P	resley for Gov	ernor				
Occupation (Field Org	Required)				A	
_					Aggregate year-to-date	\$210.00
Source:		□PAC ✓	Individual	Loan		Amount of each
	anizer		Individual	Loan	year-to-date	·
	Corporation Other (please spe		Individual	Loan	year-to-date Date	Amount of each receipt this
Source:  Full Name Johnny D.  Mailing Addre	Corporation Other (please spe		Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny D. Mailing Addre 611 S Pea City, State, Zi	Corporation Other (please spe	ecify)	Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny D. Mailing Addre 611 S Pea City, State, Zi Ridgeland	Corporation Other (please spe  Jones  ss  r Orchard Rd p Code 1, MS 39157-483	ecify)	Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny D. Mailing Addre 611 S Pea City, State, Zig Ridgeland Name of Emp	Corporation Other (please specifies) Jones Pass Or Orchard Rd P Code I, MS 39157-483  Required)	ecify)	Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny D. Mailing Addre 611 S Pea City, State, Zi Ridgeland	Jones  Project  Gorporation  Other (please speed)  Jones  Jones	ecify)	Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committe	<b>e</b> Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Lynn Dobbs	07/08/2023	\$25.00
Mailing Address 43 Dobbs Dr		
City, State, Zip Code		
Columbus, MS 39701-9619		
Name of Employer (Required)		
Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Linda Cox	07/28/2023	\$50.00
Mailing Address		
12 Estate Dr		
City, State, Zip Code		
Long Beach, MS 39560-3912		
Name of Employer (Required)		
Veterans Health Administration		
Occupation (Required) Psychologist	Aggregate year-to-date	\$275.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name R. W. Whitaker Jr	07/20/2023	\$1,000.00
Mailing Address 4206 Ridgemont Dr		
City, State, Zip Code		
Belden, MS 38826-9783		
Name of Employer (Required)		
Whitaker Sales, Inc		
Occupation (Populard)	Aggregate	\$2,000.00
Occupation (Required) President	year-to-date	
	Date	Amount of each
President	-	Amount of each receipt this period
President  Source: Corporation PAC Individual Loan	Date	receipt this
President  Source: Corporation PAC Individual Loan Other (please specify)  Full Name	Date (Mo., Day, Year)	receipt this period
President  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Edson Griswold  Mailing Address 1699 S Trenton St  City, State, Zip Code	Date (Mo., Day, Year)	receipt this period
President  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Edson Griswold  Mailing Address 1699 S Trenton St  City, State, Zip Code Denver, CO 80231-5602	Date (Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify)  Full Name Edson Griswold  Mailing Address 1699 S Trenton St  City, State, Zip Code	Date (Mo., Day, Year)	receipt this period
President  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Edson Griswold  Mailing Address 1699 S Trenton St  City, State, Zip Code Denver, CO 80231-5602  Name of Employer (Required)	Date (Mo., Day, Year)	receipt this period

Name of Candidate or Committe	<b>e</b> Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

				1 1 0	
Source:	☐ Corporation☐ Other (please spe	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	:on			07/21/2023	\$25.00
Mailing Addre	ess				
City, State, Zi					
Name of Emp	loyer (Required) oyed				
Occupation (I				Aggregate year-to-date	\$850.00
Source:	Corporation Other (please spe	✓ PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lee Count	y Democratic E	xecutive Fundrais		07/13/2023	\$250.00
Mailing Addre					
City, State, Zi	<b>p Code</b> IS 38801-3256				
Name of Emp	loyer (Required)				
Occupation (I	Required)			Aggregate year-to-date	\$1,150.00
Source:	☐ Corporation☐ Other (please spe	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Gri	swold			07/05/2023	\$15.00
Mailing Addre	ess				
City, State, Zi	<b>p Code</b> CO 80231-5602				
Name of Emp	loyer (Required) oyed				
Occupation (I	• •			Aggregate year-to-date	\$307.50
Source:	Corporation Other (please spe	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Gri	amold			07/16/2023	\$25.00
Mailing Addre	ess				
City, State, Zi	p Code				
Name of Emp	0 80231-5602 loyer (Required)				
Occupation (I	Required)			Aggregate year-to-date	\$307.50
Not Emplo	yea			,	

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James O. Nelson II	07/07/2023	\$250.00
Mailing Address 113 Excursion		
City, State, Zip Code		
Irvine, CA 92618-0819		
Name of Employer (Required) First American Title Insurance Company		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,250.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name	07/17/2023	\$25.00
Diane Irvin	01/11/2025	Q23.00
Mailing Address 4047 Wyandot St		
City, State, Zip Code		
Denver, CO 80211-2140		
Name of Employer (Required)		
Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$263.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Kenneth Groue	07/08/2023	\$50.00
Mailing Address		
128 Seaside Dr		
120 Scasiac Di		
City, State, Zip Code Ocean Springs, MS 39564-5145		
City, State, Zip Code		
City, State, Zip Code Ocean Springs, MS 39564-5145		
City, State, Zip Code Ocean Springs, MS 39564-5145 Name of Employer (Required)	Aggregate year-to-date	\$725.00
City, State, Zip Code Ocean Springs, MS 39564-5145  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed	year-to-date	
City, State, Zip Code Ocean Springs, MS 39564-5145  Name of Employer (Required) Not Employed  Occupation (Required)		\$725.00  Amount of each receipt this period
City, State, Zip Code Ocean Springs, MS 39564-5145  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan Other (please specify)	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this
City, State, Zip Code Ocean Springs, MS 39564-5145  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan Other (please specify)	year-to-date  Date	Amount of each receipt this period
City, State, Zip Code Ocean Springs, MS 39564-5145  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan Other (please specify)	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Code Ocean Springs, MS 39564-5145  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Jessica Zufolo  Mailing Address 426 10th St NE  City, State, Zip Code	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Code Ocean Springs, MS 39564-5145  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Jessica Zufolo  Mailing Address 426 10th St NE  City, State, Zip Code Washington, DC 20002-6120  Name of Employer (Required)	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Code Ocean Springs, MS 39564-5145  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Jessica Zufolo  Mailing Address 426 10th St NE  City, State, Zip Code Washington, DC 20002-6120	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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 Reporting Period
 7/1/2023
 through
 7/29/2023

Source:	Corporation Other (please spec	□ PAC ✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael C	'ollins			07/28/2023	\$100.00
Mailing Addre					
1826 Ray					
City, State, Zi					
	ings, MS 39564-	-2930			
Name of Emp Not Emplo	loyer (Required) eyed				
Occupation (I				Aggregate year-to-date	\$650.00
Source:	Corporation	PAC Individual	Loan	Date	Amount of each receipt this
	Other (please spec	cify)		(Mo., Day, Year)	period
<b>Full Name</b> Jerry Smi	th			07/28/2023	\$50.00
Mailing Addre					
City, State, Zi	p Code				
Madison,	MS 39110-7798				
-	<b>loyer(Required)</b> opi Baptist Medi	ical Center			
Occupation (I				Aggregate year-to-date	\$396.00
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
	Other (please spec	cify)		(Mo., Day, Year)	receipt this period
Full Name Cynthia Y	ap			07/28/2023	\$25.00
Mailing Address 1955 Popp	ess os Ferry Rd				
City, State, Zi	_				
Biloxi, N	p Code IS 39532-2024 loyer (Required)				
Biloxi, M Name of Emp Not Emplo	p Code ds 39532-2024 loyer (Required) eyed Required)			Aggregate year-to-date	\$505.00
Biloxi, M Name of Emp Not Emplo	p Code ds 39532-2024 loyer (Required) eyed Required)	<b>□</b> PAC ✓ Individual	Loan	year-to-date  Date	Amount of each
Biloxi, Mame of Emp Not Emplo Occupation (I Not Emplo	p Code  1S 39532-2024  Iloyer (Required)  byed  Required)  byed		Loan	year-to-date	
Biloxi, Mame of Emp Not Emplo Occupation (I Not Emplo	p Code  1S 39532-2024  loyer (Required)  byed  Required)  yed  Corporation  Other (please spec		Loan	year-to-date  Date	Amount of each receipt this
Biloxi, M Name of Emp Not Emplo Occupation (I Not Emplo Source:	p Code  1S 39532-2024  loyer (Required)  byed  Corporation  Other (please spec		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Biloxi, M Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Charles (I Mailing Addres)	p Code  1S 39532-2024  loyer (Required)  byed  Corporation  Other (please spectation)  Cahn  ess  al Park W		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Biloxi, M Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Charles (I Mailing Addres) 1 Centra City, State, Zi	p Code  1S 39532-2024  loyer (Required)  byed  Corporation  Other (please spectation)  Cahn  ess  al Park W		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Biloxi, M Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Charles (C Mailing Addre 91 Centra City, State, Zi New York, Name of Emp	p Code  1S 39532-2024  loyer (Required)  byed  Corporation  Other (please spectal)  Cahn  PSS  Al Park W  P Code  NY 10023-4660  loyer (Required)		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Biloxi, M Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Charles (C Mailing Addre 91 Centra City, State, Zi New York,	p Code  1S 39532-2024  loyer (Required)  byed  Corporation  Other (please spectal)  Cahn  PSS  Al Park W  P Code  NY 10023-4660  loyer (Required)		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Biloxi, M Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Charles ( Mailing Addre 91 Centra City, State, Zi New York, Name of Emp	p Code AS 39532-2024  loyer (Required) byed  Corporation  Other (please spectal)  Park W  p Code  NY 10023-4660  loyer (Required) byed		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate	or Committee Brandon	Presley	
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Source:	Corporation Other (please spec	PAC ✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Teresa Sw	rain			07/21/2023	\$50.00
Mailing Addre					
107 Pecan					
City, State, Zi <sub>l</sub>	p Code				
Nettleton	, MS 38858-5930				
Name of Empl Kitchen10	loyer (Required)				
Occupation (F	Required)			Aggregate year-to-date	\$227.25
Source:	Corporation	PAC Individual	Loan	Date	Amount of each
	Other (please spec	ify)		(Mo., Day, Year)	receipt this period
Full Name Jason Lee	Shelton			07/22/2023	\$500.00
Mailing Addre	ess				
	n Oaks Dr				
City, State, Zi	p Code MS 38866-9404				
	loyer (Required)				
GSA	loyer (ixequired)				
Occupation (F	Required) Administrator			Aggregate year-to-date	\$3,586.39
Source:	Corporation	PAC ✓ Individual	Loan	Date	Amount of each
Source.	Other (please spec		LOAII	(Mo., Day, Year)	receipt this period
Full Name				07/15/2023	\$25.00
Diane Ale	vander				
Diane Ale					
Diane Ale Mailing Addre 46 Sagewo	ess				
Mailing Addre	ess od Dr				
Mailing Addre 46 Sagewo City, State, Zil Brandon,	p Code MS 39042-2526				
Mailing Addre 46 Sagewo City, State, Zil Brandon,	p Code MS 39042-2526				
Mailing Addre 46 Sagewo City, State, Zil Brandon, Name of Empl GM Financ Occupation (F	p Code MS 39042-2526 loyer (Required)	ager		Aggregate year-to-date	\$300.00
Mailing Addre 46 Sagewo City, State, Zil Brandon, Name of Empl GM Financ Occupation (F	p Code MS 39042-2526  loyer (Required) ial  Required)	ager <b>□ PAC</b> ✓ Individual	Loan		Amount of each
Mailing Addre 46 Sagewo City, State, Zig Brandon, Name of Empl GM Financ Occupation (F Dealer Re	p Code p Code MS 39042-2526 loyer (Required) ial Required)	PAC Individual	Loan	year-to-date	
Mailing Addre 46 Sagewo City, State, Zig Brandon, Name of Empl GM Financ Occupation (F Dealer Re Source:	p Code MS 39042-2526 loyer (Required) ial Required) clationships Man	PAC Individual	Loan	year-to-date Date	Amount of each receipt this
Mailing Addre 46 Sagewo City, State, Zip Brandon, Name of Empl GM Financ Occupation (F Dealer Re Source: Full Name Patsy R. Mailing Addre	p Code MS 39042-2526  loyer (Required) ial  Required) lationships Man  Corporation  Other (please spec	PAC Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Addre 46 Sagewo City, State, Zig Brandon, Name of Employ GM Financ Occupation (F Dealer Re Source: Full Name Patsy R. Mailing Addre 128 Woodl City, State, Zig	p Code MS 39042-2526  Nover (Required)  Plationships Man Corporation Other (please spectors)  Brumfield  SS  and Ridge Dr  p Code	PAC Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Addre 46 Sagewo City, State, Zig Brandon, Name of Empl GM Financ Occupation (F Dealer Re Source: Full Name Patsy R. Mailing Addre 128 Woodl City, State, Zig Mccomb, M	p Code MS 39042-2526 Hoyer (Required) Hationships Man Corporation Other (please spec Brumfield Hationships Man Security Of the Code Hationships Man Security Of the Code Hationships Man And Corporation Hationships Man Corporation Hationships Man And Corporation Hationships Man Hationshi	PAC Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Addre 46 Sagewo City, State, Zig Brandon, Name of Empl GM Financ Occupation (F Dealer Re Source: Full Name Patsy R. Mailing Addre 128 Woodl City, State, Zig Mccomb, M Name of Empl	p Code MS 39042-2526 loyer (Required) lial Required) lationships Man Corporation Other (please spec Brumfield lass and Ridge Dr p Code IS 39648-6338 loyer (Required)	PAC Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Mailing Addre 46 Sagewo City, State, Zig Brandon, Name of Empl GM Financ Occupation (F Dealer Re Source: Full Name Patsy R. Mailing Addre 128 Woodl City, State, Zig Mccomb, M	p Code MS 39042-2526 Hoyer (Required) Hationships Man Corporation Other (please spec Brumfield Hationships Man Area of the process of the pro	PAC Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Sl	lakio				07/08/2023	\$30.00
Mailing Addre						
	kingham Dr					
City, State, Zi		1100				
	oga, TN 37421-1	1108				
Regal	noyer (ixequireu)					
Occupation (	Required)				Aggregate year-to-date	\$658.60
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name William H	Fluker				07/28/2023	\$100.00
Mailing Addre	ess					
	ington Dr					
City, State, Zi	ip Code MS 39272-4486					
	oloyer (Required)					
Not Emplo						
Occupation (					Aggregate year-to-date	\$225.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Rheta Joh	nnson				07/29/2023	\$50.00
Mailing Addre	ess Ly Road 259					
City, State, Zi	p Code					
	38852-8542					
Name of Emp	oloyer (Required) Dyed					
Occupation (					Aggregate year-to-date	\$1,296.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Graham Sl	lakie				07/29/2023	\$25.00
Mailing Addre	ess kingham Dr					
City, State, Zi	p Code					
Chattanoo	oga, TN 37421-1	1108				
Name of Emp	oga, TN 37421-1 ployer (Required)	1108				
Name of Emp	loyer (Required)	1108				
Name of Emp	loyer (Required)	1108			Aggregate year-to-date	\$658.60

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/29/2023	\$500.00
	Kirkpatrick					
Mailing Address 43282 War	r <b>ess</b> rwick Hills Ct					
City, State, Zi	ip Code					
Leesburg,	, VA 20176-3950	)				
Name of Emp VMware	oloyer (Required)					
Occupation (I	(Required)				Aggregate year-to-date	\$3,500.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/21/2023	\$25.00
Miguel Ce	entellas				07/21/2023	\$23.00
Mailing Addre						
704 Oak H						
City, State, Zi	MS 38655-5412					
	oloyer (Required)					
Universit	ty of Mississip	pi				
Occupation (I					Aggregate	\$225.00
Professor	r				year-to-date	
Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/02/2023	\$70.75
Staci Mor	rgan					4,101,10
Mailing Address 6946 Weir	ress r Panhandle Rd					
City, State, Zi						
Name of Emp	oloyer (Required)					
Occupation (I					Aggregate	
Meeting E					year-to-date	\$1,139.15
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
					07/12/2023	\$500.00
Full Name	Mason					
James H.						
James H.  Mailing Addre						
James H.  Mailing Addre 163 Lake  City, State, Zi	ess Trail Dr					
James H.  Mailing Addre 163 Lake  City, State, Zi Flora, MS	Trail Dr ip Code S 39071-9500					
James H.  Mailing Addre 163 Lake City, State, Zi Flora, MS Name of Emp	Trail Dr ip Code S 39071-9500 ployer (Required)					
James H.  Mailing Addre 163 Lake  City, State, Zi Flora, MS	Trail Dr lip Code S 39071-9500 loloyer (Required) oyed				Aggregate	\$1,500.00

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Graham Sl	akio				07/18/2023	\$25.00
Mailing Addre						
	kingham Dr					
City, State, Zi		1100				
	oga, TN 37421-1	1108				
Regal	noyer (Required)					
Occupation (	Required)				Aggregate year-to-date	\$658.60
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Wayne Dri	nkwater				07/28/2023	\$1,000.00
Mailing Addre						
City, State, Zi	•					
	MS 39215-1789					
-	<b>loyer(Required)</b> Arant Boult Cum	mmings				
Occupation (					Aggregate year-to-date	\$1,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp			Loan	(Mo., Day, Year)	receipt this period
Full Name Kelly Col	Leman				07/29/2023	\$100.00
Mailing Addre						
City, State, Zi						
-	MS 39047-7398					
Name of Emp	oloyer (Required) Dyed					
Occupation (	• •				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name John Merc	cier				07/29/2023	\$50.00
Mailing Addre						
City, State, Zi	<b>p Code</b> MS 38834-4808					
Name of Emp						
	noyer (ixequireu)					
OfficePro						
Occupation (Business	Required)				Aggregate year-to-date	\$550.00

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name	Other (please sp					period
	<i>l</i> esterlund				07/11/2023	\$25.00
Mailing Addre	ess					
1201 Cowo	len Dr					
City, State, Zi	•					
	38821-1306					
Name of Emp	loyer (Required) oyed					
Occupation (I					Aggregate year-to-date	\$225.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Ann Smith	1				07/13/2023	\$10.00
Mailing Addre						
City, State, Zi	p Code					
Gulfport,	MS 39502-1865	5				
Name of Emp	loyer (Required)					
Occupation (I					Aggregate year-to-date	\$290.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
Jource.	Other (please sp			Loan	(Mo., Day, Year)	receipt this period
Full Name Ronald Ur	1Z				07/07/2023	\$5.00
Mailing Addre						
City, State, Zi						
Steens, M	IS 39766-9129					
Name of Emp	laves (Described)					
Mississip	<b>loyer(Required)</b> opi State Unive	ersity				
Mississip Occupation (I	ppi State Unive Required)	ersity			Aggregate year-to-date	\$325.00
Occupation (I	ppi State Unive Required)	ersity	✓ Individual	Loan	year-to-date Date	Amount of each
Occupation (I	opi State Unive Required)	PAC	✓Individual	Loan	year-to-date	
Occupation (I	Required) Corporation Other (please sp	PAC	✓Individual	Loan	year-to-date Date	Amount of each receipt this
Occupation (I Scientist Source:  Full Name David Har Mailing Address	Required) Corporation Other (please sp	PAC	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Scientist Source:  Full Name David Har Mailing Address 2096 Sho	Corporation Other (please sporecrest Rd p Code	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Scientist Source:  Full Name David Har Mailing Addre 12096 Sho City, State, Zi Biloxi, M	Corporation Other (please spasse) Discourse of the control of the	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Scientist Source:  Full Name David Har Mailing Addres 12096 Shot City, State, Zi Biloxi, Mailing Addres 12096 Shot City, State, S	Corporation Corporation Other (please space of the process of the	PAC	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name	Other (please sp				, , , ,	period
Linda Fos	shee				07/29/2023	\$25.00
Mailing Addre	ess					
Not Emplo						
City, State, Zi	p Code					
Hattiesbu	ırg, MS 39402					
Name of Emp	loyer (Required) oyed					
Occupation (I	• •				Aggregate year-to-date	\$482.60
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
					(Mo., Day, Year)	receipt this
Full Name						period
Richard F	Raspet				07/24/2023	\$1,000.00
Mailing Addre						
PO Box 25						
City, State, Zi	p Code					
Oxford, M	IS 38655-4900					
Name of Emp	loyer (Required) oyed					
Occupation (I	Required)				Aggregate	\$4,000.00
Not Emplo					year-to-date	¥ 1 <b>,</b> 000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)		_	(Mo., Day, Year)	receipt this period
Full Name	22.1				07/24/2023	\$50.00
Robert Gr	.ay					
Mailing Addre						
1425 Jack	son St					
1425 Jack City, State, Zi	son St					
1425 Jack City, State, Zi Corinth,	son St <b>p Code</b> MS 38834-3423					
1425 Jack City, State, Zi Corinth,	p Code MS 38834-3423 loyer (Required)					
1425 Jack City, State, Zi Corinth, Name of Emp	p Code MS 38834-3423 loyer (Required) oyed Required)				Aggregate year-to-date	\$300.00
1425 Jack City, State, Zi Corinth, Name of Empl Occupation (I	p Code MS 38834-3423 loyer (Required) oyed Required)	PAC	✓Individual	Loan	year-to-date Date	Amount of each
1425 Jack City, State, Zi Corinth, Name of Emp Self Empl Occupation (I Architect	p Code MS 38834-3423 loyer (Required) oyed Required)	_	✓ Individual	Loan	year-to-date	
1425 Jack City, State, Zi Corinth, Name of Emp Self Empl Occupation (I Architect	p Code MS 38834-3423 loyer (Required) oyed Required)	_	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
1425 Jack City, State, Zi Corinth, Name of Emp Self Empl Occupation (I Architect Source:	p Code MS 38834-3423 loyer (Required) oyed Required) Corporation Other (please sp	_	✓Individual	Loan	year-to-date Date	Amount of each receipt this
1425 Jack City, State, Zi Corinth, Name of Emp Self Empl Occupation (I Architect Source:	p Code MS 38834-3423 loyer (Required) oyed Required) :  Corporation Other (please sp	_	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
1425 Jack City, State, Zi Corinth, Name of Emp Self Empl Occupation (I Architect Source:  Full Name Barry J. Mailing Addre PO Box 10 City, State, Zi	rson St  p Code  MS 38834-3423  loyer (Required)  oyed  Required)  Corporation  Other (please sp  Walker  pss  23	_	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
1425 Jack City, State, Zi Corinth, Name of Emp Self Empl Occupation (I Architect Source:  Full Name Barry J. Mailing Addre PO Box 10 City, State, Zi Tupelo, M	p Code MS 38834-3423 loyer (Required) oyed Required)  Corporation Other (please sp  Walker  PSS 123  p Code IS 38802-1023	_	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
1425 Jack City, State, Zi Corinth, Name of Emp Self Empl Occupation (I Architect Source:  Full Name Barry J. Mailing Addre PO Box 10 City, State, Zi Tupelo, M	rson St  p Code  MS 38834-3423  loyer (Required)  Loyed  Required)  Corporation  Other (please sp  Walker  PSS  123  p Code  IS 38802-1023  loyer (Required)	_	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
1425 Jack City, State, Zi Corinth, Name of Emp Self Empl Occupation (I Architect Source:  Full Name Barry J.  Mailing Addre PO Box 10 City, State, Zi Tupelo, M Name of Emp	rson St  p Code  MS 38834-3423  loyer (Required)  oyed  Required)  Corporation  Other (please sp  Walker  PSS  223  p Code  IS 38802-1023  loyer (Required)  oyed	_	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

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Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jane Alexander	07/18/2023	\$100.00
Mailing Address 2015 E Northside Dr		
City, State, Zip Code		
Jackson, MS 39211-6125		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Richard T. Gillespie	07/28/2023	\$200.00
Mailing Address		
6477 Kalipekona Way		
City, State, Zip Code Diamondhead, MS 39525-3812		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Will Smith	07/29/2023	\$740.00
Mailing Address 6621 Sugarcane Cir		
City, State, Zip Code		
Ocean Springs, MS 39564-8955		
Name of Employer (Required) US Air Force		
00 1111 10100		\$740.00
Occupation (Required) Cardiothoracic Surgeon	Aggregate year-to-date	Ŧ / 10 <b>.</b> 00
Occupation (Required)		Amount of each
Occupation (Required) Cardiothoracic Surgeon	year-to-date	·
Occupation (Required) Cardiothoracic Surgeon  Source: Corporation PAC Individual Loan Other (please specify)  Full Name	year-to-date Date	Amount of each receipt this
Occupation (Required) Cardiothoracic Surgeon  Source: Corporation PAC Individual Loan Other (please specify)	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (Required) Cardiothoracic Surgeon  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Marilyn Vandemark  Mailing Address 412 Highpoint Dr  City, State, Zip Code	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (Required) Cardiothoracic Surgeon  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Marilyn Vandemark  Mailing Address 412 Highpoint Dr  City, State, Zip Code Diamondhead, MS 39525-3719	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (Required) Cardiothoracic Surgeon  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Marilyn Vandemark  Mailing Address 412 Highpoint Dr  City, State, Zip Code	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

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Source:	☐ Corporation☐ Other (please spe	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Roz	ier				07/25/2023	\$250.00
Mailing Addre	ess and Hills Dr					
City, State, Zi	<b>p Code</b> IS 38655-8429					
	loyer (Required)					
Occupation (I	Required)				Aggregate year-to-date	\$500.00
Source:	Corporation Other (please spe	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Francis S	Springer				07/18/2023	\$250.00
Mailing Addre	ess					
City, State, Zi	<b>p Code</b> MS 39110-7044					
Name of Emp	loyer (Required) .oyed					
Occupation (I	Required)				Aggregate year-to-date	\$2,350.00
Source:	☐ Corporation☐ Other (please spe	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William I	). Egland				07/28/2023	\$500.00
Mailing Addre	ess					
City, State, Zi						
Name of Emp	loyer (Required)					
Occupation (I	Required)				Aggregate year-to-date	\$500.00
Source:	☐ Corporation☐ Other (please spe	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eugene Br	camlett Jr				07/21/2023	\$25.00
Mailing Addre	ess					
City, State, Zi						
Name of Emp	loyer (Required) ted Methodist					
Occupation (I					Aggregate year-to-date	\$500.00
					I I	

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Reporting Period _	7/1/2023	through	7/29/2023

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	LIF 13	
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name		
Margaret Cupples	07/24/2023	\$25.00
Mailing Address		
1703 Piedmont St		
City, State, Zip Code		
Jackson, MS 39202-1344		
Name of Employer (Required) Bradley		
	• • • • • • • • • • • • • • • • • • • •	
Occupation (Required) Attorney	Aggregate year-to-date	\$275.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Gloria Williamson	07/29/2023	\$250.00
Mailing Address		
521 Holland Ave		
City, State, Zip Code		
Philadelphia, MS 39350-2437		
Name of Employer (Required)		
Not Employed		
Occupation (Required)	Aggregate	¢2 F00 00
Not Employed	year-to-date	\$3,500.00
	Date	Amount of each
Source: Corporation PAC Individual Loan  Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name	07/12/2023	\$25.00
Elvin Sunds		1
Mailing Address 4000 W Tidewater Ln		
City, State, Zip Code		
Madison, MS 39110-8942		
Name of Employer (Degriped)		
Name of Employer (Required)		
St. Francis of Assisi Church		
St. Francis of Assisi Church	Aggregate	\$430.00
	Aggregate year-to-date	\$430.00
St. Francis of Assisi Church  Occupation (Required)		Amount of each
St. Francis of Assisi Church  Occupation (Required)  Clergy	year-to-date	
St. Francis of Assisi Church  Occupation (Required)  Clergy  Source: Corporation PAC Individual Loan  Other (please specify)  Full Name	year-to-date Date	Amount of each receipt this
St. Francis of Assisi Church  Occupation (Required)  Clergy  Source: Corporation PAC Individual Loan Other (please specify)  Full Name  Sumati Thomas	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
St. Francis of Assisi Church  Occupation (Required)  Clergy  Source: Corporation PAC Individual Loan  Other (please specify)  Full Name	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
St. Francis of Assisi Church  Occupation (Required) Clergy  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Sumati Thomas  Mailing Address 4146 Crestview Pl  City, State, Zip Code	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
St. Francis of Assisi Church  Occupation (Required)  Clergy  Source: Corporation PAC Individual Loan Other (please specify)  Full Name  Sumati Thomas  Mailing Address 4146 Crestview Pl	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
St. Francis of Assisi Church  Occupation (Required) Clergy  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Sumati Thomas  Mailing Address 4146 Crestview Pl  City, State, Zip Code	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
St. Francis of Assisi Church  Occupation (Required)  Clergy  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Sumati Thomas  Mailing Address 4146 Crestview Pl  City, State, Zip Code Jackson, MS 39211-6404	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
St. Francis of Assisi Church  Occupation (Required)  Clergy  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Sumati Thomas  Mailing Address 4146 Crestview Pl  City, State, Zip Code Jackson, MS 39211-6404  Name of Employer (Required)	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

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Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please sp	есіту)				period
Full Name Helen Boo	one				07/25/2023	\$100.00
Mailing Addre	ess					
3726 Crar						
City, State, Zi	p Code					
Jackson,	MS 39216-3605					
Name of Emp	oloyer (Required) Dyed					
Occupation (Not Emplo					Aggregate year-to-date	\$847.45
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Dennis Tr	cuax				07/08/2023	\$100.00
Mailing Addre	ess					
913 South						
City, State, Zi	p Code					
Starkvill	Le, MS 39759-94	134				
Name of Emp	oloyer (Required) Loyed					
Occupation (	Required)				Aggregate	\$1,196.00
Engineer					year-to-date	. ,
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Sibyl M.		ecify)			(Mo., Day, Year) 07/29/2023	-
Sibyl M.  Mailing Addre	Child	ecify)				period
Sibyl M.  Mailing Addre	Child  ess  purne Pl	ecify)				period
Sibyl M.  Mailing Addre 1935 E Bo  City, State, Zi	Child  ess  purne Pl  ip Code	ecify)				period
Sibyl M.  Mailing Addre 1935 E Bo  City, State, Zi Jackson,	Child  ess  purne Pl  ip Code  MS 39211-6714	ecify)				period
Sibyl M.  Mailing Addre 1935 E Bo  City, State, Zi Jackson,	Child  ess  purne Pl  ip Code	ecify)				period
Sibyl M.  Mailing Addre 1935 E Bo  City, State, Zi Jackson,  Name of Emp	Child  pess  purne Pl  p Code  MS 39211-6714  ployer (Required)	ecify)				period
Sibyl M.  Mailing Address 1935 E Bo City, State, Zi Jackson, Name of Emp Keifer's Occupation (	Child  pess  purne Pl  p Code  MS 39211-6714  ployer (Required)	ecify)	✓Individual	Loan	Aggregate year-to-date  Date	\$250.00 \$250.00 Amount of each
Sibyl M.  Mailing Address 1935 E Bo City, State, Zi Jackson, Name of Emp Keifer's Occupation (I Manager	Child ess purne Pl p Code MS 39211-6714 eloyer (Required)	PAC	✓ Individual	Loan	Aggregate year-to-date	\$250.00 \$250.00
Sibyl M.  Mailing Address 1935 E Bo City, State, Zi Jackson, Name of Emp Keifer's Occupation (I Manager	Child  ess  purne Pl  p Code  MS 39211-6714  cloyer (Required)  Required)  Corporation  Other (please sp	PAC	✓Individual	Loan	Aggregate year-to-date  Date	\$250.00 \$250.00 Amount of each receipt this
Sibyl M.  Mailing Address 1935 E Bo City, State, Zi Jackson, Name of Emp Keifer's Occupation (I Manager Source:  Full Name Roxann Ja	Child  pess purne Pl  pp Code  MS 39211-6714  ployer (Required)  Required)  Corporation  Other (please speackson	PAC	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$250.00 Amount of each receipt this period
Sibyl M.  Mailing Addre 1935 E Bo City, State, Zi Jackson, Name of Emp Keifer's Occupation (I Manager Source:	Child  pess purne Pl  pp Code  MS 39211-6714  ployer (Required)  Required)  Corporation  Other (please speackson  pess	PAC	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$250.00 Amount of each receipt this period
Sibyl M.  Mailing Addre 1935 E Bo City, State, Zi Jackson, Name of Emp Keifer's Occupation (I Manager Source:  Full Name Roxann Ja Mailing Addre 1713 Rese City, State, Zi	Child  ess  purne Pl  p Code  MS 39211-6714  loyer (Required)  Required)  Corporation  Other (please spectron person pers	PAC	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$250.00 Amount of each receipt this period
Sibyl M.  Mailing Addre 1935 E Bo City, State, Zi Jackson, Name of Emp Keifer's Occupation (I Manager Source:  Full Name Roxann Ja Mailing Addre 1713 Rese City, State, Zi Clinton,	Child  ess  purne Pl  p Code  MS 39211-6714  ployer (Required)  Required)  Corporation  Other (please species of the code of t	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$250.00 Amount of each receipt this period
Sibyl M.  Mailing Addre 1935 E Bo City, State, Zi Jackson, Name of Emp Keifer's Occupation (I Manager Source:  Full Name Roxann Ja Mailing Addre 1713 Rese City, State, Zi Clinton,	Child  ess  purne Pl  p Code  MS 39211-6714  ployer (Required)  Required)  Corporation  Other (please spiness)  exckson  ess  erve Dr  p Code  MS 39056-5667  ployer (Required)	PAC	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$250.00 Amount of each receipt this period
Sibyl M.  Mailing Addre 1935 E Bo City, State, Zi Jackson, Name of Emp Keifer's Occupation (I Manager  Source:  Full Name Roxann Ja Mailing Addre 1713 Rese City, State, Zi Clinton, Name of Emp Submittak Occupation (I	Child  ess  purne Pl  p Code  MS 39211-6714  loyer (Required)  Corporation  Other (please sp  ackson  ess  erve Dr  p Code  MS 39056-5667  loyer (Required)  ble	PAC	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$250.00 \$250.00 Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: ☐ Corporation ☐ PAC ✓ Individual ☐ Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Jean Fenwick	07/21/2023	\$75.00
Mailing Address 208 S Madison St		
City, State, Zip Code		
Kosciusko, MS 39090-3946		
Name of Employer (Required)		
Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,325.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Hugh Hanna	07/14/2023	\$100.00
Mailing Address		
335 Southern Cir		
City, State, Zip Code		
Gulfport, MS 39507-1536		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	07/24/2023	\$25.00
Mack Lowery		,
Mailing Address 5055 Myers Rd		
2022 WAGIR VO		
City State Zin Code		
City, State, Zip Code Terry, MS 39170-9429		
Terry, MS 39170-9429		
Terry, MS 39170-9429  Name of Employer (Required)	Aggregate year-to-date	\$350.00
Terry, MS 39170-9429  Name of Employer (Required)  Aamco Transmission  Occupation (Required)	year-to-date  Date	\$350.00
Terry, MS 39170-9429  Name of Employer (Required) Aamco Transmission  Occupation (Required) Business Owner	year-to-date	
Name of Employer (Required) Aamco Transmission  Occupation (Required) Business Owner  Source: Corporation PAC Individual Loan	year-to-date  Date	Amount of each receipt this
Terry, MS 39170-9429  Name of Employer (Required) Aamco Transmission  Occupation (Required) Business Owner  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Richard Rhoden  Mailing Address	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Terry, MS 39170-9429  Name of Employer (Required) Aamco Transmission  Occupation (Required) Business Owner  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Richard Rhoden  Mailing Address 778 Gillespie St  City, State, Zip Code	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Employer (Required) Aamco Transmission  Occupation (Required) Business Owner  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Richard Rhoden  Mailing Address 778 Gillespie St  City, State, Zip Code Jackson, MS 39202-1711	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Terry, MS 39170-9429  Name of Employer (Required) Aamco Transmission  Occupation (Required) Business Owner  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Richard Rhoden  Mailing Address 778 Gillespie St	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	a al				07/26/2023	\$100.00
James Ray	•					
•	nt Charles Ave					
City, State, Zi	p Code					
New Orlea	ans, LA 70115-4	4659				
Name of Emp	oloyer (Required) Dyed					
Occupation (I					Aggregate year-to-date	\$1,500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Shirley G	Grav				07/28/2023	\$25.00
Mailing Addre						
520 Colle	ege Hill Rd					
City, State, Zi						
	1S 38655-2000					
Not Emplo	oloyer (Required) Dyed					
Occupation (I					Aggregate year-to-date	\$699.85
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Lawrence	B. Jones				07/28/2023	\$2,500.00
					<del></del>	
Mailing Addre						
701 Poydr	as St					
701 Poydr City, State, Zi	as St	7773				
701 Poydr City, State, Zi New Orlea Name of Emp	p Code ans, LA 70139-7	7773				
701 Poydr City, State, Zi New Orlea	p Code ans, LA 70139-7	7773				
701 Poydr City, State, Zi New Orlea Name of Emp	ras St p Code ans, LA 70139-7 loyer (Required) oyed	7773			Aggregate year-to-date	\$9,500.00
701 Poydr City, State, Zi New Orlea Name of Empl Self Empl	p Code ans, LA 70139-7 cloyer (Required) coyed Required)	□PAC	✓Individual	Loan	year-to-date Date	Amount of each
701 Poydr City, State, Zi New Orlea Name of Emp Self Empl Occupation (I Attorney	ras St p Code ans, LA 70139-7 loyer (Required) Loyed Required)	□PAC	✓Individual	Loan	year-to-date	
701 Poydr City, State, Zi New Orlea Name of Emp Self Empl Occupation (I Attorney	p Code ans, LA 70139-7 loyer (Required) oyed Required)  Corporation Other (please sp	□PAC	✓Individual	Loan	year-to-date Date	Amount of each receipt this
701 Poydr City, State, Zi New Orlea Name of Emp Self Empl Occupation (I Attorney Source: Full Name Talbot Br Mailing Addre	p Code ans, LA 70139-7 cloyer (Required) coyed Required)  Corporation  Other (please sp	□PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
701 Poydr City, State, Zi New Orlea Name of Emp Self Empl Occupation (I Attorney Source: Full Name Talbot Br Mailing Addre	ras St p Code ans, LA 70139-7 loyer (Required) oyed  Required)  Corporation Other (please sp	□PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
701 Poydr City, State, Zi New Orlea Name of Emp Self Empl Occupation (I Attorney Source: Full Name Talbot Br Mailing Addre 1714 Bell City, State, Zi	ras St p Code ans, LA 70139-7 loyer (Required) oyed  Required)  Corporation Other (please sp	PAC pecify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
701 Poydr City, State, Zi New Orlea Name of Emp Self Empl Occupation (I Attorney Source: Full Name Talbot Br Mailing Addre 1714 Bell City, State, Zi Cleveland Name of Emp	cas St p Code ans, LA 70139-7 loyer (Required) Loyed  Required)  Corporation  Other (please sp cooks ess Lavista Rd p Code d, MS 38732-293 loyer (Required)	PAC pecify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
701 Poydr City, State, Zi New Orlea Name of Emp Self Empl Occupation (I Attorney Source: Full Name Talbot Br Mailing Addre 1714 Bell City, State, Zi Cleveland Name of Emp	ras St p Code ans, LA 70139-7 loyer (Required) Loyed  Required)  Corporation  Other (please sp rooks ess Lavista Rd p Code d, MS 38732-293	PAC pecify)	√Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
701 Poydr City, State, Zi New Orlea Name of Emp Self Empl Occupation (I Attorney Source: Full Name Talbot Br Mailing Addre 1714 Bell City, State, Zi Cleveland Name of Emp	ras St p Code ans, LA 70139-7 loyer (Required) oyed  Required)  Corporation Other (please sp rooks ess avista Rd p Code d, MS 38732-293 loyer (Required) ate University  Required)	PAC pecify)	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
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Source:	Corporation Other (please spe	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Emilee C.	Young				07/21/2023	\$250.00
Mailing Addre	ss					
City, State, Zip	Code					
	38625-9604					
	<b>oyer (Required)</b> unty Hospital					
Occupation (F Nurse Pra					Aggregate year-to-date	\$11,250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please spe	cify)			(Mo., Day, Year)	period
Full Name Ethel Tru	ly				07/02/2023	\$50.00
Mailing Addre						
City, State, Zip	Code					
Natchez,	MS 39120-3539					
Name of Emplo	<b>oyer (Required)</b> yed					
Occupation (R	dequired)				Aggregate year-to-date	\$450.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please spe	cify)			(Mo., Day, Year)	receipt this period
Full Name Ralph Wei	mer				07/12/2023	\$100.00
Mailing Addre						
City, State, Zip	Code					
Meridian,	MS 39307-4140					
Name of Emplo	<b>oyer (Required)</b> yed					
Occupation (F					Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓Individual	Loan	Date (Ma. Day Yaar)	Amount of each receipt this
	Other (please spe	cify)			(Mo., Day, Year)	period
<b>Full Name</b> Jonathan	Reiss				07/16/2023	\$500.00
Mailing Addre						
City, State, Zip						
	NY 10024-5306					
	oyer (Required)					
Analytica ————————————————————————————————————	l Synthesis					
Occupation (F					Aggregate year-to-date	\$500.00

Name of Candidate or	Committee	Brandon	Presley

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 Reporting Period
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Source:	Corporation Other (please spe	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
<b>Full Name</b> Robert Ga	T7				07/16/2023	\$250.00
Mailing Addre						
•	ty Road 382					
City, State, Zi <sub>l</sub>						
	mit, MO 65043-	1000				
Name of Empl	oyer (Required) oyed					
Occupation (F Attorney	Required)				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	cify)			(Mo., Day, Year)	receipt this period
Full Name Cornelis	Gispen				07/26/2023	\$100.00
Mailing Addre	ss					
1112 S 11	th St					
City, State, Zi						
	S 38655-4610					
Name of Emplo	<b>oyer (Required)</b> yed					
Occupation (F Retired	Required)				Aggregate year-to-date	\$1,275.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	cify)			(Mo., Day, Year)	receipt this period
Full Name Marilyn V	andemark				07/27/2023	\$100.00
Mailing Addre						
412 Highp						
City, State, Zi						
Diamondhe	ad, MS 39525-3	719				
Name of Emp	ad, MS 39525-3' oyer (Required)	719				
Name of Emplo	ad, MS 39525-3 oyer (Required) yed	719				
Name of Emp	ad, MS 39525-3' oyer (Required) yed Required)	719			Aggregate year-to-date	\$700.00
Name of Emplo	ad, MS 39525-3' oyer (Required) yed Required)	719 	✓Individual	Loan	year-to-date Date	Amount of each
Name of Emplo Not Emplo Occupation (F	ad, MS 39525-3 oyer (Required) yed Required) yed	PAC	✓Individual	Loan	year-to-date	
Name of Emplo Not Emplo Occupation (F	ad, MS 39525-3  oyer (Required)  yed  Required)  yed  Corporation  Other (please spe	PAC	✓Individual	Loan	year-to-date Date	Amount of each receipt this
Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Cherri Li Mailing Addre	ad, MS 39525-3' oyer (Required) yed Required) yed Corporation Other (please spe	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Cherri Li	ad, MS 39525-3  oyer (Required)  yed  Required)  yed  Corporation  Other (please specified)  ghtsey  ss  ford Rd	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Cherri Li Mailing Addre 3701 Craw City, State, Zi	ad, MS 39525-3  oyer (Required)  yed  Required)  yed  Corporation  Other (please specified)  ghtsey  ss  ford Rd	PAC ecify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Cherri Li Mailing Addre 3701 Craw City, State, Zi Crawford, Name of Emplo	ad, MS 39525-3  oyer (Required)  yed  Required)  yed  Corporation  Other (please spe  ghtsey  ss  ford Rd  Cocode  MS 39743-9629  oyer (Required)	PAC ecify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Cherri Li Mailing Addre 3701 Craw City, State, Zi Crawford,	ad, MS 39525-3  oyer (Required)  yed  Required)  yed  Corporation  Other (please spe  ghtsey  ss  ford Rd  Cocode  MS 39743-9629  oyer (Required)	PAC ecify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Cherri Li Mailing Addre 3701 Craw City, State, Zi Crawford, Name of Emplo	ad, MS 39525-3' oyer (Required) yed Required) yed Corporation Other (please spe ghtsey ss ford Rd Code MS 39743-9629 oyer (Required) yed Required)	PAC ecify)	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committe	<b>e</b> Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name	Other (please sp					period
Brenda Pl	lunkett				07/09/2023	\$77.25
Mailing Addre						
138 N Ric						
City, State, Zi Saltillo,	<b>p Code</b> MS 38866-576	3				
Name of Emp	lloyer (Required) oyed					
Occupation (I	Required)				Aggregate year-to-date	\$1,628.45
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Peter But	tross Jr				07/29/2023	\$250.00
Mailing Addre						
206 S Rar						
City, State, Zi	p Code					
	MS 39120-3536					
Name of Emp	oloyer (Required) Oyed					
Occupation (I	Required)				Aggregate year-to-date	\$575.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Emily Fox	Σ				07/29/2023	\$500.00
Mailing Addre	ess					
215 N Rar						
City, State, Zi	MS 39120-3339					
Name of Emp	loyer (Required)					
					Aggregate	
Occupation (I	Kequirea)				year-to-date	\$625.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each receipt this
	Other (please sp	pecify)			(Mo., Day, Year)	period
Full Name						
Vangela W	lade				07/11/2023	\$2,500.00
Mailing Addre	ess				07/11/2023	\$2,500.00
Mailing Addre	ess rooke Dr				07/11/2023	\$2,500.00
Mailing Addre	ess rooke Dr				07/11/2023	\$2,500.00
Mailing Address 401 Pembra City, State, Zi Madison, Name of Emp	p Code MS 39110-8638				07/11/2023	\$2,500.00
Mailing Address 401 Pembra City, State, Zi Madison, Name of Emp	p Code MS 39110-8638	Justice			07/11/2023	\$2,500.00
Mailing Address 401 Pembra City, State, Zi Madison, Name of Emp	p Code MS 39110-8638  Nover (Required)  Ppi Center for  Required)	Justice			Aggregate year-to-date	\$2,500.00

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Source:	Corporation Other (please spe		dividual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rick Smea	ad				07/12/2023	\$250.00
Mailing Addre						
J	rthmore St					
City, State, Zi	p Code					
Houston,	TX 77005-3612					
Name of Emp	loyer (Required)					
Occupation (I	• •				Aggregate year-to-date	\$250.00
Source:	Corporation	☐PAC ✓In	dividual	Loan	Date	Amount of each receipt this
	Other (please spe	cify)			(Mo., Day, Year)	period
Full Name James C.	Johnson				07/12/2023	\$100.00
Mailing Addre						
City, State, Zi	p Code					
Sacrament	to, CA 95813-30	50				
Name of Emp Not Emplo	oloyer (Required) oyed					
Occupation (I					Aggregate year-to-date	\$300.00
Source:	Corporation	☐PAC ✓In	dividual	Loan	Date	Amount of each
	Other (please spe	cify)			(Mo., Day, Year)	receipt this period
						Poor
Full Name Linda Fos					07/05/2023	\$15.00
Linda Fos	shee				07/05/2023	
Linda Fos  Mailing Addre  Not Emplo	shee ess oyed				07/05/2023	
Linda Fos Mailing Addre Not Emplo City, State, Zi	shee ess oyed				07/05/2023	
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu	shee  ess  pyed  p Code				07/05/2023	
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu	shee ess eyed p Code arg, MS 39402 eloyer (Required)				07/05/2023	
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emp	shee  pyed  p Code  arg, MS 39402  ployer (Required)  pyed  Required)				Aggregate year-to-date	
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I	shee  pyed  p Code  arg, MS 39402  ployer (Required)  pyed  Required)	✓PAC □In	dividual	Loan	Aggregate year-to-date	\$15.00 \$482.60 <b>Amount of each</b>
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I Not Emplo	shee ess eyed p Code erg, MS 39402 eloyer (Required) eyed Required) eyed		dividual	Loan	Aggregate year-to-date	\$15.00 \$482.60
Linda Fos  Mailing Addre Not Emplo  City, State, Zi Hattiesbu Name of Emp Not Emplo  Occupation (I Not Emplo  Source:	shee  pss  pyed  p Code  arg, MS 39402  ployer (Required)  pyed  Corporation	ecify)		Loan	Aggregate year-to-date	\$15.00 \$482.60 Amount of each receipt this
Linda Fos  Mailing Addre  Not Emplo  City, State, Zi  Hattiesbu  Name of Emp  Not Emplo  Occupation (I  Not Emplo  Source:  Full Name  Prentiss  Mailing Addre	shee  pss  pyed  p Code  arg, MS 39402  ployer (Required)  pyed  Corporation  Other (please spe  County Democrationss	ecify)		Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$15.00 \$482.60  Amount of each receipt this period
Linda Fos Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Prentiss Mailing Addre	shee  pss  pyed  p Code  arg, MS 39402  ployer (Required)  pyed  Corporation  Other (please spe  County Democrations  pss  on Requested	ecify)		Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$15.00 \$482.60  Amount of each receipt this period
Linda Fos  Mailing Addre Not Emplo  City, State, Zi Hattiesbu Name of Emp Not Emplo  Occupation (I Not Emplo  Source:  Full Name Prentiss  Mailing Addre Informati  City, State, Zi	shee  pss  pyed  p Code  arg, MS 39402  ployer (Required)  pyed  Corporation  Other (please spe  County Democrates  con Requested  p Code	ecify)		Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$15.00 \$482.60  Amount of each receipt this period
Linda Fos  Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Prentiss  Mailing Addre Informati City, State, Zi Boonevill	shee  pss  pyed  p Code  arg, MS 39402  ployer (Required)  pyed  Corporation  Other (please spe  County Democrations  pss  on Requested	ecify)		Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$15.00 \$482.60  Amount of each receipt this period
Linda Fos  Mailing Addre Not Emplo City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Prentiss  Mailing Addre Informati City, State, Zi Boonevill	shee  prode	ecify)		Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$15.00 \$482.60  Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

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Source:	Corporation Other (please spe	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dena E. W	iggins				07/16/2023	\$250.00
Mailing Addre	ess				1	
	Dominion Dr					
City, State, Zip Arlington	<b>p Code</b> ., VA 22207-283	13				
Name of Emp	loyer (Required)					
Occupation (F	Required)				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe		<u>v</u> a.v.aaa.		(Mo., Day, Year)	receipt this period
Full Name Sarah Jon	es				07/07/2023	\$50.00
Mailing Addre						
City, State, Zi		0404			_	
	loyer (Required)	9404			-	
US Navy						
Occupation (F	<b>Required)</b> n Data Analyst	:			Aggregate year-to-date	\$300.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	ecify)			(Mo., Day, Year)	receipt this period
Full Name Suzanne B	aer				07/17/2023	\$500.00
Mailing Addre						
City, State, Zip	p Code IS 39532-3319					
	loyer (Required)					
Occupation (F	• '				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please spe	ecify)			(Mo., Day, Year)	period
Full Name Lana Rich	ardson				07/18/2023	\$30.00
Mailing Addre	nty Road 500					
City, State, Zi	-				1	
Name of Emp	loyer (Required)				1	
Not Emplo	yed					
Occupation (F	Required)				Aggregate year-to-date	\$355.00

Name of Candidate or Committee Br	randon Presley
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 Reporting Period
 7/1/2023
 through
 7/29/2023

Source:	Corporation Other (please spe	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	Gowan Le Goff				07/28/2023	\$50.00
Mailing Addre						
1629 Acad						
City, State, Zi	p Code					
Jackson,	MS 39211-5644					
Name of Emp	loyer (Required) Loyed					
Occupation (	Required)				Aggregate year-to-date	\$271.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	ecify)			(Mo., Day, Year)	receipt this period
Full Name Larry O.	Vaughn				07/20/2023	\$50.00
Mailing Addre						
259 Odom						
City, State, Zi						
	1S 39766-9687					
Name of Emp	oloyer (Required) Dyed					
Occupation (Not Emplo					Aggregate year-to-date	\$275.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	ecify)			(Mo., Day, Year)	receipt this period
Full Name James M.	Priest				07/03/2023	\$250.00
Mailing Addre						
1316 Popl						
City, State, Zi	p Code					
City, State, Zi	<b>p Code</b> MS 39202-2111					
City, State, Zi	p Code	PLLC				
City, State, Zi Jackson, Name of Emp Gill, Lac Occupation (	p Code MS 39202-2111 loyer (Required) dner & Priest,	PLLC			Aggregate	\$2,000.00
City, State, Zi Jackson, Name of Emp Gill, Lac Occupation (I Attorney	p Code MS 39202-2111  loyer (Required) dner & Priest, Required)				year-to-date	
City, State, Zi Jackson, Name of Emp Gill, Lac Occupation (	MS 39202-2111  loyer (Required) dner & Priest,  Required)  Corporation	PAC	✓Individual	Loan		Amount of each receipt this
City, State, Zi Jackson, Name of Emp Gill, Lac Occupation (I Attorney Source:	p Code MS 39202-2111  loyer (Required) dner & Priest, Required)	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Jackson, Name of Emp Gill, Lac Occupation (I Attorney	p Code MS 39202-2111 loyer (Required) dner & Priest, Required)  Corporation Other (please specific process)	PAC	✓Individual	Loan	year-to-date Date	Amount of each receipt this
City, State, Zi Jackson, Name of Emp Gill, Lac Occupation (I Attorney Source: Full Name Kathryn I Mailing Addre	p Code MS 39202-2111  lloyer (Required) dner & Priest,  Required)  Corporation Other (please species)	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Jackson, Name of Emp Gill, Lac Occupation (I Attorney Source:  Full Name Kathryn I Mailing Addre 777 Shady	p Code MS 39202-2111  loyer (Required) dner & Priest,  Required)  Corporation Other (please spo	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zidackson, Name of Emp Gill, Lac Occupation (I Attorney Source:  Full Name Kathryn I Mailing Addre 777 Shady City, State, Zid	p Code MS 39202-2111  loyer (Required) dner & Priest,  Required)  Corporation Other (please spo	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Jackson, Name of Emp Gill, Lac Occupation (I Attorney Source:  Full Name Kathryn I Mailing Addre 777 Shady City, State, Zi Oxford, M Name of Emp	p Code MS 39202-2111 loyer (Required) dner & Priest, Required)  Corporation Other (please specials as a Oaks Cir p Code 4S 38655-5450 cloyer (Required)	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Jackson, Name of Emp Gill, Lac Occupation (I Attorney Source:  Full Name Kathryn I Mailing Addre 777 Shady City, State, Zi Oxford, M	p Code MS 39202-2111 loyer (Required) dner & Priest, Required)  Corporation Other (please specials as a Oaks Cir p Code 4S 38655-5450 cloyer (Required)	PAC	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Jackson, Name of Emp Gill, Lac Occupation (I Attorney Source:  Full Name Kathryn I Mailing Addre 777 Shady City, State, Zi Oxford, M Name of Emp	p Code MS 39202-2111  loyer (Required) diner & Priest,  Required)  Corporation Other (please specials  Poavis Poavis Poavis Poaks Cir P Code MS 38655-5450  loyer (Required)  Dyed	PAC	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please spe	есіту)				period
Full Name Lori Karr	ıy				07/14/2023	\$18.00
Mailing Addre						
-	shire Blvd					
City, State, Zi	-					
	es, CA 90048-5	126				
Name of Emp	loyer (Required) oyed					
Occupation (I	<b>Required)</b> Social Worker				Aggregate year-to-date	\$270.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/25/2023	\$25.00
James Ray						
Mailing Address 3915 Sain	ess at Charles Ave					
City, State, Zi	p Code					
New Orlea	ns, LA 70115-4	659				
Name of Emp	loyer (Required) oyed					
Occupation (I	Required)				Aggregate	\$1,500.00
Not Emplo	yed				year-to-date	
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
						receipt this
	Other (please spe	ecify)			(Mo., Day, Year)	receipt this period
Full Name		ecify)			(Mo., Day, Year) 07/08/2023	
Perry Hoo	od	ecify)				period
Perry Hoo  Mailing Addre	od ess	ecify)				period
Perry Hoo Mailing Addre 402 Lake	od Dess Hazle Dr	ecify)				period
Mailing Address 402 Lake City, State, Zi	od Dess Hazle Dr					period
Perry Hoo Mailing Addre 402 Lake City, State, Zi Hazlehurs Name of Emp	ess Hazle Dr p Code st, MS 39083-22 loyer (Required)					period
Mailing Addre 402 Lake City, State, Zi Hazlehurs Name of Empl	ess Hazle Dr p Code st, MS 39083-22 loyer (Required)				07/08/2023	\$1,000.00
Perry Hoo Mailing Addre 402 Lake City, State, Zi Hazlehurs Name of Emp	ess Hazle Dr p Code st, MS 39083-22 loyer (Required) oyed					period
Mailing Address 402 Lake City, State, Zi Hazlehurs Name of Emp Self Empl Occupation (I	ess Hazle Dr p Code st, MS 39083-22 loyer (Required) oyed		✓Individual	Loan	Aggregate year-to-date  Date	\$1,000.00 \$4,960.00 Amount of each
Mailing Addre 402 Lake City, State, Zi Hazlehurs Name of Emp Self Empl Occupation (I Restauran	pod  pess  Hazle Dr  p Code  st, MS 39083-22  loyer (Required)  oyed  Required)  at Owner	10 PAC	✓Individual	Loan	Aggregate year-to-date	\$1,000.00 \$4,960.00
Mailing Addre 402 Lake City, State, Zi Hazlehurs Name of Emp Self Empl Occupation (I Restauran	pod  pess  Hazle Dr  p Code  st, MS 39083-22  loyer (Required)  Loyed  Required)  at Owner  Corporation  Other (please specification)	10 PAC	✓Individual	Loan	Aggregate year-to-date  Date	\$1,000.00 \$4,960.00 Amount of each receipt this
Mailing Addre 402 Lake City, State, Zi Hazlehurs Name of Emp Self Empl Occupation (I Restauran Source: Full Name	ess Hazle Dr p Code st, MS 39083-22 loyer (Required) oyed Required) at Owner  Corporation Other (please spec	10 PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00 \$4,960.00  Amount of each receipt this period
Mailing Addre 402 Lake City, State, Zi Hazlehurs Name of Emp Self Empl Occupation (I Restauran Source:	ess Hazle Dr p Code st, MS 39083-22 loyer (Required) oyed Required) at Owner  Corporation Other (please spectrum)	10 PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00 \$4,960.00  Amount of each receipt this period
Mailing Address 402 Lake City, State, Zi Hazlehurs Name of Emp Self Empl Occupation (I Restauran Source: Full Name William C Mailing Address 518 N 11t City, State, Zi	pod  pod  poss  Hazle Dr  p Code  post, MS 39083-22  loyer (Required)  poyed  Required  Corporation  Other (please species sees sees sees sees sees sees sees	10 PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00 \$4,960.00  Amount of each receipt this period
Mailing Address 402 Lake City, State, Zi Hazlehurs Name of Emp Self Empl Occupation (I Restauran Source: Full Name William C Mailing Addres 518 N 11t City, State, Zi Oxford, M	pod  pod  poss  Hazle Dr  p Code  pt, MS 39083-22  ployer (Required)  poyed  Required)  pt Owner  Corporation  Other (please specific spec	10 PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00 \$4,960.00  Amount of each receipt this period
Mailing Address 402 Lake City, State, Zi Hazlehurs Name of Emp Self Empl Occupation (I Restauran Source: Full Name William C Mailing Addres 518 N 11t City, State, Zi Oxford, M	pod pass Hazle Dr p Code pst, MS 39083-22 loyer (Required) poyed Required pt Owner Corporation Other (please specials p Code ds 38655-3108 loyer (Required)	10 PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00 \$4,960.00  Amount of each receipt this period
Mailing Address 402 Lake City, State, Zi Hazlehurs Name of Emp Self Empl Occupation (I Restauran Source: Full Name William C Mailing Addres 518 N 11t City, State, Zi Oxford, M	Pode Pode Pode Pode Pode Pode Pode Pode	10 PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,000.00 \$4,960.00  Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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 Reporting Period
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 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name	Other (please sp					period
Sam Pace					07/05/2023	\$1,000.00
Mailing Addre	ess					
2013 N Pa						
City, State, Zi	•					
	IS 38804-9723					
	loyer(Required) Health Specia	alists				
Occupation (F					Aggregate year-to-date	\$1,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/28/2023	\$1,000.00
R. L. Lyl						
Mailing Addre						
City, State, Zi						
	is 39117-0560					
	loyer (Required) odlands Group	LLC				
Occupation (Required) Director					Aggregate year-to-date	\$3,500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
		□	<u>•</u>			receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Charles P		ecify)			(MO., Day, Year) 07/29/2023	-
	Parrott	ecify)				period
Charles P	Parrott	ecify)				period
Charles P  Mailing Addre 9 Nabbey  City, State, Zi	Parrott Pss Nord Pl p Code	ecify)				period
Charles P Mailing Addre 9 Nabbey City, State, Zig Jackson,	Parrott  Pss  Nord Pl  p Code  MS 39216	ecify)				period
Charles P Mailing Addre 9 Nabbey City, State, Zi Jackson, Name of Emp	Parrott Pss Nord Pl p Code	ecify)				period
Charles P Mailing Addre 9 Nabbey City, State, Zi Jackson, Name of Emp	Parrott Pass Nord Pl P Code MS 39216  loyer (Required) Reese LLP	ecify)				period
Charles F Mailing Addre 9 Nabbey City, State, Zi Jackson, Name of Emp Adams and Occupation (F	Parrott Pass Nord Pl P Code MS 39216  loyer (Required) Reese LLP	PAC	✓ Individual	Loan	07/29/2023 Aggregate	\$50.00 \$600.00 Amount of each
Charles P Mailing Addre 9 Nabbey City, State, Zi Jackson, Name of Emp Adams and Occupation (F Attorney	Parrott  Pass Nord Pl  p Code  MS 39216  loyer (Required) Reese LLP  Required)	□PAC	✓Individual	Loan	Aggregate year-to-date	\$50.00 \$600.00
Charles P Mailing Addre 9 Nabbey City, State, Zig Jackson, Name of Emp Adams and Occupation (F Attorney Source:	Parrott  Pass Nord Pl  p Code  MS 39216  loyer (Required)  Required)  Corporation	□PAC	✓Individual	Loan	Aggregate year-to-date  Date	\$50.00 \$600.00  Amount of each receipt this
Charles P Mailing Addre 9 Nabbey City, State, Zig Jackson, Name of Emp Adams and Occupation (F Attorney Source: Full Name Leslie-Bu Mailing Addre	Parrott  Pass Nord Pl  p Code  MS 39216  loyer (Required)  Required)  Corporation  Other (please sp	□PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$600.00  Amount of each receipt this period
Charles P Mailing Addre 9 Nabbey City, State, Zig Jackson, Name of Emp Adams and Occupation (F Attorney Source: Full Name Leslie-Bu Mailing Addre 7900 Mich	Parrott  Pass Nord Pl  p Code  MS 39216  loyer (Required)  Required)  Corporation  Other (please sp  arl McLemore  Pass  aeel Dr	□PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$600.00  Amount of each receipt this period
Charles P Mailing Addre 9 Nabbey City, State, Zig Jackson, Name of Emp Adams and Occupation (F Attorney Source: Full Name Leslie-Bu Mailing Addre 7900 Mich City, State, Zig	Parrott  Pass Nord Pl  p Code  MS 39216  loyer (Required)  Required)  Corporation  Other (please sp  arl McLemore  Pass  aeel Dr	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$600.00  Amount of each receipt this period
Charles P Mailing Addre 9 Nabbey City, State, Zij Jackson, Name of Emp Adams and Occupation (F Attorney Source: Full Name Leslie-Bu Mailing Addre 7900 Mich City, State, Zij Lake Corm Name of Emp	Parrott  Pass Nord Pl  p Code  MS 39216  loyer (Required)  Required)  Corporation  Other (please sp  arl McLemore  Pass  aael Dr  p Code  norant, MS 3864  loyer (Required)	PAC	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$600.00  Amount of each receipt this period
Charles P Mailing Addre 9 Nabbey City, State, Zij Jackson, Name of Emp Adams and Occupation (F Attorney Source: Full Name Leslie-Bu Mailing Addre 7900 Mich City, State, Zi Lake Corm	Parrott  Pass Nord Pl  p Code  MS 39216  loyer (Required)  Required)  Corporation  Other (please sp  arl McLemore  Pass  aael Dr  p Code  norant, MS 3864  loyer (Required)	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$600.00  Amount of each receipt this period
Charles P Mailing Addre 9 Nabbey City, State, Zij Jackson, Name of Emp Adams and Occupation (F Attorney Source: Full Name Leslie-Bu Mailing Addre 7900 Mich City, State, Zij Lake Corm Name of Emp	Parrott  Pass Nord Pl  p Code  MS 39216  loyer (Required)  Required)  Corporation  Other (please sp  and Dr  p Code  morant, MS 3864  loyer (Required)  byed	PAC	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$600.00  Amount of each receipt this period

Name of Candidate or Committee Br	randon Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please spe	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	+ b b o			07/05/2023	\$2,000.00
Robert Ro					
Mailing Address 3 Harvest					
City, State, Zi					
	or Town, NJ 082	34-9660			
Name of Emp	loyer (Required)				
Occupation (F	Required)			Aggregate year-to-date	\$2,000.00
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
	Other (please sp	ecify)		(Mo., Day, Year)	receipt this period
Full Name Gail Hest	er			07/25/2023	\$25.00
Mailing Addre	ess				
470 Fairw					
City, State, Zi					
New Orlea	ans, LA 70124-1	.023			
Name of Emplo	loyer (Required) oyed				
Occupation (F				Aggregate year-to-date	\$550.00
Source:	Corporation	PAC Individual	Loan	Date	Amount of each
Source.	Other (please sp		Loan	(Mo., Day, Year)	receipt this period
Full Name				07/26/2023	\$100.00
Graham Sl	akie				,
Mailing Addre					
	ingham Dr				
City, State, Zip Chattanoo	<b>p Code</b> oga, TN 37421-1	.108			
	loyer (Required)				
Regal					
Occupation (F	Required)			Aggregate year-to-date	\$658.60
Source:					
	Corporation	PAC Individual	Loan	Date	Amount of each receipt this
	☐ Corporation☐ Other (please sp		Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles B	Other (please sp		Loan		receipt this
	Other (please spo		Loan	(Mo., Day, Year)	receipt this period
Charles B	Other (please spo		Loan	(Mo., Day, Year)	receipt this period
Charles B Mailing Addre 155 Bryan City, State, Zi	Other (please spo	ecify)	Loan	(Mo., Day, Year)	receipt this period
Charles B Mailing Addre 155 Bryan City, State, Zip Palo Alto	Other (please sponsor) Buchanan  ess  at St  p Code  o, CA 94301-110	ecify)	Loan	(Mo., Day, Year)	receipt this period
Charles B Mailing Addre 155 Bryan City, State, Zip Palo Alto	Other (please sponsor) Buchanan  Sess at St p Code D, CA 94301-110  loyer (Required)	ecify)	Loan	(Mo., Day, Year)	receipt this period
Charles B Mailing Addre 155 Bryan City, State, Zi Palo Alto Name of Emp	Other (please sponsor) Buchanan  Pass Int St P Code D, CA 94301-110  Required)  Required)	ecify)	Loan	(Mo., Day, Year)	receipt this period

Name of Candidate or Committee	Brandon	Presley
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 Reporting Period
 7/1/2023
 through
 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Guy Mitch					07/29/2023	\$100.00
Mailing Addre						
8170 DEBE						
City, State, Zi	•					
Tupelo, N						
Not Emplo	oloyer (Required) Dyed					
Occupation (Not Emplo					Aggregate year-to-date	\$1,600.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Guy Mitch	nell				07/24/2023	\$500.00
Mailing Address 8170 DEBE						
City, State, Zi						
Tupelo, N						
Name of Emp	oloyer (Required) Dyed					
Occupation (Required) Not Employed					Aggregate year-to-date	\$1,600.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Margaret	Thomas				07/25/2023	\$20.00
Mailing Addre						
153 Timbe						
City, State, Zi	p Code arg, MS 39401-8	3209				
	loyer (Required)					
Not Emplo	yed					
Occupation (Not Emplo					Aggregate year-to-date	\$417.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Stephen E	3. Richer				07/28/2023	\$250.00
Mailing Addre						
City, State, Zi	p Code	1				
	MS 39507-4541	L				
Richer Ac	loyer (Required) dvisors					
	-					
Consultar	Required)				Aggregate year-to-date	\$725.00

Name of Candidate or Committee	Brandon	Presley
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 Reporting Period
 7/1/2023
 through
 7/29/2023

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Source:	Corporation Other (please spe	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Matthew M	McCaffree				07/13/2023	\$250.00
Mailing Addre						
City, State, Zi						
	loyer (Required)					
Occupation (I					Aggregate year-to-date	\$250.00
Source:	Corporation Other (please spe	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alma Wall	.S				07/25/2023	\$250.00
Mailing Address 3887 Kent						
	n, MS 38672-722	5				
Name of Emp	loyer (Required) oyed					
Occupation (I	Required)				Aggregate year-to-date	\$1,175.00
Source:	Corporation Other (please spe	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David E.	Fairbank				07/28/2023	\$1,000.00
Mailing Addre						
City, State, Zi	<b>p Code</b> ch, MS 39560-33	45				
Name of Emp	loyer (Required)					
Occupation (I	Required)				Aggregate year-to-date	\$1,000.00
Source:	Corporation  Other (please spe	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/10/2023	\$15.00
Mailing Addre					-	
City, State, Zi	p Code				1	
	loyer (Required)				1	
Occupation (I					Aggregate year-to-date	\$675.00
Not Emplo	yyeu				•	

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name					07/23/2023	period
Eleanor H	Haimsohn				07/23/2023	\$25.00
Mailing Addre						
City, State, Zi	4					
-	MS 38632-914	9				
Name of Emp	lloyer (Required)					
Occupation (I					Aggregate year-to-date	\$225.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please s	pecify)			(Mo., Day, Year)	receipt this period
Full Name Alison Si	lverstein				07/14/2023	\$3.00
Mailing Addre						
2515 Mc E						
•	TX 78723-4905					
	loyer (Required)					
Occupation (Required)					Aggregate year-to-date	\$203.00
	Systems Consu				-	
Source:	☐ Corporation☐ Other (please s	PAC pecify)	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/14/2023	\$100.00
David Rus	shing					Ŷ100 <b>.</b> 00
Mailing Address 102 N Sur	ess nflower Ave					
City, State, Zi	<b>p Code</b> a, MS 38751-25	52				
	loyer (Required)					
Not Emplo						
• " "	oyea					
Occupation (I	Required)				Aggregate year-to-date	\$514.60
	Required)	PAC	✓ Individual	Loan	year-to-date Date	Amount of each
Not Emplo	Required)		✓Individual	Loan	year-to-date	
Not Emplo	Required)  yed  Corporation  Other (please sp		✓Individual	Loan	year-to-date Date	Amount of each receipt this
Source: Full Name Monie Her Mailing Addre	Required)  pyed  Corporation  Other (please spanderson		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Source: Full Name Monie Her Mailing Addre	Required) Dyed Corporation Other (please spanderson Dess Destic Oaks Dr		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Source:  Full Name Monie Her Mailing Addre 3845 Maje City, State, Zi	Required) Dyed Corporation Other (please spanderson Dess Destic Oaks Dr		✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Monie Her Mailing Addre 3845 Maje City, State, Zi Oxford, M	Required) Dyed Corporation Other (please spinderson ess estic Oaks Dr p Code 4S 38655-8153 Cloyer (Required)		✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Monie Her Mailing Addre 3845 Maje City, State, Zi Oxford, M	Required) Dyed Corporation Other (please spinderson ess estic Oaks Dr p Code 4S 38655-8153 Cloyer (Required)		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Monie Her Mailing Addre 3845 Maje City, State, Zi Oxford, M	Required) Dyed Corporation Other (please spanderson Dess Destic Oaks Dr Destic Oa		✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Reporting Period 7/1/2023 t

through

7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jeffrey C	lantin				07/29/2023	\$250.00
Mailing Addre						
8710 Oak						
City, State, Zi	•					
	ins, LA 70118-	1224				
Self Empl	loyer (Required) .oyed					
Occupation (F	Required)				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Ann Rabal	ais				07/23/2023	\$25.00
Mailing Addre	ess					
132 Sara	Fox Dr					
City, State, Zi						
	MS 39047-5526					
Not Emplo	loyer (Required) oyed					
Occupation (F					Aggregate year-to-date	\$238.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Stacy Whi	.te				07/14/2023	\$100.00
Mailing Addre						
	ty Road 506					
City, State, Zi Shannon,	<b>p Code</b> MS 38868-9734					
Name of Emp Cadence B	loyer (Required) Bank					
Occupation (F					Aggregate vear-to-date	\$278.40
	Loan Officer				,	
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please sp	pecity)			(Mo., Day, Tear)	period
Full Name Edson Gri	.swold				07/14/2023	\$15.00
Mailing Addre						
City, State, Zi	p Code					
	0 80231-5602					
Name of Emp	loyer (Required)					
Occupation (F					Aggregate	2007 50
Not Emplo					year-to-date	\$307.50

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

					•	
Source:	☐ Corporation☐ Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara (	lasev				07/25/2023	\$100.00
Mailing Addre						
229 Peach	ntree Hills Ave	e NE				
City, State, Zi	<b>p Code</b> GA 30305-4413					
Name of Emp	loyer (Required)					
Occupation (					Aggregate	\$525.00
Not Emplo	yed				year-to-date	
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please sp	ecity)			(WO., Day, Teal)	period
Full Name Daniel Pa	nir				07/17/2023	\$25.00
Mailing Address						
City, State, Zi	<b>p Code</b> IS 38801-7600					
Name of Emp	loyer (Required)					
SSA						
Occupation (					Aggregate year-to-date	\$350.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Judith Wi	ener				07/29/2023	\$500.00
Mailing Addre						
City, State, Zi						
	MS 39202-1314					
Name of Emp	loyer (Required)					
Occupation (					Aggregate	<u> </u>
Retired	Koquii ou)				year-to-date	\$1,100.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name					07/21/2023	\$250.00
Roger McI	Dowell					1
Mailing Address 1904 Full						
City, State, Zi	<b>p Code</b> urg, MS 39401-	7544				
	loyer (Required)	1 ) 4 4				
Not Emplo						
Occupation (	Required)				Aggregate year-to-date	\$1,789.25

Name of Candidate or Committee Brandon Presle	эy
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Utner (please sp	ресіту)			(ino., bay, real)	period
Full Name Cherri Li	ghtsey				07/16/2023	\$25.00
Mailing Addre						
3701 Craw	ford Rd					
City, State, Zi		^				
	MS 39743-962	9 				
Not Emplo	loyer (Required) yed					
Occupation (I					Aggregate year-to-date	\$330.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name					07/26/2023	\$100.00
John Drak						
Mailing Address 1220 Suns						
City, State, Zi	p Code					
Ocean Spr	ings, MS 3956	4-2943				
Name of Emp	loyer (Required) yed					
Occupation (I	Required)				Aggregate	\$1,400.00
Not Emplo	yed				year-to-date	
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name	_				07/26/2023	\$25.00
Marc Doyl						
Mailing Addre						
City, State, Zi	p Code					
City, State, Zi	MS 39120-3543					
City, State, Zi Natchez,	MS 39120-3543 loyer (Required)					
City, State, Zi Natchez, Name of Emp Echo Pict	MS 39120-3543 loyer (Required) tures, Inc.					
City, State, Zi Natchez, Name of Emp Echo Pict Occupation (I	MS 39120-3543 loyer (Required) tures, Inc.				Aggregate year-to-date	\$375.00
City, State, Zi Natchez, Name of Emp Echo Pict Occupation (I	MS 39120-3543 loyer (Required) tures, Inc. Required)		✓ Individual	Loan		Amount of each
City, State, Zi Natchez, Name of Emp Echo Pict Occupation (I Documenta	MS 39120-3543 loyer (Required) ures, Inc. Required) ry Film Maker	□PAC	✓ Individual	Loan	year-to-date	
City, State, Zi Natchez, Name of Emp Echo Pict Occupation (I Documenta Source:	MS 39120-3543  loyer (Required) cures, Inc.  Required) cry Film Maker  Corporation  Other (please sp	□PAC	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Natchez, Name of Emp Echo Pict Occupation (I Documenta Source: Full Name Horace Ni	MS 39120-3543  loyer (Required) cures, Inc.  Required) cry Film Maker  Corporation  Other (please sp	□PAC	✓Individual	Loan	year-to-date Date	Amount of each receipt this
City, State, Zi Natchez, Name of Emp Echo Pict Occupation (I Documenta Source: Full Name Horace Ni Mailing Addre	MS 39120-3543  loyer (Required) cures, Inc.  Required) cry Film Maker  Corporation  Other (please sp	□PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Natchez, Name of Emp Echo Pict Occupation (I Documenta Source:  Full Name Horace Ni Mailing Addre 1230 Trin City, State, Zi	MS 39120-3543  loyer (Required) cures, Inc.  Required) cry Film Maker  Corporation  Other (please sp.  x ess cidad Ave NE p Code	PAC pecify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Natchez, Name of Emp Echo Pict Occupation (I Documenta Source:  Full Name Horace Ni Mailing Addre 1230 Trin City, State, Zi Washingto	MS 39120-3543  loyer (Required) cures, Inc.  Required) cry Film Maker  Corporation  Other (please sp  x  ess  idad Ave NE  p Code on, DC 20002-38	PAC pecify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Natchez, Name of Emp Echo Pict Occupation (I Documenta Source:  Full Name Horace Ni Mailing Addre 1230 Trin City, State, Zi Washingto	MS 39120-3543  loyer (Required) cures, Inc.  Required) cry Film Maker  Corporation  Other (please sp  x  ess cidad Ave NE p Code en, DC 20002-33  loyer (Required)	PAC pecify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Natchez, Name of Emp Echo Pict Occupation (I Documenta Source:  Full Name Horace Ni Mailing Addre 1230 Trin City, State, Zi Washingto	MS 39120-3543  loyer (Required) cures, Inc.  Required) cry Film Maker  Corporation  Other (please sp.  x  ess. cidad Ave NE p Code en, DC 20002-33  loyer (Required) en Media  Required)	PAC pecify)	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

				. •	
☐ Corporation ☐ Other (please spe	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
negan				07/21/2023	\$150.00
ss				-	
<b>Code</b> 4S 39047-9007				-	
oyer (Required) yed				-	
equired)				Aggregate year-to-date	\$650.00
Corporation Other (please spec		✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
ıns				07/21/2023	\$1,000.00
Prospect Rd				-	
<b>Code</b> MS 39746-8764					
oyer (Required) Supply					
equired) Ldent				Aggregate year-to-date	\$1,000.00
Corporation Other (please spe	_	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
ork				07/25/2023	\$250.00
ss					
Code	2408			-	
<b>Oyer (Required)</b> America					
equired) Administrator	r			Aggregate year-to-date	\$1,100.00
☐ Corporation☐ Other (please spe	_	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
àγ				07/26/2023	\$200.00
s <b>s</b> Rd				-	
Code 5, MS 39741-902	21			1	
yer (Required)					
equired)				Aggregate year-to-date	\$725.00
	Other (please specially appropriate to the code of the	Code (S 39047-9007  Degan  Serield Pl  Code (S 39047-9007  Degan  Code (S 39047-9007  Degan  Degan  Code (S 39047-9007  Degan  D	Other (please specify)  leggan  size it is a 39047-9007  loger (Required)  loger (Required)  loger (Required)  loger (Please specify)  loger (Required)  log	Other (please specify)  legan  sifield P1  Code  Is 39047-9007  over (Required)  red  Corporation PAC Individual Loan  Other (please specify)  leguired)  sylvariant  Code  MS 39746-8764  over (Required)  squired)  code  Other (please specify)  ork  sites  a St  Code  ey, MS 38965-2408  over (Required)  America  squired)  code  c	Other (please specify)    Code   Code

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name		<u> </u>			07/27/2023	\$1,000.00
Terry Jor						
Mailing Addre						
City, State, Zi						
	hia, MS 39350-	-0459				
Name of Emp	loyer (Required) Loyed					
Occupation (I	Required)				Aggregate year-to-date	\$1,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Diane Ale	exander				07/28/2023	\$50.00
Mailing Addre						
46 Sagewo						
City, State, Zi	p Code					
Brandon,	MS 39042-2526					
Name of Emp	loyer (Required)					
Occupation (I	Required)	anager			Aggregate year-to-date	\$300.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp				(Mo., Day, Year)	receipt this period
					0= /00 /0000	
Full Name John S. H	Hurt				07/09/2023	\$77.25
					07/09/2023	\$77.25
John S. H					07/09/2023	\$77.25
John S. H  Mailing Addre 450 Valle  City, State, Zi	ess ey Vista Dr				07/09/2023	\$77.25
John S. F Mailing Addre 450 Valle City, State, Zi Tupelo, M	ess ey Vista Dr p Code				07/09/2023	\$77.25
John S. F Mailing Addre 450 Valle City, State, Zi Tupelo, M	ey Vista Dr p Code IS 38801-1500 loyer (Required)				07/09/2023	\$77.25
John S. F Mailing Addre 450 Valle City, State, Zi Tupelo, M	p Code as 38801-1500 byed				Aggregate year-to-date	\$377.25
John S. F Mailing Addre 450 Valle City, State, Zi Tupelo, M Name of Emp Not Emplo Occupation (I	p Code as 38801-1500 byed	PAC	✓Individual	Loan	Aggregate year-to-date	\$377.25
John S. F Mailing Addre 450 Valle City, State, Zi Tupelo, M Name of Emp Not Emplo Occupation (I Retired	p Code as 38801-1500  loyer (Required) byed  Required)		✓Individual	Loan	Aggregate year-to-date	\$377.25
John S. F Mailing Addre 450 Valle City, State, Zi Tupelo, M Name of Emp Not Emplo Occupation (I Retired Source:	p Code  15 38801-1500  16 Solver (Required)  27 Solved  28 Required)  29 Corporation  30 Other (please sp		✓Individual	Loan	Aggregate year-to-date	\$377.25  Amount of each receipt this
John S. F Mailing Addre 450 Valle City, State, Zi Tupelo, M Name of Emp Not Emplo Occupation (I Retired Source: Full Name John W. E	p Code  15 38801-1500  16 Syed  Required)  Corporation  Other (please sp		✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$377.25  Amount of each receipt this period
John S. F Mailing Addre 450 Valle City, State, Zi Tupelo, M Name of Emp Not Emplo Occupation (I Retired Source:	p Code  15 38801-1500  16 Syed  17 Corporation  18 Other (please species)		✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$377.25  Amount of each receipt this period
John S. F  Mailing Addre 450 Valle City, State, Zi Tupelo, M  Name of Emp Not Emplo Occupation (I Retired Source:  Full Name John W. E  Mailing Addre 523 S Uni City, State, Zi	p Code  Is 38801-1500  Ioyer (Required)  Oyed  Corporation  Other (please sp  Brown Jr  Brown Jr  Bross  On St  p Code		✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$377.25  Amount of each receipt this period
John S. F  Mailing Addre 450 Valle City, State, Zi Tupelo, M  Name of Emp Not Emplo Occupation (I Retired Source:  Full Name John W. E  Mailing Addre 523 S Uni City, State, Zi Natchez,	p Code  As 38801-1500  Bloyer (Required)  Byed  Corporation  Other (please sponsor)  Brown Jr  Brown Jr  Brown Jr  Const  Code  MS 39120-3519		✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$377.25  Amount of each receipt this period
John S. F  Mailing Addre 450 Valle City, State, Zi Tupelo, M  Name of Emp Not Emplo Occupation (I Retired Source:  Full Name John W. E  Mailing Addre 523 S Uni City, State, Zi Natchez, Name of Emp	p Code  As 38801-1500  Bloyer (Required)  Dyed  Corporation  Other (please sp  Brown Jr  Brown Jr  Bross  On St  p Code  MS 39120-3519  Bloyer (Required)		✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$377.25  Amount of each receipt this period
John S. F  Mailing Addre 450 Valle City, State, Zi Tupelo, M  Name of Emp Not Emplo Occupation (I Retired Source:  Full Name John W. E  Mailing Addre 523 S Uni City, State, Zi Natchez, Name of Emp Not Emplo	p Code  18 38801-1500  19 Corporation  Corporation  Other (please sp  19 Ses  10 on St  10 p Code  10 MS 39120-3519  10 p Code  10 p Code		✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)  07/29/2023	\$377.25  Amount of each receipt this period
John S. F  Mailing Addre 450 Valle City, State, Zi Tupelo, M  Name of Emp Not Emplo Occupation (I Retired Source:  Full Name John W. E  Mailing Addre 523 S Uni City, State, Zi Natchez, Name of Emp	p Code  Is 38801-1500  Ioyer (Required)  Oyed  Corporation  Other (please sp  Brown Jr  Brown Jr  Poss  On St  p Code  MS 39120-3519  Ioyer (Required)  Oyed  Required)		✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$377.25  Amount of each receipt this period

through

7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/11/2023	\$25.00
Raleigh E						
Mailing Address 48 County	<b>ess</b> y Road 229U					
City, State, Zi						
Oxford, N	MS 38655					
Name of Emp	oloyer (Required) Dyed					
Occupation (					Aggregate year-to-date	\$675.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Carol Hal	lliburton				07/21/2023	\$46.00
Mailing Addre	ess nyvale Dr					
City, State, Zi						
	MS 39211-4843					
Name of Emp	ployer (Required) byed					
Occupation (					Aggregate year-to-date	\$231.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Elvin Sur	nds				07/14/2023	\$50.00
Mailing Addre	ess idewater Ln					
City, State, Zi	ip Code MS 39110-8942					
Name of Emp	oloyer (Required)					
St. Franc	cis of Assisi (	Church				
Occupation (	Required)				Aggregate year-to-date	\$430.00
Source:		PAC	✓ Individual	Loan	Date	Amount of each
	Corporation	PAC	Villulviuuai	Loan	Date	
	Other (please sp		V IIIulviuuai	Loan	(Mo., Day, Year)	receipt this period
Full Name Kevin D.	Other (please sp		<u>v</u> muividuai	LUAII		receipt this
Kevin D.  Mailing Addre	Other (please sp		Villulvidual	Loan	(Mo., Day, Year)	receipt this period
Kevin D.	Other (please sp		<u>v</u> individual	LOAN	(Mo., Day, Year)	receipt this period
Kevin D.  Mailing Addre 17 Larkda  City, State, Zi	Other (please sp	ecify)	Villulvidual	LUAII	(Mo., Day, Year)	receipt this period
Kevin D.  Mailing Addre 17 Larkda  City, State, Zi Saint Lou Name of Emp	Gunn ess ale Dr ip Code uis, MO 63124-1	ecify)	v individual	LUAII	(Mo., Day, Year)	receipt this period
Kevin D.  Mailing Addre 17 Larkda  City, State, Zi Saint Lou Name of Emp	Gunn ess ale Dr ip Code uis, MO 63124-1	ecify)	V IIIulviduai	LOAN	(Mo., Day, Year)	receipt this period
Kevin D.  Mailing Address 17 Larkda City, State, Zi Saint Lou Name of Emp NextEra E Occupation (	Gunn ess ale Dr ip Code uis, MO 63124-1	ecify)	Villulvidual	LUAII	(Mo., Day, Year)	receipt this period

through

7/29/2023

Source: ☐ Corporation ☐ PAC ✓ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	07/26/2023	\$5,000.00
Thomas E. Childs Jr		• •
Mailing Address		
PO Box 1429		
City, State, Zip Code Fulton, MS 38843-5029		
Name of Employer (Required)		
Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$10,000.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name	07/17/2023	\$50.00
Charles Barland	07/17/2023	330.00
Mailing Address		
13114 Romola Rd		
City, State, Zip Code		
Hermanville, MS 39086-9776		
Name of Employer (Required) Self Employed		
Occupation (Required) Cattle Rancher	Aggregate year-to-date	\$275.00
Source: Corporation PAC Individual Loan	Date	Amount of each
		receipt this
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Jana Davis	(Mo., Day, Year) 07/04/2023	•
Full Name Jana Davis Mailing Address		period
Full Name Jana Davis  Mailing Address 605 Belle Meade Blvd		period
Full Name Jana Davis Mailing Address		period
Full Name Jana Davis  Mailing Address 605 Belle Meade Blvd  City, State, Zip Code Nashville, TN 37205-3801  Name of Employer (Required)		period
Full Name Jana Davis  Mailing Address 605 Belle Meade Blvd  City, State, Zip Code Nashville, TN 37205-3801		period
Full Name Jana Davis  Mailing Address 605 Belle Meade Blvd  City, State, Zip Code Nashville, TN 37205-3801  Name of Employer (Required)		period
Full Name Jana Davis  Mailing Address 605 Belle Meade Blvd  City, State, Zip Code Nashville, TN 37205-3801  Name of Employer (Required) Integrit Consulting  Occupation (Required)	Aggregate year-to-date  Date	\$500.00 \$500.00 Amount of each
Full Name Jana Davis  Mailing Address 605 Belle Meade Blvd  City, State, Zip Code Nashville, TN 37205-3801  Name of Employer (Required) Integrit Consulting  Occupation (Required) Consultant	Aggregate year-to-date	\$500.00 \$500.00
Full Name Jana Davis  Mailing Address 605 Belle Meade Blvd  City, State, Zip Code Nashville, TN 37205-3801  Name of Employer (Required) Integrit Consulting  Occupation (Required) Consultant  Source: Corporation PAC Individual Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$500.00 \$500.00 Amount of each receipt this period
Full Name Jana Davis  Mailing Address 605 Belle Meade Blvd  City, State, Zip Code Nashville, TN 37205-3801  Name of Employer (Required) Integrit Consulting  Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)	Aggregate year-to-date  Date	\$500.00 \$500.00 Amount of each receipt this
Full Name  Jana Davis  Mailing Address 605 Belle Meade Blvd  City, State, Zip Code Nashville, TN 37205-3801  Name of Employer (Required) Integrit Consulting  Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)	Aggregate year-to-date  Date (Mo., Day, Year)	\$500.00 \$500.00 Amount of each receipt this period
Full Name Jana Davis  Mailing Address 605 Belle Meade Blvd  City, State, Zip Code Nashville, TN 37205-3801  Name of Employer (Required) Integrit Consulting  Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Sandra Ray  Mailing Address 144 Youngswood Loop	Aggregate year-to-date  Date (Mo., Day, Year)	\$500.00 \$500.00 Amount of each receipt this period
Full Name Jana Davis  Mailing Address 605 Belle Meade Blvd  City, State, Zip Code Nashville, TN 37205-3801  Name of Employer (Required) Integrit Consulting  Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Sandra Ray  Mailing Address	Aggregate year-to-date  Date (Mo., Day, Year)	\$500.00 \$500.00 Amount of each receipt this period
Full Name Jana Davis  Mailing Address 605 Belle Meade Blvd  City, State, Zip Code Nashville, TN 37205-3801  Name of Employer (Required) Integrit Consulting  Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Sandra Ray  Mailing Address 144 Youngswood Loop  City, State, Zip Code Pass Christian, MS 39571-2310  Name of Employer (Required)	Aggregate year-to-date  Date (Mo., Day, Year)	\$500.00 \$500.00 Amount of each receipt this period
Full Name Jana Davis  Mailing Address 605 Belle Meade Blvd  City, State, Zip Code Nashville, TN 37205-3801  Name of Employer (Required) Integrit Consulting  Occupation (Required) Consultant  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Sandra Ray  Mailing Address 144 Youngswood Loop  City, State, Zip Code Pass Christian, MS 39571-2310	Aggregate year-to-date  Date (Mo., Day, Year)	\$500.00 \$500.00 Amount of each receipt this period

Reporting Period

7/1/2023 **through** 

7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/17/2023	\$50.00
Carolyn M						
Mailing Addre						
	relwood Cir					
City, State, Zi	MS 39440-1868					
	loyer (Required)					
Not Emplo						
Occupation (	Required)				Aggregate	\$425.00
Retired	. ,				year-to-date	γ423 <b>.</b> 00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name		<u> </u>			07/27/2023	\$1,500.00
James M.	Priest				07/27/2023	\$1,500.00
Mailing Addre	ess					
1316 Pop	lar Blvd					
City, State, Z	•					
	MS 39202-2111					
	oloyer (Required)					
Gill, Lac	dner & Priest,	PLLC				
Occupation (	Required)				Aggregate year-to-date	\$2,000.00
	Corneration	DAC			Data	Amount of each
Source:	Corporation	PAC	✓ Individual	Loan	Date (Ma Pay Year)	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name	. 1 1				07/27/2023	\$25.00
Don A. Za						
Mailing Address 2366 17th						
City, State, Zi	al, MN 55112-52	2.0.4				
	oloyer (Required)					
Not Emplo						
Occupation (	Required)				Aggregate	\$225.00
Not Emplo					year-to-date	\$223.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/28/2023	\$100.00
Harold F	iore				07/20/2023	7100.00
Mailing Addr						
	fferson Ave					
City, State, Z		2.6				
	d, MS 38930-353	00				
Name of Emp	oloyer (Required)					
					A ====================================	
Occupation (					Aggregate year-to-date	\$650.00
TAO C THIND TO	Jy Cu				1 -	

Name of Candidate or Committee Brandon Presle	эy
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please sp	ecity)			(Mo., Day, Tear)	period
Full Name Mary Vi F	Risser				07/10/2023	\$250.00
Mailing Addre						
•	ty Road 653B					
City, State, Zi	•					
	, MS 38866-5716	6				
Name of Emp	oloyer (Required) Dyed					
Occupation (	• •				Aggregate year-to-date	\$1,100.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name	Tanhaff				07/20/2023	\$118.00
Sylvia G.						
Mailing Address 304 Dogwo						
City, State, Zi						
	MS 38655-9670					
Name of Emp	ployer (Required) byed					
Occupation (	Required)				Aggregate	\$218.00
Not Emplo	oyed				year-to-date	,
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name		ecify)			(Mo., Day, Year) 07/03/2023	-
Shirley (	Gray	ecify)				period
Shirley O	Gray	ecify)				period
Shirley O	Gray ess ege Hill Rd	ecify)				period
Shirley Consideration Mailing Address 520 Collective, State, Zi	Gray ess ege Hill Rd	ecify)				period
Shirley C Mailing Address 520 Colle City, State, Zi Oxford, N Name of Emp	ess ege Hill Rd ip Code MS 38655-2000 loyer (Required)	ecify)				period
Shirley C Mailing Address 520 Collective, State, Zi Oxford, M	ess ege Hill Rd ip Code MS 38655-2000 loyer (Required)	ecify)				period
Shirley C Mailing Address 520 Colle City, State, Zi Oxford, N Name of Emp	Gray ess ege Hill Rd ip Code MS 38655-2000 bloyer (Required) byed Required)	ecify)				period
Shirley (Mailing Address) 520 Collective, State, Ziroxford, Mame of Employ Not Employ Occupation (	Gray ess ege Hill Rd ip Code MS 38655-2000 bloyer (Required) byed Required)	PAC	✓Individual	Loan	07/03/2023 Aggregate	\$24.85 \$699.85
Mailing Address 520 Colle City, State, Zi Oxford, M Name of Emplo Occupation ( Not Emplo	ess ege Hill Rd ip Code MS 38655-2000 bloyer (Required) byed Required)	□PAC	✓Individual	Loan	Aggregate year-to-date	\$24.85 \$29.85
Shirley ( Mailing Address 520 Colle City, State, Zi Oxford, M Name of Emp Not Emplo Occupation ( Not Emplo Source:	ess ege Hill Rd ip Code MS 38655-2000 oloyer (Required) oyed Required) oyed Corporation Other (please sp	□PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$24.85 \$699.85 Amount of each receipt this period
Shirley ( Mailing Address 520 Colle City, State, Zi Oxford, M Name of Emplo Occupation ( Not Emplo Source:  Full Name Edson Gri	ess ege Hill Rd ip Code MS 38655-2000  bloyer (Required) byed  Corporation  Other (please sp	□PAC	✓Individual	Loan	Aggregate year-to-date  Date	\$24.85 \$699.85 Amount of each receipt this
Shirley ( Mailing Address 520 College City, State, Zi Oxford, M Name of Emp Not Emplo Occupation ( Not Emplo Source:  Full Name Edson Gri Mailing Address 1699 S Tr	Gray  ess ege Hill Rd ip Code MS 38655-2000  oloyer (Required) oyed  Required) oyed  Corporation  Other (please sp	□PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$24.85 \$699.85 Amount of each receipt this period
Shirley ( Mailing Address 520 College City, State, Zi Oxford, M Name of Emp Not Employ Occupation ( Not Employ Source:  Full Name Edson Gri Mailing Address 1699 S Tr City, State, Zi	Gray  ess ege Hill Rd ip Code MS 38655-2000  oloyer (Required) oyed  Required) oyed  Corporation  Other (please sp	□PAC	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$24.85 \$699.85 Amount of each receipt this period
Shirley ( Mailing Address 520 Colle City, State, Zi Oxford, M Name of Emp Not Emplo Occupation ( Not Emplo Source:  Full Name Edson Gri Mailing Address 1699 S Tr City, State, Zi Denver, (	Gray  ess ege Hill Rd ip Code MS 38655-2000  bloyer (Required) byed  Corporation  Other (please sp iswold  ess renton St ip Code CO 80231-5602	□PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$24.85 \$699.85 Amount of each receipt this period
Shirley ( Mailing Address 520 Colle City, State, Zi Oxford, M Name of Emp Not Emplo Occupation ( Not Emplo Source:  Full Name Edson Gri Mailing Address 1699 S Tr City, State, Zi Denver, (	Gray  ess ege Hill Rd ip Code MS 38655-2000  bloyer (Required) byed  Corporation  Other (please sp iswold ess renton St ip Code CO 80231-5602  bloyer (Required)	□PAC	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$24.85 \$699.85 Amount of each receipt this period
Shirley ( Mailing Address 520 Colle City, State, Zi Oxford, M Name of Emp Not Emplo Occupation ( Not Emplo Source:  Full Name Edson Gri Mailing Address 1699 S Tr City, State, Zi Denver, ( Name of Emp	Gray  ess ege Hill Rd ip Code MS 38655-2000  oloyer (Required) oyed  Corporation  Other (please sp iswold ess renton St ip Code CO 80231-5602  oloyer (Required) oyed  Required)	□PAC	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$24.85 \$699.85 Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	7 1	<u> </u>			07/05/2023	\$500.00
Allyson V						
Mailing Address 15 Broad						
City, State, Zi	p Code					
New York,	NY 10005-198	9				
	oloyer (Required) Sachs & Co					
Occupation (	• ,				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Barbara A	Austin				07/25/2023	\$25.00
Mailing Addre						
	nt Ann St					
City, State, Zi	MS 39202-1847					
	loyer (Required)					
Occupation (					Aggregate	\$325.00
Not Emplo	oyed				year-to-date	4020.00
Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name	Other (please sp					period
Maureen S	Santiago				07/18/2023	\$500.00
Mailing Address 8200 Post						
City, State, Zi						
-	MD 20854-3476					
Name of Emp	loyer (Required)					
Occupation (	Required)				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	pecify)			(Mo., Day, Year)	period
Full Name William 3	Jones				07/29/2023	\$100.00
Mailing Addre						
	rs Wells St					
City, State, Zi	ip Code MS 39154-4002					
Name of Emp	loyer (Required)					
US Army						
Occupation (	Required)				Aggregate year-to-date	\$250.00
					ı	

23 through

7/29/2023

Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald L. Kilgore	07/20/2023	\$100.00
Mailing Address		
435 Center Ave N		
City, State, Zip Code		
Philadelphia, MS 39350-2918		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$600.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Ted Atkinson	07/15/2023	\$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)	Aggregate year-to-date	\$280.00
Professor	year-to-date	
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lisa McCollom	07/26/2023	\$300.00
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	\$536.75
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
	07/07/2022	\$25.00
Full Name Charles Barland	07/27/2023	
	07/27/2023	
Charles Barland  Mailing Address 13114 Romola Rd  City, State, Zip Code	07/27/2023	
Charles Barland  Mailing Address 13114 Romola Rd  City, State, Zip Code  Hermanville, MS 39086-9776	07/27/2023	
Charles Barland  Mailing Address 13114 Romola Rd  City, State, Zip Code Hermanville, MS 39086-9776  Name of Employer (Required)	07/27/2023	
Charles Barland  Mailing Address 13114 Romola Rd  City, State, Zip Code  Hermanville, MS 39086-9776	Aggregate year-to-date	\$275.00

Reporting Period

7/1/2023

through

7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name	Utilei (piease sp					period
Wayne Gra	ìγ				07/18/2023	\$10.00
Mailing Addre	ess					
520 Colle	ege Hill Rd					
City, State, Zi	•					
	1S 38655-2000					
Not Emplo	oloyer (Required) Diyed					
Occupation (I					Aggregate year-to-date	\$210.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/28/2023	\$100.00
Rose M. J	Juzang				0772072023	Ŷ100 <b>.</b> 00
Mailing Addre						
City, State, Zi	p Code					
	MS 39507-2031	1				
Name of Emp	lloyer (Required)					
Occupation (I					Aggregate year-to-date	\$225.00
Not Emplo						
Source:	<ul><li>☐ Corporation</li><li>☐ Other (please sp</li></ul>	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name		<u> </u>			07/10/2022	<u>-</u>
John Ball	lard				07/19/2023	\$50.00
Mailing Addre	ess ningleaf Cv					
City, State, Zi	=					
	4S 38801-9516					
	loyer (Required)					
ms senior	care					
Occupation (I						
Pharmacis	• •				Aggregate year-to-date	\$475.00
	• •	PAC	✓ Individual	Loan	year-to-date Date	Amount of each
Pharmacis	st		✓ Individual	Loan	year-to-date	
Source:	Corporation Other (please sp		✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Source:	Corporation Other (please sp		✓ Individual	Loan	year-to-date Date	Amount of each receipt this
Source:	Corporation Other (please sp		✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kenneth G Mailing Addre 128 Seasi City, State, Zi	Corporation Other (please specification) Groue ess de Dr p Code	pecify)	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kenneth C Mailing Addre 128 Seasi City, State, Zi Ocean Spr	Corporation Other (please specific please spec	pecify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kenneth G Mailing Addre 128 Seasi City, State, Zi Ocean Spr Name of Emp	Corporation Other (please specific please spec	pecify)	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kenneth G Mailing Addre 128 Seasi City, State, Zi Ocean Spr Name of Emp	Corporation  Other (please specific prode produce prod	pecify)	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)  07/29/2023	Amount of each receipt this period
Full Name Kenneth G Mailing Addre 128 Seasi City, State, Zi Ocean Spr Name of Emp	Corporation  Other (please special content of the please special content of the property of th	pecify)	<b>✓</b> Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Brandon Presle	эy
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ted Atkir	eon	<u> </u>			07/29/2023	\$25.00
Mailing Addre						
1000 E Br	road St					
City, State, Zi	<b>p Code</b> nt, MS 39773-32	236				
	loyer(Required) opi State Unive	ersity				
Occupation (I					Aggregate year-to-date	\$280.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Roy H. Ry	an an				07/11/2023	\$100.00
Mailing Addre						
City, State, Zi						
Tupelo, M	IS 38801-3027					
Name of Emp	loyer (Required) oyed					
Occupation (I					Aggregate year-to-date	\$400.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Kelly J.	Jacobs				07/21/2023	\$46.00
Mailing Addre						
2202 10006	ertson Gin Rd					
City, State, Zi		7				
City, State, Zi Hernando,	p Code MS 38632-822 loyer (Required)	7				
City, State, Zi Hernando, Name of Emp	p Code  MS 38632-822' loyer (Required)  yed  Required)	7			Aggregate year-to-date	\$646.00
City, State, Zi Hernando, Name of Emp Not Emplo Occupation (I	p Code  MS 38632-822' loyer (Required)  yed  Required)	7 PAC	✓Individual	Loan	year-to-date Date	Amount of each
City, State, Zi Hernando, Name of Emp Not Emplo Occupation (I Not Emplo	p Code  MS 38632-822  loyer (Required)  byed  Required)  byed	□PAC	✓Individual	Loan	year-to-date	
City, State, Zi Hernando, Name of Emp Not Emplo Occupation (I Not Emplo	p Code  MS 38632-822  loyer (Required)  byed  Corporation  Other (please sp	□PAC	✓Individual	Loan	year-to-date Date	Amount of each receipt this
City, State, Zi Hernando, Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Walter Ta	p Code  MS 38632-822  loyer (Required)  byed  Corporation  Other (please span)	□PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Hernando, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Walter Ta Mailing Addre 1054 Cour City, State, Zi	p Code  MS 38632-822  loyer (Required)  byed  Corporation  Other (please space)  Lylor  Ess  Lty Road 36	□PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Hernando, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Walter Ta Mailing Addre 1054 Cour City, State, Zi Thaxton,	p Code  MS 38632-822  loyer (Required)  byed  Corporation  Other (please space)  Lylor  ess  Lty Road 36  p Code	□PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Hernando, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Walter Ta Mailing Addre 1054 Cour City, State, Zi Thaxton,	p Code  MS 38632-822  loyer (Required) byed  Corporation  Other (please space)  Lylor  PSS  Ly Road 36  p Code  MS 38871-9507  loyer (Required)	□PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Hernando, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Walter Ta Mailing Addre 1054 Cour City, State, Zi Thaxton, Name of Emp	p Code  MS 38632-822  loyer (Required)  byed  Corporation  Other (please space)  aylor  ess  aty Road 36  p Code  MS 38871-9507  loyer (Required)  byed  Required)	□PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Br	randon Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC Individual Loan	Date	Amount of each
Source: Corporation PAC Individual Loan Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Jeffrey Hulum	07/28/2023	\$250.00
Mailing Address		
3601 Oak Ave		
City, State, Zip Code		
Gulfport, MS 39507-3106		
Name of Employer (Required)		
US Army		
Occupation (Required) Soldier	Aggregate year-to-date	\$250.00
Source: Corporation PAC /Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Dana Gonzalez	07/28/2023	\$30.00
Mailing Address		
3663 James Monroe Dr		
City, State, Zip Code		
Jackson, MS 39213-3020		
Name of Employer (Required)		
Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$280.00
	Data	Amount of cook
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Raleigh Byars	07/19/2023	\$25.00
Mailing Address 48 County Road 229U		
City, State, Zip Code		
Oxford, MS 38655		
Name of Employer (Required)		
Not Employed		
Occupation (Required)	Aggregate	\$675.00
Not Employed	year-to-date	\$675.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Linda Foshee	07/11/2023	\$15.00
Mailing Address Not Employed		
City, State, Zip Code		
Hattiesburg, MS 39402		
<u> </u>		
Not Employed		
	Aggregate	6400 60
	year-to-date	>48∠.60
Name of Employer (Required) Not Employed  Occupation (Required) Not Employed	Aggregate year-to-date	\$482.60

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name	Other (picuse sp				07/03/2023	<b>period</b> \$151.00
Satnam L.	Sethi					Ÿ131 <b>.</b> 00
Mailing Addre						
City, State, Zip						
	S 39046-5325					
Name of Empl	oyer (Required) oyed					
Occupation (F	• '				Aggregate year-to-date	\$1,151.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Laura Ham	ilton				07/14/2023	\$10.00
Mailing Addre						
	lph Ave SE					
City, State, Zip	o <b>Code</b> e, AL 35801-36	50.6				
Name of Empl	oyer (Required)					
Not Emplo						
Occupation (F					Aggregate year-to-date	\$343.51
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Ginny Tro	utt				07/25/2023	\$250.00
Mailing Addre						
185 Oakle	_					
City, State, Zip Senatobia	<b>Code</b> , MS 38668-648	31				
Name of Empl	oyer (Required)					
Not Emplo	yed					
Occupation (F					Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Debra Kau	fman				07/16/2023	\$25.00
Mailing Addre						
•	y Road 303					
City, State, Zip						
	38852-7516					
Name of Emplo	oyer (Required) ved					
	<u> </u>				I	
Not Emplo	Required)				Aggregate year-to-date	\$215.00

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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 Reporting Period
 7/1/2023
 through
 7/29/2023

Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael F. Smith	07/26/2023	\$50.00
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	\$725.00
Source: Corporation PAC Individual Loan	Date	Amount of each receipt this
Other (please specify)	(Mo., Day, Year)	period
Full Name Debra Kaufman	07/26/2023	\$25.00
Mailing Address 156 County Road 303		
City, State, Zip Code		
Iuka, MS 38852-7516		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$215.00
Source: ☐ Corporation ☐ PAC ✓ Individual ☐ Loan	Date	Amount of each
Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
		receipt this
Other (please specify)  Full Name Etta Smith  Mailing Address	(Mo., Day, Year)	receipt this period
Other (please specify)  Full Name Etta Smith  Mailing Address 409 Cherry Hill Dr	(Mo., Day, Year)	receipt this period
Other (please specify)  Full Name Etta Smith  Mailing Address	(Mo., Day, Year)	receipt this period
Other (please specify)  Full Name Etta Smith  Mailing Address 409 Cherry Hill Dr  City, State, Zip Code  Madison, MS 39110-7501  Name of Employer (Required)	(Mo., Day, Year)	receipt this period
Other (please specify)  Full Name Etta Smith  Mailing Address 409 Cherry Hill Dr  City, State, Zip Code Madison, MS 39110-7501  Name of Employer (Required) Not Employed	(Mo., Day, Year) 07/27/2023	receipt this period \$25.00
Other (please specify)  Full Name Etta Smith  Mailing Address 409 Cherry Hill Dr  City, State, Zip Code  Madison, MS 39110-7501  Name of Employer (Required)	(Mo., Day, Year)	receipt this period
Other (please specify)  Full Name Etta Smith  Mailing Address 409 Cherry Hill Dr  City, State, Zip Code Madison, MS 39110-7501  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan	(Mo., Day, Year)  07/27/2023  Aggregate year-to-date  Date	receipt this period \$25.00 \$215.00
Other (please specify)  Full Name Etta Smith  Mailing Address 409 Cherry Hill Dr  City, State, Zip Code Madison, MS 39110-7501  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan Other (please specify)	(Mo., Day, Year) 07/27/2023  Aggregate year-to-date	receipt this period \$25.00
Other (please specify)  Full Name Etta Smith  Mailing Address 409 Cherry Hill Dr  City, State, Zip Code Madison, MS 39110-7501  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan	(Mo., Day, Year)  07/27/2023  Aggregate year-to-date  Date	\$25.00 \$215.00 Amount of each receipt this
Other (please specify)  Full Name Etta Smith  Mailing Address 409 Cherry Hill Dr  City, State, Zip Code Madison, MS 39110-7501  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Miriam Harrington  Mailing Address	(Mo., Day, Year)  07/27/2023  Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$215.00  Amount of each receipt this period
Other (please specify)  Full Name Etta Smith  Mailing Address 409 Cherry Hill Dr  City, State, Zip Code Madison, MS 39110-7501  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Miriam Harrington	(Mo., Day, Year)  07/27/2023  Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$215.00  Amount of each receipt this period
City, State, Zip Code Madison, MS 39110-7501 Name of Employer (Required) Not Employed  Cocupation (Required) Not Employed  Corporation PAC Individual Loan Other (please specify)  Full Name Miriam Harrington  Mailing Address 3800 Fairfax Dr	(Mo., Day, Year)  07/27/2023  Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$215.00  Amount of each receipt this period
Other (please specify)  Full Name Etta Smith  Mailing Address 409 Cherry Hill Dr  City, State, Zip Code Madison, MS 39110-7501  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Miriam Harrington  Mailing Address 3800 Fairfax Dr  City, State, Zip Code Arlington, VA 22203-1720  Name of Employer (Required)	(Mo., Day, Year)  07/27/2023  Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$215.00  Amount of each receipt this period
Gother (please specify)  Full Name Etta Smith  Mailing Address 409 Cherry Hill Dr  City, State, Zip Code Madison, MS 39110-7501  Name of Employer (Required) Not Employed  Occupation (Required) Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Miriam Harrington  Mailing Address 3800 Fairfax Dr  City, State, Zip Code Arlington, VA 22203-1720	(Mo., Day, Year)  07/27/2023  Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$215.00  Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please spe	☐PAC ✓ Individ	dual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Wi	van 1			07/28/2023	\$250.00
Mailing Addre					
334 Lover					
City, State, Zip	Code				
Ocean Spr	ings, MS 39564	-2826			
	<b>oyer(Required)</b> iygul & Garsid	e			
Occupation (F Attorney	Required)			Aggregate year-to-date	\$5,250.00
Source:	Corporation	☐PAC ✓ Individ	dual Loan	Date	Amount of each
	Other (please spe	ecify)		(Mo., Day, Year)	receipt this period
Full Name John Gaud	et			07/10/2023	\$25.00
Mailing Addre	ss				
99 Midtow					
City, State, Zip					
	rg, MS 39402-7	513			
	<b>oyer(Required)</b> dical Center				
Occupation (F				Aggregate year-to-date	\$275.00
Source:	Corporation	PAC / Individ	dual Loan	Date	Amount of each
	Other (please spe	ecify)	<u> </u>	(Mo., Day, Year)	receipt this period
Full Name Wilson Go	lden			07/14/2023	\$50.00
Mailing Addre					
	e Magnolia Cha				
City, State, Zij	. 0 1 .	.se sw 			
Gainesvil	Code le, GA 30504-5				
Name of Empl	le, GA 30504-5 oyer (Required)				
	le, GA 30504-5 oyer (Required)				
Name of Empl	le, GA 30504-5 oyer (Required) yed Required)			Aggregate year-to-date	\$1,235.00
Name of Emplo	le, GA 30504-5 oyer (Required) yed Required)		dualLoan	year-to-date  Date	Amount of each
Name of Emplo Not Emplo Occupation (F Not Emplo	le, GA 30504-5 oyer (Required) yed Required) yed	587 □PAC ✓ Individ	dualLoan	year-to-date	
Name of Emplo Not Emplo Occupation (F Not Emplo	le, GA 30504-5 oyer (Required) yed Required) yed Corporation Other (please spe	587 □PAC ✓ Individ	dual	year-to-date  Date	Amount of each receipt this
Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Lora Trav Mailing Addre	le, GA 30504-5 oyer (Required) yed Required) yed Corporation Other (please spenicek ss	587 □PAC ✓ Individ	dualLoan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Lora Trav Mailing Addre 2668 Beac	le, GA 30504-5 oyer (Required) yed Required) yed Corporation Other (please spenicek ss h Blvd	587 □PAC ✓ Individ	dual	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Lora Trav Mailing Addre 2668 Beac City, State, Zij	le, GA 30504-5 oyer (Required) yed Required) yed Corporation Other (please spenicek ss h Blvd	587 □PAC ✓ Individ	dual Doan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Lora Trav Mailing Addre 2668 Beac City, State, Zig Biloxi, M	le, GA 30504-5 oyer (Required) yed Required) yed Corporation Other (please specials) nicek ss h Blvd o Code S 39531-4547	587 □PAC ✓ Individ	dual	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Lora Trav Mailing Addre 2668 Beac City, State, Zig Biloxi, M	le, GA 30504-5 oyer (Required) yed Required) yed Corporation Other (please spends) nicek ss h Blvd o Code S 39531-4547 oyer (Required)	587 □PAC ✓ Individ	dual Doan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Lora Trav Mailing Addre 2668 Beac City, State, Zij Biloxi, M Name of Emplo	le, GA 30504-5 oyer (Required) yed Required) yed Corporation Other (please spenicek ss h Blvd Code S 39531-4547 oyer (Required) yed	587 □PAC ✓ Individ	dual Doan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

1/2023 through

7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name	1.1				07/06/2023	\$100.00
Jerri Smi						
Mailing Addre						
City, State, Zi						
-	70361-1669					
Name of Emp	loyer (Required)					
Self Empl	oyed					
Occupation (F	Required)				Aggregate	\$950.00
Attorney					year-to-date	·
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/16/2023	\$50.00
John Hook	S					+00.00
Mailing Addre						
	land Colony Pk	cwy				
City, State, Zi	<b>p Code</b> ., MS 39157-205	57				
	loyer (Required)	) <i>(</i>				
-	Reese LLP					
Occupation (F	Required)				Aggregate	\$250.00
Attorney					year-to-date	7230.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)	_		(Mo., Day, Year)	receipt this period
Full Name					07/27/2023	\$50.00
Sallye Ki	llebrew					,
Mailing Addre						
1200 Harr City, State, Zi						
	S 38655-3944					
	loyer (Required)					
	y Of Mississip	pi				
Occupation (F	Required)				Aggregate	\$400.00
Tutor					year-to-date	4 100 . 00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name	_				07/27/2023	\$1,000.00
	Macnealy					
Mailing Addre						
City, State, Zi	Lester Rd					
	38754-9239					
	loyer (Required)					
Self Empl	oyed					
Occupation (F						
Cocapation (.	Required)				Aggregate year-to-date	\$2,000.00

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/28/2023	\$500.00
Beth K. I						
•	cefield Pl					
City, State, Zi	•					
	see, FL 32308-0	0844				
Self Empl	oloyer (Required) Loyed					
Occupation (	Required)				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/28/2023	\$25.00
Glenn Oli	iver					420.00
Mailing Addre						
5642 Gibs						
•	g, MS 39180-632	20				
	oloyer (Required)					
Occupation (					Aggregate	2010 00
Not Emplo					year-to-date	\$210.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Sandra Ge	eorge				07/29/2023	\$250.00
Mailing Addre						
423 Monta						
City, State, Zi	i <b>p Code</b> Le, MS 39759-72	286				
	oloyer (Required)					
Not Emplo						
Not Emplo					Aggregate year-to-date	\$300.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Ann Rabal	laid				07/29/2023	\$12.00
Mailing Address 132 Sara						
City, State, Zi						
	MS 39047-5526					
	loyer (Required)					
Not Emplo						
	equired)				Aggregate year-to-date	\$238.00

7/29/2023

Source:	Corporation Other (please spec	□ PAC ✓ Indiv	ridual Lo	oan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	nLandingham				07/20/2023	\$50.00
Mailing Addre						
•	West Point Rd					
City, State, Zi	p Code					
	e, MS 39759-819	90				
Name of Emplo	loyer (Required) oyed					
Occupation (F Retired	Required)				Aggregate year-to-date	\$350.00
Source:	Corporation	PAC Indiv	ridual Lo	oan	Date	Amount of each
	Other (please spec	cify)			(Mo., Day, Year)	receipt this period
Full Name Cindy Bro	own				07/11/2023	\$50.00
Mailing Addre						
219 Carol						
City, State, Zip	•					
	1S 38655-3403					
Not Emplo	lloyer (Required)					
Occupation (F					Aggregate	¢450.00
Not Emplo					year-to-date	\$450.00
Source:	Corporation	PAC Indiv	ridual Lo	oan	Date	Amount of each
	Other (please spec	cify)			(Mo., Day, Year)	receipt this period
					07/21/2023	\$4.60
Full Name Scarlett	Reeder				07/21/2023	\$4.60
Scarlett					07/21/2023	\$4.00
	ess				07/21/2023	\$4.00
Scarlett  Mailing Addre 918 Lynn  City, State, Zi	ess Cir p Code				07/21/2023	\$4.00
Scarlett  Mailing Addre 918 Lynn  City, State, Zi  Tupelo, M	Cir p Code 1S 38804-1314				07/21/2023	\$4.00
Mailing Addre 918 Lynn City, State, Zi Tupelo, M	Cir p Code 1S 38804-1314 loyer (Required)				07/21/2023	\$4.00
Scarlett  Mailing Addre 918 Lynn  City, State, Zi Tupelo, M  Name of Emp Not Emplo	cir p Code 4s 38804-1314 loyer (Required)					\$4.00
Mailing Addre 918 Lynn City, State, Zi Tupelo, M	cir p Code 4s 38804-1314 loyer (Required) byed				Aggregate year-to-date	\$504.60
Mailing Addre 918 Lynn City, State, Zi Tupelo, M Name of Emp Not Emplo Occupation (F	cir p Code 4s 38804-1314 loyer (Required) byed	□PAC ✓ Indiv	ridual L	pan	Aggregate year-to-date Date	\$504.60  Amount of each
Mailing Addre 918 Lynn City, State, Zi Tupelo, M Name of Emp Not Emplo Occupation (F Not Emplo	cir p Code as 38804-1314 loyer (Required) byed Required)		ridual Lo	oan	Aggregate year-to-date	\$504.60
Mailing Addre 918 Lynn City, State, Zij Tupelo, M Name of Emp Not Emplo Occupation (F Not Emplo Source:	cir p Code as 38804-1314 loyer (Required) byed Cequired) byed Corporation Other (please spec		ridualLo	pan	Aggregate year-to-date Date	\$504.60  Amount of each receipt this
Mailing Addre 918 Lynn City, State, Zi Tupelo, M Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name William I	cir p Code 4S 38804-1314  loyer (Required) byed  Required) byed  Corporation  Other (please spec		ridual 🔲 Lo	oan	Aggregate year-to-date Date (Mo., Day, Year)	\$504.60  Amount of each receipt this period
Mailing Addre 918 Lynn City, State, Zi Tupelo, M Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name William I Mailing Addre	cir p Code 4S 38804-1314  loyer (Required) byed  Required) byed  Corporation  Other (please specially all only		idual L	oan	Aggregate year-to-date Date (Mo., Day, Year)	\$504.60  Amount of each receipt this period
Mailing Addre 918 Lynn City, State, Zi Tupelo, M Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name William I	cir p Code IS 38804-1314  loyer (Required) byed  Corporation  Other (please spectars)  Lawhead  PSS In St		ridual 🔲 Lo	oan	Aggregate year-to-date Date (Mo., Day, Year)	\$504.60  Amount of each receipt this period
Mailing Addre 918 Lynn City, State, Zij Tupelo, M Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name William I Mailing Addre 718 S 8th City, State, Zij	cir p Code IS 38804-1314  loyer (Required) byed  Corporation  Other (please spectars)  Lawhead  PSS In St		ridual L	oan	Aggregate year-to-date Date (Mo., Day, Year)	\$504.60  Amount of each receipt this period
Mailing Addres 918 Lynn City, State, Zi Tupelo, M Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name William I Mailing Addres 718 S 8th City, State, Zi Oxford, M Name of Emp	cir p Code ds 38804-1314 lloyer (Required) byed Corporation Other (please spectation) awhead ess 1 St p Code ds 38655-4306 lloyer (Required)		idual L	oan	Aggregate year-to-date Date (Mo., Day, Year)	\$504.60  Amount of each receipt this period
Mailing Addre 918 Lynn City, State, Zi Tupelo, M Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name William I Mailing Addre 718 S 8th City, State, Zi Oxford, M	cir p Code ds 38804-1314 lloyer (Required) byed Corporation Other (please spectation) awhead ess 1 St p Code ds 38655-4306 lloyer (Required)		ridual L	oan	Aggregate year-to-date Date (Mo., Day, Year)	\$504.60  Amount of each receipt this period
Mailing Addres 918 Lynn City, State, Zi Tupelo, M Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name William I Mailing Addres 718 S 8th City, State, Zi Oxford, M Name of Emp	cir p Code IS 38804-1314  loyer (Required) byed  Corporation  Other (please spectawhead) ess In St p Code IS 38655-4306  loyer (Required) byed  Required)  Required)		ridual L	oan	Aggregate year-to-date Date (Mo., Day, Year)	\$504.60  Amount of each receipt this period

through

7/29/2023

Dennis Truax	100.00
Dennis Truax  Mailing Address	100.00
Mailing Address 913 Southgate Dr	
913 Southgate Dr	
City, State, Zip Code	
Starkville, MS 39759-9434	
Name of Employer (Required) Self Employed	
Occupation (Required) Engineer  Aggregate year-to-date \$1,	196.00
Source: Corporation PAC Individual Loan Date Amount o	f each
Other (please specify) (Mo., Day, Year) receipt perio	
Full Name Karen S. Lundy  07/16/2023	\$10.00
Mailing Address	
89 James Switzer Rd	
City, State, Zip Code	
Purvis, MS 39475-3036	
Name of Employer (Required) University of Southern Mississippi	
	315.00
110103301	
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Date ☐ Amount o receipt ☐ Other (please specify) ☐ (Mo., Day, Year) ☐ perio	this
Full Name 07/27/2023	\$50.00
Pam Mottley	750.00
Mailing Address	
1810 Fuller St	
City, State, Zip Code	
Hattiesburg, MS 39401-7548	
Name of Employer (Required) Not Employed	
Occupation (Required)  Aggregate	350.00
Not Employed year-to-date	330.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan Date Amount o	
Other (please specify) (Mo., Day, Year) receipt perio	
Full Name  Alfred Martin  07/18/2023	\$50.00
Mailing Address	
Mailing Address 130 Lake Holleman Pl	
130 Lake Holleman Pl  City, State, Zip Code Ridgeland, MS 39157-5089  Name of Employer (Required)	
130 Lake Holleman Pl  City, State, Zip Code Ridgeland, MS 39157-5089	

through

7/29/2023

	_11 1 0	
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name		<u> </u>
Crymes G. Pittman	07/28/2023	\$5,000.00
Mailing Address		
410 S President St		
City, State, Zip Code		
Jackson, MS 39201-5007		
Name of Employer (Required)		
Self Employed		
Occupation (Required)	Aggregate	\$22,500.00
Attorney	year-to-date	\$22,500.00
	Date	Amount of each
		receipt this
Other (please specify)	(Mo., Day, Year)	period
Full Name	07/29/2023	\$250.00
John Garner	0,,23,2023	4200 <b>.</b> 00
Mailing Address		
PO Box 12626		
City, State, Zip Code		
Jackson, MS 39236-2626		
Name of Employer (Required)		
Not Employed		
Occupation (Required)	Aggregate	\$750.00
Retired	year-to-date	\$750.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Source: Corporation PAC Individual Loan Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name	07/21/2023	\$200.00
Gratia Karmes	07,21,2023	7200 <b>:</b> 00
Mailing Address		
417 Chapin St		
City, State, Zip Code		
Starkville, MS 39759-2620		
Name of Employer (Required)		
Not Employed		
Occupation (Required)	Aggregate	\$490.00
		\$490.00
Retired	year-to-date	
Retired  Source: Corneration DAC Cladinidual Daca		Amount of coch
Source: Corporation PAC Individual Loan	Date	Amount of each receipt this
		Amount of each receipt this period
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify)	Date	receipt this
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify)  Full Name Graham Slakie  Mailing Address 4706 Buckingham Dr	Date (Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify)  Full Name Graham Slakie  Mailing Address	Date (Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify)  Full Name Graham Slakie  Mailing Address 4706 Buckingham Dr  City, State, Zip Code Chattanooga, TN 37421-1108	Date (Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify)  Full Name Graham Slakie  Mailing Address 4706 Buckingham Dr  City, State, Zip Code Chattanooga, TN 37421-1108  Name of Employer (Required)	Date (Mo., Day, Year)	receipt this period
Source: Corporation PAC Individual Loan Other (please specify)  Full Name Graham Slakie  Mailing Address 4706 Buckingham Dr  City, State, Zip Code Chattanooga, TN 37421-1108  Name of Employer (Required) Regal	Date (Mo., Day, Year)  07/21/2023	receipt this period \$25.00
Source: Corporation PAC Individual Loan Other (please specify)  Full Name Graham Slakie  Mailing Address 4706 Buckingham Dr  City, State, Zip Code Chattanooga, TN 37421-1108  Name of Employer (Required)	Date (Mo., Day, Year)	receipt this period

Name of Candidate or Committee Brandon Presle	эy
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					. •	
Source:	Corporation Other (please sp		∕ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard E	Ballard				07/12/2023	\$5.00
Mailing Addre	ess				1	
City, State, Zi					-	
•	ville, MS 38862	2-4901				
Name of Emp	oloyer (Required) oyed					
Occupation (Not Emplo					Aggregate year-to-date	\$350.00
Source:	Corporation		/ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
F. II M	Other (please sp	ecify)			(WO., Day, Teal)	period
Full Name Jerutha S	Steptoe				07/24/2023	\$125.00
Mailing Addre						
City, State, Zi	<b>p Code</b> d, MS 39158-190	)6				
Name of Emp	oloyer (Required)					
Occupation (	Required)				Aggregate year-to-date	\$625.00
Source:	Corporation	PAC V	/ Individual	Loan	Date	Amount of each
Jource.	Other (please sp		/ Illulvidual	Loan	(Mo., Day, Year)	receipt this period
Full Name Cynthia	Yap				07/24/2023	\$25.00
Mailing Addre	ess os Ferry Rd					
City, State, Zi	<b>p Code</b> 4S 39532-2024					
Name of Emp	loyer (Required)					
Occupation (	• •				Aggregate year-to-date	\$505.00
Source:	Corporation	PAC	/ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Dan Scrip	pps				07/16/2023	\$150.00
Mailing Addre						
City, State, Zi	p Code	7.4			1	
	loyer (Required)	7 4			-	
State of						
Occupation (					1	
Utility r					Aggregate year-to-date	\$400.00

Name of Candidate or Committee Br	randon Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC Individual Loan	Date	Amount of each
Source: ☐ Corporation ☐ PAC ✓ Individual ☐ Loan ☐ Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Brenda Daniels	07/17/2023	\$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)	Aggregate	\$400.00
Associate Dean	year-to-date	
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name		<u>-</u>
Raleigh Byars	07/28/2023	\$25.00
Mailing Address		
48 County Road 229U		
City, State, Zip Code		
Oxford, MS 38655		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$675.00
	Port.	A
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Galloway	07/11/2023	\$500.00
Mailing Address		
17 Baytowne Row		
City, State, Zip Code Madison, MS 39110-9179		
<u> </u>		
Name of Employer (Required) Not Employed		
	Aggregate	
Occupation (Required) Not Employed	year-to-date	\$1,133.60
Source: Corporation PAC Individual Loan	Date	Amount of each receipt this
Other (please specify)	(Mo., Day, Year)	period
		¢1 000 00
Full Name Andrew Jenkins	07/21/2023	\$1,000.00
Andrew Jenkins Mailing Address	07/21/2023	\$1,000.00
Andrew Jenkins  Mailing Address 116 Highland Meadow Rd	07/21/2023	\$1,000.00
Andrew Jenkins  Mailing Address 116 Highland Meadow Rd  City, State, Zip Code	07/21/2023	\$1,000.00
Andrew Jenkins  Mailing Address  116 Highland Meadow Rd  City, State, Zip Code  Flora, MS 39071-9553	07/21/2023	\$1,000.00
Andrew Jenkins  Mailing Address 116 Highland Meadow Rd  City, State, Zip Code	07/21/2023	\$1,000.00
Andrew Jenkins  Mailing Address  116 Highland Meadow Rd  City, State, Zip Code Flora, MS 39071-9553  Name of Employer (Required)	Aggregate year-to-date	\$3,100.00

through

7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name	-				07/26/2023	\$1,000.00
Nancy Mil						
Mailing Address 17452 Lov						
City, State, Zi						
	lle, VA 22942-	-8133				
Name of Emp	loyer (Required)					
Miller Fi	rm LLC					
Occupation (I	Required)				Aggregate	\$6,000.00
Attorney					year-to-date	. ,
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/26/2023	\$500.00
Scarlett	Reeder				07/20/2023	7300.00
Mailing Addre						
918 Lynn						
City, State, Zi	•					
	1S 38804-1314   loyer (Required)					
Not Emplo						
Occupation (I	Required)				Aggregate	\$504.60
Not Emplo					year-to-date	7304.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/07/2023	\$50.00
Patrina F						
Mailing Addre						
105 Sutte						
• .	39170-5032					
	loyer (Required)					
Kaleidoso	cope of Learnir	ng				
Occupation (I	Required)				Aggregate	\$450.00
Director					year-to-date	,
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/27/2023	\$100.00
Carol Har	rtman					
Mailing Addre						
	st Lake Dr					
City, State, Zi Madison,	MS 39110-9421					
	loyer (Required)					
Self Empl						
Occupation (I	Required)				Aggregate	\$250.00
Accountan					year-to-date	,

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/27/2023	\$25.00
Janice An						
Mailing Address 3336 Whip	ess poorwill Ln					
City, State, Zi	p Code					
Oxford, M	IS 38655-5311					
Name of Emp	loyer (Required) yed					
Occupation (F					Aggregate year-to-date	\$600.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Denise Pi	lgrim				07/28/2023	\$50.00
Mailing Addre	ess					
108 Belli	ngham Dr					
City, State, Zi						
	MS 39110-8524					
Not Emplo	loyer (Required) yed					
Occupation (Required) Not Employed			Aggregate year-to-date	\$467.90		
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Ron Colem	ian				07/28/2023	\$25.00
Mailing Addre						
	Creek Dr					
City, State, Zi	<b>p Code</b> IS 38655-6108					
-	loyer (Required)					
Not Emplo	yed					
Occupation (F	• •				Aggregate year-to-date	\$335.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name					07/29/2023	\$250.00
Jayne But						
Mailing Address 329 E May						
City, State, Zi						
	MS 39206-5718					
Name of Emp	loyer (Required)					
Occupation (F					Aggregate	61 100 00
Not Emplo					year-to-date	\$1,100.00

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	no Amor				07/29/2023	\$25.00
Jacquelir Mailing Addre						
•	enny Blvd					
City, State, Zi	•					
	MS 39209-3744 Dloyer (Required)					
City of C	•					
Occupation (	Required) inistrator				Aggregate year-to-date	\$205.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name					07/20/2023	\$1,000.00
John B. (						
Mailing Addre	<b>ess</b> ing Meadows Rd					
City, State, Zi						
Ridgeland	d, MS 39157-94	88				
Name of Emp	oloyer (Required) oyed					
Occupation (Required) Not Employed			Aggregate year-to-date	\$2,000.00		
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Heather I	)enison				07/13/2023	\$250.00
Mailing Addre						
104 Templ						
City, State, Zi	•	4 5400				
	rings, MS 3956 Dloyer (Required)	4-5402				
Not Emplo	•					
Occupation (	Required)				Aggregate	\$600.00
Not Emplo	oyed				year-to-date	
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	pecify)			(Mo., Day, Year)	period
Full Name Cynthia	ran .				07/23/2023	\$25.00
Mailing Addre						
•	ps Ferry Rd					
City, State, Zi						
	4S 39532-2024 Dloyer (Required)					
Not Emplo	nover (Reutifea)					
-						
Occupation (	oyed				Aggregate	\$505 00
Occupation (	eyed Required)				Aggregate year-to-date	\$505.00

through

7/29/2023

Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carol C.	Mann				07/25/2023	\$25.00
Mailing Addre						
316 Sonor						
City, State, Zi	p Code					
Madison,	MS 39110-9549					
Mann Ager	oloyer (Required) ncy					
Occupation (	• •				Aggregate year-to-date	\$435.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Walter W.	. Nixon III				07/16/2023	\$100.00
Mailing Addre						
1412 Grah						
City, State, Zi	ip Code Llle, AR 72076-	-3835				
	oloyer (Required)					
-	Public Service	e Commissi	on			
Occupation (Required) Attorney				Aggregate year-to-date	\$600.00	
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name William H	Hammack				07/26/2023	\$500.00
Mailing Address 2424 24th						
City, State, Zi	<b>p Code</b> MS 39301-3905	5				
Name of Emp	oloyer (Required) Loyed					
Occupation (	Required)				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/18/2023	\$50.00
	Masterson					
Mailing Address 43 Palm 7	ess Tree Loop					
City, State, Zi	=					
	39465-9251					
	loyer (Required)					
Universit	ty of Southern	Mississip	pi			
Occupation (						
Chemist	Required)				Aggregate year-to-date	\$385.00

Name of Candidate or Committee	Brandon	Presley
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Source: Corporation PAC / Individual Loan	IP IS	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name		-
Alicia Margolis	07/28/2023	\$100.00
Mailing Address		
1474 Dover Rd		
City, State, Zip Code		
Bentonia, MS 39040-9162		
Name of Employer (Required)		
Bradley Arant Boult Cummings LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$550.00
Source: Corporation PAC /Individual Loan	Date	Amount of each
	(Mo., Day, Year)	receipt this
Other (please specify)	- (Mo., Day, Tear)	period
Full Name Lana Richardson	07/28/2023	\$50.00
Mailing Address		
10611 County Road 500		
City, State, Zip Code		
Ripley, MS 38663-9199		
Name of Employer (Required) Not Employed		
Occupation (Required)	Aggregate	\$355.00
Retired	year-to-date	,
Source: Corporation PAC / Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name	07/28/2023	\$5.00
Richard Ballard		
Mailing Address		
142 Road 598		
City, State, Zip Code		
Plantersville, MS 38862-4901		
Name of Employer (Required) Not Employed		
		\$350.00
Occupation (Required) Not Employed	Aggregate year-to-date	
	year-to-date  Date	Amount of each
Not Employed	year-to-date	
Not Employed  Source: Corporation PAC Individual Loan  Other (please specify)  Full Name	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Not Employed  Source: Corporation PAC Individual Loan  Other (please specify)	year-to-date  Date	Amount of each receipt this
Not Employed  Source: Corporation PAC Individual Loan  Other (please specify)  Full Name	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Not Employed  Source: Corporation PAC Individual Loan  Other (please specify)  Full Name  Alysson Mills  Mailing Address	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Alysson Mills  Mailing Address 1441 Felicity St	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Alysson Mills  Mailing Address 1441 Felicity St  City, State, Zip Code	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Alysson Mills  Mailing Address 1441 Felicity St  City, State, Zip Code New Orleans, LA 70130-5201  Name of Employer (Required)	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Alysson Mills  Mailing Address 1441 Felicity St  City, State, Zip Code New Orleans, LA 70130-5201	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Brandon Presle	эy
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/01/2023	\$500.00
Camille (						
Mailing Address 104 Danie						
City, State, Z	ip Code					
	MS 38801-8614					
Name of Emp	oloyer (Required) oyed					
Occupation (	Required)				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/15/2023	\$20.00
Cynthia Y	-					
Mailing Addre	ess os Ferry Rd					
City, State, Z	<u> </u>					
	AS 39532-2024					
Name of Emp	oloyer (Required) oyed					
Occupation (Required) Not Employed			Aggregate year-to-date	\$505.00		
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Laura Har	nilton				07/25/2023	\$25.00
Mailing Addre	ess olph Ave SE					
City, State, Z						
Huntsvill	le, AL 35801-3	606				
Name of Emplo	oloyer (Required) Dyed					
Occupation (					Aggregate year-to-date	\$343.51
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Buddy Fat	ılkner				07/17/2023	\$5,000.00
Mailing Addre						
City, State, Z						
Lookout N	Mountai, TN 373	350-1132				
	oloyer (Required)					
Not Emplo						
Occupation (	Required)				Aggregate	\$5,000.00
Retired					year-to-date	

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date (Ma. Day Year)	Amount of each receipt this
	Other (please sp	pecify)			(Mo., Day, Year)	period
Full Name Norman Po	owell				07/27/2023	\$2,000.00
Mailing Addre						
City, State, Zi						
•	4S 38803-2617					
	oloyer(Required) natic Fire Pro	tection				
Occupation (					Aggregate year-to-date	\$4,500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Francis T	Turner				07/29/2023	\$100.00
Mailing Addre	ess					
166 Steep						
City, State, Zi	•					
	ırg, MS 39402-	7004				
Name of Emp	oloyer (Required) Loyed					
Occupation (	Required)				Aggregate year-to-date	\$500.00
Attorney						
Source:	<ul><li>☐ Corporation</li><li>☐ Other (please specified)</li></ul>	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name		<u> </u>	2		07/03/2023	\$32.25
Elizabeth	n Cagle					¥32.23
Mailing Addre	ess ntgomery St					
City, State, Zi	ip Code Le, MS 39759-2	605				
		003				
Not Emplo	lover (Deguired)					
пос впртс	oloyer (Required) Dyed					
Occupation (	oyed				Aggregate year-to-date	\$207.25
Occupation (	oyed	□PAC	✓Individual	Loan	year-to-date Date	Amount of each
Occupation (	oyed Required)		✓Individual	Loan	year-to-date	
Occupation (IRetired Source:	Required)  Corporation Other (please sp		✓Individual	Loan	year-to-date Date	Amount of each receipt this
Occupation (I Retired Source:	Corporation Other (please sp		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Retired Source:  Full Name James Hut	Corporation Other (please specto		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (IRetired Source: Full Name James Hut Mailing Addre 62 Redfer City, State, Zi	Corporation Other (please space)		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Retired Source:  Full Name James Hut Mailing Addre 62 Redfer City, State, Zi Petal, MS	Corporation Other (please spectors  Trl  p Code 39465-9415		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Retired Source:  Full Name James Hut Mailing Addre 62 Redfer City, State, Zi Petal, MS	Corporation Other (please spectors  Trl  p Code 3 39465-9415  cloyer (Required)		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Retired Source:  Full Name James Hut Mailing Addre 62 Redfer City, State, Zi Petal, MS Name of Emp Self Empl Occupation (I	Corporation Corporation Other (please spectors  Extors  Corporation Corporatio		✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Reporting Period

7/1/2023

through

7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name						period
John Garr	ner				07/06/2023	\$500.00
Mailing Addre	ess					
PO Box 12						
City, State, Zi	•					
	MS 39236-2626					
Name of Emp	oloyer (Required) Dyed					
Occupation (I	Required)				Aggregate year-to-date	\$750.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)	_	<del></del>	(Mo., Day, Year)	receipt this period
Full Name		<u> </u>			07/16/0000	<u>-</u>
Etta Smit	:h				07/16/2023	\$10.00
Mailing Addre	ess					
409 Cherr	ry Hill Dr					
City, State, Zi	•					
	MS 39110-7501					
Name of Emp	oloyer (Required) Dyed					
Occupation (I					Aggregate year-to-date	\$215.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
					(Mo., Day, Year)	receipt this
	Other (please sp	ecify)			(WO., Day, Teal)	period
Full Name Julia A.		ecify)			07/07/2023	
	O'Neal	ecify)				period
Julia A.  Mailing Addre	O'Neal  ess 55	ecify)				period
Julia A.  Mailing Addre PO Box 16  City, State, Zi	O'Neal  ess 55					period
Julia A.  Mailing Addre PO Box 16  City, State, Zi Ocean Spr	O'Neal ess 55 ip Code rings, MS 39566 sloyer (Required)					period
Julia A.  Mailing Addre PO Box 16  City, State, Zi Ocean Spr Name of Emp	O'Neal ess 55 p Code rings, MS 39566 bloyer (Required) byed					period
Julia A.  Mailing Addre PO Box 16  City, State, Zi Ocean Spr Name of Emp Not Emplo  Occupation (I	O'Neal ess 55 p Code rings, MS 39566 bloyer (Required) byed		✓Individual	Loan	Aggregate year-to-date  Date	\$1,000.00 \$2,250.00 Amount of each
Julia A.  Mailing Addre PO Box 16  City, State, Zi Ocean Spr  Name of Emp Not Emplo  Occupation (I Retired	O'Neal ess 55 p Code rings, MS 39566 ployer (Required) byed Required)	5-0165 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date	\$1,000.00 \$2,250.00
Julia A.  Mailing Addre PO Box 16  City, State, Zi Ocean Spr  Name of Emp Not Emplo  Occupation (I Retired	O'Neal ess 55 p Code rings, MS 39566 ployer (Required) byed  Required)  Corporation  Other (please sp	5-0165 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date	\$1,000.00 \$2,250.00 Amount of each receipt this
Julia A.  Mailing Addre PO Box 16  City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (I Retired Source:  Full Name Ann J. Ak	O'Neal ess 55 ip Code rings, MS 39566 bloyer (Required) byed Required)  Corporation  Other (please sp	5-0165 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,250.00  Amount of each receipt this period
Julia A.  Mailing Addre PO Box 16  City, State, Zi Ocean Spr  Name of Emp Not Emplo  Occupation (I Retired  Source:	O'Neal  ess  55  ip Code  cings, MS 39566  bloyer (Required)  byed  Required)  Corporation  Other (please sp	5-0165 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,250.00  Amount of each receipt this period
Julia A.  Mailing Addre PO Box 16  City, State, Zi Ocean Spr Name of Emp Not Emplo  Occupation (I Retired  Source:  Full Name Ann J. Ak  Mailing Addre 2238 Lee  City, State, Zi	O'Neal  ess 55  p Code cings, MS 39566  cloyer (Required)  byed  Required)  Corporation  Other (please sp  padie ess  Loop p Code	5-0165 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,250.00  Amount of each receipt this period
Julia A.  Mailing Addre PO Box 16  City, State, Zi Ocean Spr Name of Emp Not Emplo  Occupation (I Retired  Source:  Full Name Ann J. Ak Mailing Addre 2238 Lee  City, State, Zi Oxford, M	O'Neal  ess 55  p Code cings, MS 39566 ployer (Required) pyed  Required)  Corporation  Other (please sp  padie ess Loop p Code 4S 38655-4920	5-0165 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,250.00  Amount of each receipt this period
Julia A.  Mailing Addre PO Box 16  City, State, Zi Ocean Spr Name of Emp Not Emplo  Occupation (I Retired  Source:  Full Name Ann J. Ak Mailing Addre 2238 Lee  City, State, Zi Oxford, M	O'Neal ess 55 p Code rings, MS 39566 ployer (Required) byed  Corporation Other (please sp badie ess Loop p Code 4S 38655-4920 ployer (Required)	5-0165 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,250.00  Amount of each receipt this period
Julia A.  Mailing Addre PO Box 16  City, State, Zi Ocean Spr Name of Emp Not Emplo  Occupation (I Retired Source:  Full Name Ann J. Ak Mailing Addre 2238 Lee  City, State, Zi Oxford, M Name of Emp	O'Neal ess 55 p Code rings, MS 39566 ployer (Required) pyed  Corporation Other (please sp padie ess Loop p Code 4S 38655-4920 pyed pyed	5-0165 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,250.00  Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	07/28/2023	\$1,000.00
Ann Hendrick	07/28/2023	\$1,000.00
Mailing Address		
968 Bellevue Pl		
City, State, Zip Code		
Jackson, MS 39202-2786		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,050.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name	07/29/2023	\$50.00
Claude Clayton		
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	\$1,150.00
		A
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Reuben V. Anderson	(Mo., Day, Year)	-
Full Name Reuben V. Anderson Mailing Address		period
Full Name Reuben V. Anderson  Mailing Address PO Box 290		period
Full Name Reuben V. Anderson Mailing Address		period
Full Name Reuben V. Anderson  Mailing Address PO Box 290  City, State, Zip Code Jackson, MS 39205-0290  Name of Employer (Required)		period
Full Name Reuben V. Anderson  Mailing Address PO Box 290  City, State, Zip Code Jackson, MS 39205-0290		period
Full Name Reuben V. Anderson  Mailing Address PO Box 290  City, State, Zip Code Jackson, MS 39205-0290  Name of Employer (Required)		period
Full Name Reuben V. Anderson  Mailing Address PO Box 290  City, State, Zip Code Jackson, MS 39205-0290  Name of Employer (Required) Phelps Dunbar  Occupation (Required)	Aggregate year-to-date  Date	\$2,000.00 \$4,000.00 Amount of each
Full Name Reuben V. Anderson  Mailing Address PO Box 290  City, State, Zip Code Jackson, MS 39205-0290  Name of Employer (Required) Phelps Dunbar  Occupation (Required) Attorney	Aggregate year-to-date	\$2,000.00 \$4,000.00
Full Name Reuben V. Anderson  Mailing Address PO Box 290  City, State, Zip Code Jackson, MS 39205-0290  Name of Employer (Required) Phelps Dunbar  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)	Aggregate year-to-date  Date	\$2,000.00 \$4,000.00  Amount of each receipt this
Full Name Reuben V. Anderson  Mailing Address PO Box 290  City, State, Zip Code Jackson, MS 39205-0290  Name of Employer (Required) Phelps Dunbar  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Toni Cooley	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,000.00 \$4,000.00  Amount of each receipt this period
Full Name Reuben V. Anderson  Mailing Address PO Box 290  City, State, Zip Code Jackson, MS 39205-0290  Name of Employer (Required) Phelps Dunbar  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,000.00 \$4,000.00  Amount of each receipt this period
Full Name Reuben V. Anderson  Mailing Address PO Box 290  City, State, Zip Code Jackson, MS 39205-0290  Name of Employer (Required) Phelps Dunbar  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Toni Cooley  Mailing Address 1028 Whitsett Walk  City, State, Zip Code	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,000.00 \$4,000.00  Amount of each receipt this period
Full Name Reuben V. Anderson  Mailing Address PO Box 290  City, State, Zip Code Jackson, MS 39205-0290  Name of Employer (Required) Phelps Dunbar  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Toni Cooley  Mailing Address 1028 Whitsett Walk  City, State, Zip Code Jackson, MS 39206-6158	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,000.00 \$4,000.00  Amount of each receipt this period
Full Name Reuben V. Anderson  Mailing Address PO Box 290  City, State, Zip Code Jackson, MS 39205-0290  Name of Employer (Required) Phelps Dunbar  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Toni Cooley  Mailing Address 1028 Whitsett Walk  City, State, Zip Code	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,000.00 \$4,000.00  Amount of each receipt this period
Full Name Reuben V. Anderson  Mailing Address PO Box 290  City, State, Zip Code Jackson, MS 39205-0290  Name of Employer (Required) Phelps Dunbar  Occupation (Required) Attorney  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Toni Cooley  Mailing Address 1028 Whitsett Walk  City, State, Zip Code Jackson, MS 39206-6158  Name of Employer (Required)	Aggregate year-to-date  Date (Mo., Day, Year)	\$2,000.00 \$4,000.00  Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC ✓Individual Loan	Dete	Amount of each
Other (please specify)	Date (Mo., Day, Year)	receipt this period
Full Name Ricky Johnston	07/13/2023	\$25.00
Mailing Address		
419 3rd St S		
City, State, Zip Code		
Columbus, MS 39701-5632		
Name of Employer (Required)		
Gastroenterology Associates of Columbus		
Occupation (Required)	Aggregate year-to-date	\$350.00
Gastroenterologist	<u> </u>	
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	_	<u>-</u>
Gail Linson	07/24/2023	\$40.00
Mailing Address		
133 NORTHSHORE POINTE		
City, State, Zip Code		
Madison, MS 39110		
Name of Employer (Required)		
Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$235.00
	Dete	Amount of cook
Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John S. Hurt	07/15/2023	\$200.00
Mailing Address		
450 Valley Vista Dr		
City, State, Zip Code Tupelo. MS 38801-1500		
Tupelo, MS 38801-1500		
Tupelo, MS 38801-1500  Name of Employer (Required)		
Tupelo, MS 38801-1500  Name of Employer (Required)  Not Employed	Aggregate	
Tupelo, MS 38801-1500  Name of Employer (Required)	Aggregate year-to-date	\$377.25
Tupelo, MS 38801-1500  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan	year-to-date  Date	\$377.25  Amount of each receipt this
Tupelo, MS 38801-1500  Name of Employer (Required) Not Employed  Occupation (Required) Retired	year-to-date	Amount of each
Tupelo, MS 38801-1500  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan	year-to-date  Date	Amount of each receipt this
Tupelo, MS 38801-1500  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan Other (please specify)	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Tupelo, MS 38801-1500  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Cindy Akins  Mailing Address	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Tupelo, MS 38801-1500  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Cindy Akins  Mailing Address 86449 Meadowwood Dr	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Tupelo, MS 38801-1500  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Cindy Akins  Mailing Address 86449 Meadowwood Dr  City, State, Zip Code	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Tupelo, MS 38801-1500  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Cindy Akins  Mailing Address 86449 Meadowwood Dr  City, State, Zip Code Yulee, FL 32097-6427	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Tupelo, MS 38801-1500  Name of Employer (Required) Not Employed  Occupation (Required) Retired  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Cindy Akins  Mailing Address 86449 Meadowwood Dr  City, State, Zip Code Yulee, FL 32097-6427  Name of Employer (Required)	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Ba	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen K.	Catagor				07/28/2023	\$250.00
Mailing Addre						
150 Spend						
City, State, Zi	•	71 4020				
	istian, MS 395' Dloyer(Required)	/1-4839				
Not Emplo	• • • •					
Occupation (					Aggregate year-to-date	\$1,500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name					07/29/2023	\$100.00
Glenn But						
Mailing Addre	<b>ess</b> orook Pkwy					
City, State, Zi						
Picayune,	, MS 39466-2322	2				
Name of Emp	ployer (Required) loyed					
Occupation (					Aggregate year-to-date	\$600.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name	1.5				07/11/2023	\$500.00
Mailing Addre						
•	ess egor Chapel Rd	N				
City, State, Zi	•					
	, MS 38863-9159	9				
Name of Emp	oloyer (Required) oved					
Occupation (					Aggregate	\$519.60
Retired	- 4.				year-to-date	ŲJIJ:00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name		pecify)			(Mo., Day, Year) 07/21/2023	
Gloria Wi	illiamson	pecify)				period
	illiamson ess	pecify)				period
Gloria Wi Mailing Addre 521 Holla City, State, Zi	illiamson ess and Ave ip Code					period
Gloria Wi Mailing Addre 521 Holla City, State, Zi Philadely	illiamson ess and Ave ip Code phia, MS 39350-					period
Gloria Wi Mailing Addre 521 Holla City, State, Zi Philadely Name of Emp	illiamson ess and Ave ip Code phia, MS 39350-					period
Mailing Address 521 Holla City, State, Zi Philadely Name of Emp	illiamson  ess and Ave  ip Code phia, MS 39350- bloyer (Required)  byed				07/21/2023	\$250.00
Gloria Wi Mailing Addre 521 Holla City, State, Zi Philadely Name of Emp	illiamson  ess and Ave  ip Code phia, MS 39350- bloyer (Required) byed  Required)					period

Reporting Period

City, State, Zip Code

Full Name

Christy Jones

Mailing Address
205 Duck Cv

City, State, Zip Code

Not Employed

Not Employed

Occupation (Required)

Madison, MS 39110-9280

Name of Employer (Required)

Laurel, MS 39443-9157

Name of Employer (Required)

7/1/2023

through

7/29/2023

ITEMIZED RECEIP	PTS	
Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bela Chain Jr	07/25/2023	\$50.00
Mailing Address 243 Saint Andrews Cir		
City, State, Zip Code Oxford, MS 38655-2641		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Davis Davis	07/26/2023	\$25.00
Mailing Address 179 Little Sawmill Rd		

Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carr McClain	07/27/2023	\$500.00
Mailing Address 1011 S 34th Ave		
City, State, Zip Code Hattiesburg, MS 39402-3002		
Name of Employer (Required) Forrest General		
Occupation (Required) Surgeon	Aggregate year-to-date	\$500.00
Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period

\$325.00

\$75.00

07/21/2023

Aggregate year-to-date

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name						period
Sallye Ki	llebrew				07/03/2023	\$100.00
Mailing Addre						
1200 Harr						
City, State, Zi	<b>p Code</b> 4S 38655-3944					
	loyer (Required)					
Universit	cy Of Mississi	ppi				
Occupation (I	Required)				Aggregate year-to-date	\$400.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name					07/14/2023	\$15.00
Laura Ham						,
Mailing Address 707 Rando	ess olph Ave SE					
City, State, Zi	•					
	le, AL 35801-3	606				
Name of Emp	lloyer (Required) oyed					
Occupation (I					Aggregate year-to-date	\$343.51
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Linda Fos	shee				07/24/2023	\$15.00
Mailing Addre	ess					
Not Emplo						
City, State, Zi	<b>p Code</b> arg, MS 39402					
Name of Emp	loyer (Required)					
Not Emplo						
	yed					
Occupation (I	Required)				Aggregate year-to-date	\$482.60
Occupation (I	Required)	PAC	✓ Individual	Loan		Amount of each
Occupation (I	Required) byed		✓ Individual	Loan	year-to-date	
Occupation (I Not Emplo Source:	Required)  yed  Corporation  Other (please sp		✓ Individual	☐ Loan	year-to-date Date	Amount of each receipt this
Occupation (I Not Emplo Source: Full Name Mary Mill	Required)  pyed  Corporation  Other (please sp		✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Not Emplo Source:	Required)  Dyed  Corporation  Other (please species		✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Not Emplo Source:  Full Name Mary Mill Mailing Addre 510 E 86t City, State, Zi	Required) Dyed Corporation Other (please specified)  Ler Dess Ch St Dyed Dyed Dyed Dyed Dyed Dyed Dyed Dyed	Decify)	<b>✓</b> Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi	Required)  Dyed  Corporation  Other (please specified in the specified in	Decify)	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Name of Emp	Required) Dyed Corporation Other (please specification) Other (please specification)  Proceedings of the control of the contro	Decify)	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Not Emplo Source:  Full Name Mary Mill Mailing Addre 510 E 86t City, State, Zi New York, Name of Emp	Required) Dyed Corporation Other (please specification) Other (please spec	Decify)	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)  07/26/2023	Amount of each receipt this period \$250.00
Cocupation (I Not Emplo Source:  Full Name Mary Mill Mailing Addre 510 E 86t City, State, Zi New York, Name of Emp	Required) Dyed Corporation Other (please specification) Other (please spec	Decify)	✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Reporting Period

7/1/2023

7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name					07/08/2023	\$25.00
Mary J. W	Westerlund				0770072023	720.00
Mailing Addre	ess					
1201 Cowd	den Dr					
City, State, Zi	•					
	38821-1306					
	loyer (Required)					
Not Emplo	oyea 					
Occupation (I	• •				Aggregate	\$225.00
Not Emplo	yed				year-to-date	
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					_	·
Perry Hoc	nd				07/19/2023	\$460.00
Mailing Addre						
402 Lake						
City, State, Zi						
•	st, MS 39083-22	210				
	loyer (Required)					
Self Empl						
Occupation (I					Aggregate	<u> </u>
Restauran					year-to-date	\$4,960.00
	_				Dete.	A
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
					(Mo., Day, Year)	
	Other (please sp	ecify)				period
Full Name	Other (please spe	ecify)				·
Full Name Johnny D.		ecify)			07/10/2023	<b>period</b> \$100.00
	Jones	ecify)				·
Johnny D.  Mailing Addre	Jones	ecify)				·
Johnny D.  Mailing Addre 611 S Pea  City, State, Zi	Jones pss ar Orchard Rd p Code					·
Johnny D.  Mailing Addre 611 S Pea  City, State, Zi Ridgeland	Jones  ess  ar Orchard Rd  p Code  d, MS 39157-483					·
Johnny D.  Mailing Addre 611 S Pea  City, State, Zi Ridgeland Name of Emp	Jones ar Orchard Rd p Code d, MS 39157-483					·
Johnny D.  Mailing Addre 611 S Pea  City, State, Zi Ridgeland	Jones ar Orchard Rd p Code d, MS 39157-483					·
Johnny D.  Mailing Addre 611 S Pea  City, State, Zi Ridgeland Name of Emp	Jones  Project  Jones  Jones				07/10/2023 Aggregate	\$100.00
Johnny D.  Mailing Addre 611 S Pea City, State, Zi Ridgeland Name of Emp The DELTA	Jones  Project  Jones  Jones				07/10/2023	·
Johnny D.  Mailing Addre 611 S Pea City, State, Zi Ridgeland Name of Emp The DELTA Occupation (I	Jones  Project  Jones  Jones		✓Individual	Loan	07/10/2023 Aggregate	\$1,453.50  Amount of each
Johnny D.  Mailing Addre 611 S Pea City, State, Zi Ridgeland Name of Emp The DELTA Occupation (I	Jones  project  A Project  Required)		✓Individual	Loan	Aggregate year-to-date	\$100.00
Johnny D.  Mailing Addre 611 S Pea City, State, Zi Ridgeland Name of Emp The DELTA Occupation (I	Jones  proces  proces  A MS 39157-483  A Project  Required)  Corporation		✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,453.50  Amount of each receipt this period
Johnny D.  Mailing Addre 611 S Pea City, State, Zi Ridgeland Name of Emp The DELTA Occupation (I COO Source:	Jones  project  Required)  Corporation  Other (please species)		✓ Individual	Loan	Aggregate year-to-date  Date	\$1,453.50  Amount of each receipt this
Johnny D.  Mailing Addre 611 S Pea City, State, Zi Ridgeland Name of Emp The DELTA Occupation (I COO Source:	Jones  project  Required)  Corporation  Other (please spechimmel		✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,453.50  Amount of each receipt this period
Johnny D.  Mailing Addre 611 S Pea City, State, Zi Ridgeland Name of Emp The DELTA Occupation (I COO Source:	Jones  project  Required)  Corporation  Other (please specials)		✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,453.50  Amount of each receipt this period
Johnny D.  Mailing Addre 611 S Pea City, State, Zi Ridgeland Name of Emp The DELTA Occupation (I COO Source:  Full Name George So Mailing Addre	Jones  prode d, MS 39157-483  loyer (Required) A Project  Required)  Corporation  Other (please spect)  chimmel  pss gs Hwy		✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,453.50  Amount of each receipt this period
Johnny D.  Mailing Addre 611 S Pea City, State, Zi Ridgeland Name of Emp The DELTA Occupation (I COO Source:  Full Name George So Mailing Addre 3630 King City, State, Zi	Jones  prode d, MS 39157-483  loyer (Required) A Project  Required)  Corporation  Other (please spect)  chimmel  pss gs Hwy		✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,453.50  Amount of each receipt this period
Johnny D.  Mailing Addre 611 S Pea City, State, Zi Ridgeland Name of Emp The DELTA Occupation (I COO Source:  Full Name George Sc Mailing Addre 3630 King City, State, Zi Jackson,	Jones  prode d, MS 39157-483  loyer (Required) A Project  Required)  Corporation  Other (please spect)  chimmel  prode  gs Hwy  p Code		✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,453.50  Amount of each receipt this period
Johnny D.  Mailing Addre 611 S Pea City, State, Zi Ridgeland Name of Emp The DELTA Occupation (I COO Source:  Full Name George Sc Mailing Addre 3630 King City, State, Zi Jackson,	Jones  proces  ar Orchard Rd  proce  d, MS 39157-483  ployer (Required)  A Project  Required)  Corporation  Other (please spect)  chimmel  proces  gs Hwy  proces  MS 39216-3321  ployer (Required)		Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,453.50  Amount of each receipt this period
Johnny D.  Mailing Addre 611 S Pea City, State, Zi Ridgeland Name of Emp The DELTA Occupation (I COO Source:  Full Name George So Mailing Addre 3630 King City, State, Zi Jackson, Name of Emp	Jones  Project  Required)  Corporation  Other (please specials of the context)		✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)  07/12/2023	\$1,453.50  Amount of each receipt this period \$2,250.00
Johnny D.  Mailing Addre 611 S Pea City, State, Zi Ridgeland Name of Emp The DELTA Occupation (I COO Source:  Full Name George So Mailing Addre 3630 King City, State, Zi Jackson, Name of Emp Not Emplo	Jones  Project  Required)  Corporation  Other (please spect)  Chimmel  Project  Corporation  Other (please spect)  Chimmel  Project  Chimmel  Project  Corporation  Other (please spect)  Chimmel  Project  Chimmel  Project  Corporation  Other (please spect)  Chimmel  Project  Corporation  Other (please spect)  Chimmel  Project  Chimmel  Corporation  Other (please spect)  Chimmel  Corporation  Chimmel  Corporation  Other (please spect)  Chimmel  Corporation  Corporation  Chimmel  Corporation  Corporation  Chimmel  Corporation  Corporation		✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)  07/12/2023	\$1,453.50  Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation ☐ Other (please spe	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name	Other (please spi					period
Beverly M	McAlilly				07/14/2023	\$200.00
Mailing Addre	ess					
1019 Fawn						
City, State, Zi	•					
	1S 38804-1923					
	<b>loyer(Required)</b> opi Methodist S	Senior Ser	rvices			
Occupation (I					Aggregate year-to-date	\$1,200.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Raleigh B	Byars				07/24/2023	\$25.00
Mailing Addre	ess					
48 County	Road 229U					
City, State, Zi						
Oxford, M						
Name of Emp	loyer (Required) eyed					
Occupation (I					Aggregate year-to-date	\$675.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp		<u> </u>		(Mo., Day, Year)	receipt this period
Full Name Agnes Gun	nd				07/06/2023	\$7,000.00
Agnes Gur					07/06/2023	\$7,000.00
	ess				07/06/2023	\$7,000.00
Agnes Gun Mailing Addre 765 Park City, State, Zi	ess Ave p Code	Į.			07/06/2023	\$7,000.00
Agnes Gur Mailing Addre 765 Park City, State, Zi New York,	ess Ave	l			07/06/2023	\$7,000.00
Agnes Gur Mailing Addre 765 Park City, State, Zi New York,	Ave  p Code  NY 10021-4254  loyer (Required)	ŀ			07/06/2023	\$7,000.00
Agnes Gur Mailing Addre 765 Park City, State, Zi New York, Name of Emp	Ave p Code NY 10021-4254 loyer (Required) byed	ł			Aggregate year-to-date	\$7,000.00 \$15,000.00
Agnes Gur Mailing Addre 765 Park City, State, Zi New York, Name of Emp Not Emplo	Ave p Code NY 10021-4254 loyer (Required) byed	PAC	✓ Individual	Loan	Aggregate year-to-date	\$15,000.00  Amount of each
Agnes Gur Mailing Addre 765 Park City, State, Zi New York, Name of Emp Not Emplo Occupation (I Retired	Poss Ave p Code NY 10021-4254  loyer (Required) byed  Required)	PAC	✓ Individual	Loan	Aggregate year-to-date	\$15,000.00
Agnes Gur Mailing Addre 765 Park City, State, Zi New York, Name of Emp Not Emplo Occupation (I Retired	PSS Ave p Code NY 10021-4254 Ployer (Required) Pyed Required)	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$15,000.00  Amount of each receipt this period
Agnes Gur Mailing Addre 765 Park City, State, Zi New York, Name of Emp Not Emplo Occupation (I Retired	Poss Ave p Code NY 10021-4254  loyer (Required) Dyed  Required)  Corporation  Other (please specific parts)	PAC	✓Individual	Loan	Aggregate year-to-date	\$15,000.00  Amount of each receipt this
Agnes Gur Mailing Addre 765 Park City, State, Zi New York, Name of Emp Not Emplo Occupation (I Retired Source:	Poss Ave p Code NY 10021-4254 loyer (Required) byed Required)  Corporation Other (please special)	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$15,000.00  Amount of each receipt this period
Agnes Gur Mailing Addre 765 Park City, State, Zi New York, Name of Emp Not Emplo Occupation (I Retired Source: Full Name Staci Mor Mailing Addre 6946 Weir City, State, Zi	Pass Ave p Code NY 10021-4254 Ployer (Required) Pyed Required) Corporation Other (please spectage) Panhandle Rd p Code	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$15,000.00  Amount of each receipt this period
Agnes Gur Mailing Addre 765 Park City, State, Zi New York, Name of Emp Not Emplo Occupation (I Retired Source: Full Name Staci Mor Mailing Addre 6946 Weir City, State, Zi Weir, MS	Poss Ave p Code NY 10021-4254 loyer (Required) byed Required)  Corporation Other (please species regan Pass Panhandle Rd p Code 39772	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$15,000.00  Amount of each receipt this period
Agnes Gur Mailing Addre 765 Park City, State, Zi New York, Name of Emp Not Emplo Occupation (I Retired Source: Full Name Staci Mor Mailing Addre 6946 Weir City, State, Zi Weir, MS Name of Emp	Poss Ave p Code NY 10021-4254  loyer (Required) Dyed  Required)  Corporation  Other (please species Panhandle Rd p Code 39772  loyer (Required)	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$15,000.00  Amount of each receipt this period
Agnes Gur Mailing Addre 765 Park City, State, Zi New York, Name of Emp Not Emplo Occupation (I Retired Source: Full Name Staci Mor Mailing Addre 6946 Weir City, State, Zi Weir, MS	Poss Ave p Code NY 10021-4254  loyer (Required) Dyed  Required)  Corporation  Other (please species Panhandle Rd p Code 39772  loyer (Required)	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$15,000.00  Amount of each receipt this period
Agnes Gur Mailing Addre 765 Park City, State, Zi New York, Name of Emp Not Emplo Occupation (I Retired Source: Full Name Staci Mor Mailing Addre 6946 Weir City, State, Zi Weir, MS Name of Emp	Poss Ave p Code NY 10021-4254  Poyed Required)  Corporation Other (please spectage)  Panhandle Rd p Code 39772  Poyed  Required)  Required)  Required  Required	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$15,000.00  Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation ☐ Other (please spec	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name	Other (please spec					period
John Jopl	ling				07/28/2023	\$1,000.00
Mailing Addre						
276 Santi						
City, State, Zi	p Code					
Biloxi, N	1S 39530-2946					
	loyer(Required) f for Justice					
Occupation (I	Required)				Aggregate year-to-date	\$1,450.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spec				(Mo., Day, Year)	receipt this
Full Name	Other (please spec				_ ( , , , , , , , , , , , , , , , , , ,	period
Joyce Lee	·ch				07/28/2023	\$25.00
Mailing Addre						
214 Main						
City, State, Zi						
-	38821-4218					
Name of Emp	loyer (Required)					
Occupation (I	Required)				Aggregate	\$500.00
Not Emplo					year-to-date	7500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	<u> </u>					receipt this
	Other (please spec	cify)			(Mo., Day, Year)	receipt this period
Full Name		cify)			(Mo., Day, Year)	
Carol Taf	ef ess	cify)			_	period
Carol Taf Mailing Addre	ess lle St	cify)			_	period
Carol Taf  Mailing Addre  1705 Myrt  City, State, Zi	ess tle St p Code	cify)			_	period
Carol Taf Mailing Addre 1705 Myrt City, State, Zi Jackson,	ess tle St p Code MS 39202-1336	cify)			_	period
Carol Taf Mailing Addre 1705 Myrt City, State, Zi Jackson,	ess tle St p Code MS 39202-1336  lloyer (Required)	cify)			_	period
Carol Taf Mailing Addre 1705 Myrt City, State, Zi Jackson, Name of Emp	ess tle St  p Code MS 39202-1336  bloyer (Required)  byed  Required)	cify)			_	period
Carol Taf  Mailing Addre 1705 Myrt  City, State, Zi Jackson,  Name of Emp Not Emplo  Occupation (I	ess tle St  p Code MS 39202-1336  bloyer (Required)  byed  Required)	PAC	✓Individual	Loan	Aggregate year-to-date  Date	\$200.00 \$480.00 Amount of each
Mailing Address 1705 Myrt City, State, Zi Jackson, Name of Emp Not Emplo Occupation (I Not Emplo	ess tle St p Code MS 39202-1336 cloyer (Required) byed Required)	□PAC	✓ Individual	Loan	Aggregate year-to-date	\$200.00 \$200.00 \$480.00
Carol Taf  Mailing Addre 1705 Myrt  City, State, Zi Jackson,  Name of Emp Not Emplo  Occupation (I Not Emplo  Source:	ess tle St p Code MS 39202-1336 bloyer (Required) byed Required) byed Corporation	□PAC	✓Individual	Loan	Aggregate year-to-date  Date	\$200.00 \$480.00  Amount of each receipt this
Carol Taf  Mailing Addre 1705 Myrt  City, State, Zi Jackson,  Name of Emp Not Emplo  Occupation (I Not Emplo  Source:	Eff  pss  tle St  p Code  MS 39202-1336  ployer (Required)  pyed  Corporation  Other (please spec	□PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$200.00 \$480.00  Amount of each receipt this period
Carol Taf  Mailing Addre 1705 Myrt  City, State, Zi Jackson,  Name of Emp Not Emplo  Occupation (I Not Emplo  Source:  Full Name Amelia Ha  Mailing Addre 1103 Twir  City, State, Zi	Eff  pss  cle St  p Code  MS 39202-1336  ployer (Required)  pyed  Required)  pyed  Corporation  Other (please spectare-Thomas  pss  n Gum Rd  p Code	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$200.00 \$480.00  Amount of each receipt this period
Carol Taf Mailing Addre 1705 Myrt City, State, Zi Jackson, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Amelia Ha Mailing Addre 1103 Twir City, State, Zi Starkvill	p Code MS 39202-1336 Ployer (Required) Pyed Corporation Other (please spectare) Pare-Thomas Piss Diagram Rd P Code Le, MS 39759-506	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$200.00 \$480.00  Amount of each receipt this period
Carol Taf Mailing Addre 1705 Myrt City, State, Zi Jackson, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Amelia Ha Mailing Addre 1103 Twir City, State, Zi Starkvill	p Corporation Corporation Other (please spectage) are-Thomas are MS 39759-506 cloyer (Required)	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$200.00 \$480.00  Amount of each receipt this period
Carol Taf  Mailing Addre 1705 Myrt  City, State, Zi Jackson, Name of Emp Not Emplo  Occupation (I Not Emplo  Source:  Full Name Amelia Ha  Mailing Addre 1103 Twir  City, State, Zi Starkvill  Name of Emp	Eff  ess  cle St  p Code  MS 39202-1336  cloyer (Required)  byed  Corporation  Other (please spectare-Thomas  ess  a Gum Rd  p Code  e, MS 39759-506  cloyer (Required)  byed  Required)	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$200.00 \$480.00  Amount of each receipt this period

Reporting Period

7/1/2023 **through** 

7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please sp	ecity)			— (Mo., Bay, Teal)	period
Full Name Will Alle	en				07/11/2023	\$250.00
Mailing Address 184 Lampt						
City, State, Zi	p Code					
	en, MS 39601-70	013				
Name of Emp	loyer (Required)					
Occupation (I	Required)				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp				(Mo., Day, Year)	receipt this period
Full Name					07/21/2023	\$25.00
Reilly Mo	orse				07/21/2023	723.00
Mailing Addre	ess					
929 Bridg	ge St					
City, State, Zi	•					
	MS 39507-3432	2				
Name of Emp	oloyer (Required) Oyed					
Occupation (I	Required)				Aggregate	\$1,175.00
Not Emplo	oyed				year-to-date	• •
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
					(Ma. Day Vaar)	receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name		ecify)			(Mo., Day, Year)	
Jean Fenw	vick	ecify)				period
	vick ess	ecify)				period
Jean Fenw Mailing Addre 208 S Mad	vick ess dison St	ecify)				period
Jean Fenw Mailing Addre 208 S Mad City, State, Zi	vick ess dison St					period
Jean Fenw Mailing Addre 208 S Mad City, State, Zi Kosciusko	vick pss dison St p Code					period
Jean Fenw Mailing Addre 208 S Mad City, State, Zi Kosciusko	vick ess dison St p Code o, MS 39090-394 lloyer (Required)					period
Jean Fenw Mailing Addre 208 S Mad City, State, Zi Kosciusko Name of Emp Not Emplo Occupation (I	vick ess dison St p Code p, MS 39090-394 eloyer (Required) eyed Required)					period
Jean Fenw Mailing Addre 208 S Mad City, State, Zi Kosciusko Name of Emp Not Emplo	vick ess dison St p Code p, MS 39090-394 eloyer (Required) eyed Required)		✓Individual	Loan	07/25/2023 Aggregate	\$100.00
Jean Fenw Mailing Addre 208 S Mac City, State, Zi Kosciusko Name of Emp Not Emplo Occupation (I Not Emplo	vick ess dison St p Code o, MS 39090-394 eloyer (Required) oyed Required) oyed	46 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date	\$1,325.00
Jean Fenw Mailing Addre 208 S Mac City, State, Zi Kosciusko Name of Emp Not Emplo Occupation (I Not Emplo	vick ess dison St p Code o, MS 39090-394 cloyer (Required) oyed Required) oyed Corporation	46 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,325.00  Amount of each receipt this period
Mailing Address 208 S Mac City, State, Zi Kosciusko Name of Emp Not Emplo Occupation (I Not Emplo	vick ess dison St p Code o, MS 39090-394 eloyer (Required) oyed Required) oyed Corporation Other (please sp	46 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date	\$1,325.00  Amount of each receipt this
Mailing Address 208 S Macc City, State, Zi Kosciusko Name of Emp Not Emplo Occupation (I Not Emplo Source:	vick ess dison St p Code p, MS 39090-394 eloyer (Required) eyed Corporation Other (please sp	46 □ <b>PAC</b>	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,325.00  Amount of each receipt this period
Mailing Address 208 S Macc City, State, Zi Kosciusko Name of Emplo Occupation (I Not Emplo Source: Full Name Sara Jack	vick ess dison St p Code p, MS 39090-394 eloyer (Required) eyed Corporation Other (please sp	46 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,325.00  Amount of each receipt this period
Mailing Address 208 S Made City, State, Zi Kosciuske Name of Emp Not Emple Occupation (I Not Emple Source: Full Name Sara Jack Mailing Address 104 Brist City, State, Zi	vick ess dison St p Code o, MS 39090-394 eloyer (Required) oyed  Corporation  Other (please sp ess tol Way	46 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,325.00  Amount of each receipt this period
Mailing Address 208 S Macc City, State, Zi Kosciusko Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Sara Jack Mailing Addres 104 Brist City, State, Zi Madison,	vick ess dison St p Code o, MS 39090-394 eloyer (Required) oyed  Corporation  Other (please sp ess col Way p Code	46 □ <b>PAC</b>	✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,325.00  Amount of each receipt this period
Mailing Address 208 S Macc City, State, Zi Kosciusko Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Sara Jack Mailing Addres 104 Brist City, State, Zi Madison,	vick  pss dison St  p Code  p, MS 39090-394  ployer (Required)  pyed  Corporation  Other (please sp  sson  pss col Way  p Code  MS 39110-5029	46 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,325.00  Amount of each receipt this period
Mailing Address 208 S Macc City, State, Zi Kosciusko Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Sara Jack Mailing Addres 104 Brist City, State, Zi Madison, Name of Emp	vick ess dison St p Code p, MS 39090-394 ployer (Required) pyed Corporation Other (please sp ess col Way p Code MS 39110-5029 ployer (Required)	46 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,325.00  Amount of each receipt this period

Reporting Period 7/1/2023

/1/2023 **through** 

7/29/2023

Source:	Corporation	PAC ✓ Individual	Loan	Date	Amount of each receipt this
	Other (please spec	ify)		(Mo., Day, Year)	period
Full Name				07/08/2023	\$25.00
David Kay					
Mailing Addre 123 Notti					
City, State, Zip					
	NY 14216-3504				
Name of Empl	oyer (Required)				
Universit	y at Buffalo				
Occupation (F	equired)			Aggregate	\$225.00
Professor				year-to-date	,
Source:	Corporation	PAC ✓ Individual	Loan	Date	Amount of each
	Other (please spec	ify)		(Mo., Day, Year)	receipt this period
Full Name				07/28/2023	\$25.00
Elise Gil	lespie				720.00
Mailing Addre					
1013 S La					
City, State, Zip	<b>Code</b> S 38655-4739				
	oyer (Required)				
-	y of Mississipp	i			
Occupation (F				Aggregate	¢275 00
	oordinator			year-to-date	\$275.00
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
	Other (please spec	ify)		(Mo., Day, Year)	receipt this period
Full Name	n l. a			07/29/2023	\$600.00
Janet Sha					
Mailing Addre 5115 Wayn					
City, State, Zip					
City, State, Lip					
Jackson,	Code				
Jackson,	O Code MS 39211-4439 Oyer (Required)				
Jackson, Name of Empl	o Code MS 39211-4439 oyer (Required) yed lequired)			Aggregate year-to-date	\$625.00
Jackson, Name of Emplo Not Emplo Occupation (F	o Code MS 39211-4439 oyer (Required) yed lequired)	<b>□PAC</b> ✓Individual	Loan		\$625.00  Amount of each
Jackson, Name of Emplo Not Emplo Occupation (F Not Emplo	o Code MS 39211-4439 oyer (Required) yed lequired) yed		Loan	year-to-date	
Jackson, Name of Emplo Not Emplo Occupation (F Not Emplo	o Code  MS 39211-4439  oyer (Required)  yed  equired)  yed  Corporation  Other (please spec		Loan	year-to-date  Date	Amount of each receipt this
Jackson, Name of Emplo Not Emplo Occupation (F Not Emplo Source:	o Code  MS 39211-4439  oyer (Required)  yed  dequired)  yed  Corporation  Other (please special collins		Loan	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Jackson, Name of Empl Not Emplo Occupation (F Not Emplo Source: Full Name Michael C	o Code  MS 39211-4439  oyer (Required)  yed  dequired)  yed  Corporation  Other (please special sections)		Loan	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Jackson, Name of Emplo Not Emplo Occupation (F Not Emplo Source: Full Name Michael C Mailing Addre 1826 Ray City, State, Zi	o Code  MS 39211-4439  oyer (Required)  yed  required)  yed  Corporation  Other (please special section)  olins  ss  St  o Code	ify)	Loan	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Jackson, Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Michael C Mailing Addre 1826 Ray City, State, Zig	o Code MS 39211-4439 oyer (Required) yed lequired) yed Corporation Other (please spectors) ss St O Code ings, MS 39564-	ify)	Loan	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Jackson, Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Michael C Mailing Addre 1826 Ray City, State, Zig Ocean Spr Name of Empl	o Code MS 39211-4439 oyer (Required) yed lequired) yed Corporation Other (please spector) ss St O Code ings, MS 39564- oyer (Required)	ify)	Loan	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Jackson, Name of Emplo Not Emplo Occupation (F Not Emplo Source:  Full Name Michael C Mailing Addre 1826 Ray City, State, Zig	o Code  MS 39211-4439  oyer (Required)  yed  cequired)  yed  Corporation  Other (please spectors)  olins  ss  St  o Code  ings, MS 39564-  oyer (Required)  yed	ify)	Loan	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Brandon Presle	эy
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara F	anki n			07/14/2023	\$50.00
Mailing Addre				-	
PO Box 21					
City, State, Zi	•			1	
	MS 39044-0219				
Not Emplo	oloyer (Required) Digyed				
Occupation (Not Emplo				Aggregate year-to-date	\$675.00
Source:	Corporation	PAC Individual	Loan	Date	Amount of each
	Other (please sp	pecify)		(Mo., Day, Year)	receipt this period
Full Name Gratia Ka				07/15/2023	\$25.00
Mailing Address 417 Chapi					
City, State, Zi	•			-	
	Le, MS 39759-2	620 —————			
Name of Emp	oloyer (Required) byed				
Occupation (Retired	Required)			Aggregate year-to-date	\$490.00
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
	Other (please sp	pecify)		(Mo., Day, Year)	receipt this period
Full Name John Foy				07/16/2023	\$25.00
Mailing Addre				-	
City, State, Zi				-	
Tupelo, N	AS 38804-9774				
Not Emplo	oloyer (Required) Dyed			-	
Occupation (I	equired)			Aggregate year-to-date	\$225.00
Occupation (	equired)	PAC ☑Individual	□Loan		Amount of each
Occupation (Not Emplo	Required)		Loan	year-to-date	
Occupation (I	Required)  oyed  Corporation  Other (please sp		<b>□</b> Loan	year-to-date Date	Amount of each receipt this
Occupation (I Not Emplo Source: Full Name Kathi Ton	Required)  Dyed  Corporation  Other (please spansky		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Not Emplo Source:  Full Name Kathi Ton Mailing Addre	Required)  Dyed  Corporation  Other (please spansky		Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Occupation (I Not Emplo Source:  Full Name Kathi Ton Mailing Addre 1018 Mort City, State, Zi	Required) Dyed Corporation Other (please spansky ess Con Rounds p Code	pecify)	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi	Required) Dyed Corporation Other (please spansky  ess con Rounds	pecify)	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi	Required)  Oyed  Corporation  Other (please spansky ess con Rounds ip Code ny, MS 38652-66  oloyer (Required)	pecify)	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Cocupation (INOT Employ  Source:  Full Name Kathi Ton  Mailing Addre 1018 Mort  City, State, Zi New Albar  Name of Emp	Required) Dyed Corporation Other (please spansky ess Con Rounds p Code ny, MS 38652-69 cloyer (Required) Dyed Required)	pecify)	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

					. •	
Source:	Corporation Other (please spe	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael F	. Smith				07/11/2023	\$20.00
Mailing Addre	ess					
City, State, Zi	o Code					
	S 38655-5178					
Name of Emp	loyer (Required) oyed					
Occupation (F	Required)				Aggregate year-to-date	\$725.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe		_		(Mo., Day, Year)	receipt this period
Full Name Carol Bur	nett				07/13/2023	\$250.00
Mailing Addre	ess Beach Dr					
City, State, Zi	p Code					
Ocean Spr	ings, MS 39564	-4941				
-	loyer(Required) come Child Car	e Initiat	ive			
Occupation (F					Aggregate	\$250.00
Executive	Director				year-to-date	
Source:	Corporation Other (please spe	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name						period
Greta Pre	sley				07/23/2023	\$50.10
Mailing Addre	ss				1	
182 Veron						
City, State, Zi	Code , MS 38858-600	4				
Name of Emp	loyer (Required)					
HCA Healt	hcare					
Occupation (F	• '				Aggregate year-to-date	\$252.40
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please spe	ecify)			(Mo., Day, Year)	period
Full Name Meghan No	rris				07/06/2023	\$1,000.00
Mailing Addre					1	
111 Charl						
City, State, Zi						
Madison, Name of Emp	MS 39110-4537 loyer (Required)				-	
Madison,	D Code MS 39110-4537 loyer (Required) 1 Center Required)				Aggregate year-to-date	\$1,000.00

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thorne Bu	-+1				07/27/2023	\$100.00
Mailing Address 3942 Oakı						
City, State, Zi						
Jackson,	MS 39216-3411					
Name of Emp	oloyer (Required) oyed					
Occupation (					Aggregate year-to-date	\$470.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name David Wil	lliams				07/27/2023	\$25.00
Mailing Addre						
122 Madis						
• .	arg, MS 39402-8	8339				
Name of Emp	ployer (Required) Helicopters					
Occupation (					Aggregate	\$625.00
Pilot	,				year-to-date	3023.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name Kathryn S	Stockett				07/29/2023	\$1,000.00
Mailing Addre						
	ngton Rd NE					
City, State, Zi Atlanta,	ip Code GA 30309-1546					
Name of Emp	oloyer (Required) Loyed					
Occupation (						
Author	Required)				Aggregate year-to-date	\$1,000.00
Source:	Required)	PAC	✓Individual	Loan	year-to-date Date	Amount of each
	_		<b>✓</b> Individual	Loan	year-to-date	
Source:	Corporation Other (please sp		✓Individual	Loan	year-to-date Date	Amount of each receipt this
Source: Full Name Suzanne F	Corporation Other (please sp		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Source:	Corporation Other (please sp		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Source:  Full Name Suzanne F Mailing Addre 206 Wood City, State, Zi	Corporation Other (please sp Robinson ess St ip Code	Decify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne F Mailing Addre 206 Wood City, State, Zi Water Val	Corporation Other (please specific please spec	Decify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne F Mailing Addre 206 Wood City, State, Zi Water Val	Corporation Other (please specific code lley, MS 38965-	Decify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne F Mailing Addre 206 Wood City, State, Zi Water Val	Corporation Other (please specific please spec	Decify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: ☐ Corporation ☐ PAC ✓ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ricky Johnston	07/17/2023	\$250.00
Mailing Address 419 3rd St S		
City, State, Zip Code		
Columbus, MS 39701-5632		
Name of Employer (Required) Gastroenterology Associates of Columbus		
Occupation (Required) Gastroenterologist	Aggregate year-to-date	\$350.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Mary H. Waggoner	07/27/2023	\$250.00
Mailing Address		
405 4th St S		
City, State, Zip Code Columbus, MS 39701-6701		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Oneal	07/28/2023	\$100.00
Mailing Address		
4044 - 1 7 1		
1011 Adeline St		
1011 Adeline St  City, State, Zip Code  Hattiesburg, MS 39401-5022		
City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required)		
City, State, Zip Code Hattiesburg, MS 39401-5022	Aggregate year-to-date	\$1,601.00
City, State, Zip Code Hattiesburg, MS 39401-5022  Name of Employer (Required) Hattiesburg Clinic  Occupation (Required)		Amount of each
City, State, Zip Code Hattiesburg, MS 39401-5022  Name of Employer (Required) Hattiesburg Clinic  Occupation (Required) Physician	year-to-date	
City, State, Zip Code Hattiesburg, MS 39401-5022  Name of Employer (Required) Hattiesburg Clinic  Occupation (Required) Physician  Source: Corporation PAC Individual Loan	year-to-date Date	Amount of each receipt this
City, State, Zip Code Hattiesburg, MS 39401-5022  Name of Employer (Required) Hattiesburg Clinic  Occupation (Required) Physician  Source: Corporation PAC Individual Loan Other (please specify)	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Code Hattiesburg, MS 39401-5022  Name of Employer (Required) Hattiesburg Clinic  Occupation (Required) Physician  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Michael B. McMahan  Mailing Address 46 Longwood Dr  City, State, Zip Code	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Code Hattiesburg, MS 39401-5022  Name of Employer (Required) Hattiesburg Clinic  Occupation (Required) Physician  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Michael B. McMahan  Mailing Address 46 Longwood Dr  City, State, Zip Code Hattiesburg, MS 39402-3083	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zip Code Hattiesburg, MS 39401-5022  Name of Employer (Required) Hattiesburg Clinic  Occupation (Required) Physician  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Michael B. McMahan  Mailing Address 46 Longwood Dr  City, State, Zip Code	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

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Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret	Thomas				07/11/2023	\$10.00
Mailing Addre						
153 Timbe						
City, State, Zi	•	2222				
	arg, MS 39401-8 Noyer (Required)	8209				
Not Emplo						
Occupation (Not Emplo					Aggregate year-to-date	\$417.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Robert Ra	aben				07/13/2023	\$250.00
Mailing Addre						
213 E St						
City, State, Zi	•					
	on, DC 20002-49	922				
The Raber	oloyer (Required) n Group					
Occupation (I	Required)				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Mary Mill	ler				07/14/2023	\$100.00
Mailing Addre	ess					
510 E 86t						
City, State, Zi	i <b>p Code</b> . NY 10028-7507	7				
	loyer (Required)					
Not Emplo	oyed					
Occupation (Not Emplo	• •				Aggregate year-to-date	\$525.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Edson Gri					07/06/2023	\$5.00
	iswold					
Mailing Addre	ess					
1699 S Tr	ess centon St					
1699 S Tr	ess centon St					
City, State, Zin Denver, Consume of Emp	pess renton St p Code CO 80231-5602					
1699 S Tr City, State, Zi Denver, C	pess renton St p Code CO 80231-5602					
City, State, Zin Denver, Consume of Emp	pess centon St pp Code CO 80231-5602 cloyer (Required) byed Required)				Aggregate year-to-date	\$307.50

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please spe	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name				07/17/2022	period
Roshan Pa	itel			07/17/2023	\$1,000.00
Mailing Addre					
114 Quay					
City, State, Zi		0.0			
	.a, VA 22314-26 loyer (Required)				
50 State					
Occupation (F	Required)			Aggregate year-to-date	\$1,000.00
Source:	Corporation	PAC Individual	Loan	Date	Amount of each
	Other (please spe	ecify)		(Mo., Day, Year)	receipt this period
Full Name				07/18/2023	\$100.00
Patrick F	alkner			07/10/2023	7100.00
Mailing Addre					
	Acres Rd				
City, State, Zi					
	IS 38804-2945				
Name of Emp	loyer (Required) yed				
Occupation (F	Required)			Aggregate year-to-date	\$700.00
Source:	Corneration	PAC ✓ Individual		Date	Amount of each
Source.	Corporation		Loan	(Mo., Day, Year)	receipt this
	Other (please spe	есіту)			period
Full Name Wilson Go		эспу)		07/29/2023	\$100.00
Wilson Go	olden	ecity)		07/29/2023	
Wilson Go Mailing Addre	olden			07/29/2023	
Wilson Go Mailing Addre	olden PSS Le Magnolia Cha			07/29/2023	
Wilson Go Mailing Addre 3136 Whit City, State, Zi	olden PSS Le Magnolia Cha	se SW		07/29/2023	
Wilson Go Mailing Addre 3136 Whit City, State, Zi Gainesvil	elden  ess  e Magnolia Cha  p Code  le, GA 30504-5  loyer (Required)	se SW		07/29/2023	
Wilson Go Mailing Addre 3136 Whit City, State, Zi Gainesvil Name of Emp Not Emplo	elden ess Le Magnolia Cha p Code le, GA 30504-5 loyer (Required) eyed	se SW			\$100.00
Wilson Go Mailing Addre 3136 Whit City, State, Zi Gainesvil Name of Emp	elden ess Le Magnolia Cha p Code Le, GA 30504-5 loyer (Required) eyed Required)	se SW		Aggregate year-to-date	
Wilson Go Mailing Addre 3136 Whit City, State, Zi Gainesvil Name of Emp Not Emplo Occupation (F	elden ess Le Magnolia Cha p Code Le, GA 30504-5 loyer (Required) eyed Required)	se SW	□Loan	Aggregate year-to-date	\$1,235.00  Amount of each
Wilson Go Mailing Addre 3136 Whit City, State, Zi Gainesvil Name of Emp Not Emplo Occupation (F Not Emplo	plden pss e Magnolia Cha p Code le, GA 30504-5 loyer (Required) pyed Required)	se SW 587	Loan	Aggregate year-to-date	\$100.00 \$1,235.00
Wilson Go Mailing Addre 3136 Whit City, State, Zi Gainesvil Name of Emp Not Emplo Occupation (F Not Emplo	plden  pess  de Magnolia Cha  p Code  le, GA 30504-5  loyer (Required)  pyed    Corporation    Other (please special)	se SW 587	Loan	Aggregate year-to-date	\$1,235.00  Amount of each receipt this
Wilson Go Mailing Addre 3136 Whit City, State, Zig Gainesvil Name of Emp Not Emplo Occupation (F Not Emplo Source:	elden ess de Magnolia Cha p Code de, GA 30504-5 loyer (Required) eyed Corporation Other (please spec	se SW 587	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,235.00  Amount of each receipt this period
Wilson Go Mailing Addre 3136 Whit City, State, Zi Gainesvil Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name Lora Trav	elden ess de Magnolia Cha p Code de, GA 30504-5 loyer (Required) eyed Corporation Other (please specials)	se SW 587	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,235.00  Amount of each receipt this period
Wilson Go Mailing Addre 3136 Whit City, State, Zig Gainesvil Name of Emp Not Emplo Occupation (F Not Emplo Source: Full Name Lora Trav Mailing Addre 2668 Beac City, State, Zig	clden  cless cle Magnolia Cha cless cle Magnolia Cha cless c	se SW 587	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,235.00  Amount of each receipt this period
Wilson Go Mailing Addre 3136 Whit City, State, Zi Gainesvil Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name Lora Trav Mailing Addre 2668 Beac City, State, Zi Biloxi, M	plden  pess  The Magnolia Cha  p Code  The Telegraph (Required)  The Magnolia Cha  p Code  The Telegraph (Required)  The T	se SW 587	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,235.00  Amount of each receipt this period
Wilson Go Mailing Addre 3136 Whit City, State, Zi Gainesvil Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name Lora Trav Mailing Addre 2668 Beac City, State, Zi Biloxi, M	plden pss de Magnolia Cha p Code le, GA 30504-5 loyer (Required) pyed Corporation Other (please specials ch Blvd p Code IS 39531-4547 loyer (Required)	se SW 587	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,235.00  Amount of each receipt this period
Wilson Go Mailing Addre 3136 Whit City, State, Zi Gainesvil Name of Emp Not Emplo Occupation (F Not Emplo Source:  Full Name Lora Trav Mailing Addre 2668 Beac City, State, Zi Biloxi, M Name of Emp	lden  less le Magnolia Cha p Code le, GA 30504-5 loyer (Required) loyed  Corporation  Other (please specials  ch Blvd p Code ls 39531-4547 loyer (Required) loyed	se SW 587	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$1,235.00  Amount of each receipt this period

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Source:	Corporation	PAC	✓ Individual	Loan	Date (Ma. Day Yaar)	Amount of each receipt this
	Other (please spe	ecify)			(Mo., Day, Year)	period
Full Name					07/13/2023	\$50.00
Joyce Lee	ch					,
Mailing Addre						
214 Main						
City, State, Zi						
	38821-4218					
Name of Emp	loyer (Required) yed					
Occupation (F	• •				Aggregate	\$500.00
Not Emplo	yed				year-to-date	
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/15/2023	\$34.00
Janice Ja	ckson					,
Mailing Addre						
113 Green	s View Dr					
City, State, Zi						
Madison,	MS 39110-8050					
Name of Emp	loyer (Required) oyed					
Occupation (F	Required)				Aggregate	\$977.00
Attorney	toquii ou)				year-to-date	\$977.00
Courses	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
Source:	Corporation	, 70	v illulviuuai	Loan		Amount of each
	Other (please spe	_	V III al viadai	Louii	(Mo., Day, Year)	receipt this period
Full Name	Other (please spe	_	V marviduai			receipt this
Full Name Thomas Li	Other (please spe	_	Villulvidual		(Mo., Day, Year)	receipt this period
Full Name Thomas Li Mailing Addre	Other (please spennenberger	_	v individual		(Mo., Day, Year)	receipt this period
Full Name Thomas Li Mailing Addre 2584 Rue	Other (please spennenberger ess	_	v individual		(Mo., Day, Year)	receipt this period
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi	nenberger ss Palafox p Code	_	v individual		(Mo., Day, Year)	receipt this period
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi Biloxi, M	nenberger Palafox p Code IS 39531-3733	_	v individual		(Mo., Day, Year)	receipt this period
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi Biloxi, M	nenberger ss Palafox p Code IS 39531-3733 loyer (Required)	_	v individual		(Mo., Day, Year)	receipt this period
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi Biloxi, M Name of Emp	nenberger ss Palafox p Code IS 39531-3733 loyer (Required)	_	v individual		(Mo., Day, Year)	receipt this period \$200.00
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi Biloxi, M	nenberger ss Palafox p Code IS 39531-3733 loyer (Required)	_	v individual		(Mo., Day, Year) 07/18/2023	receipt this period
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi Biloxi, M Name of Emp Not Emplo	nenberger ss Palafox p Code IS 39531-3733 loyer (Required) yed Required)	PAC	✓ Individual	Loan	(Mo., Day, Year)  07/18/2023  Aggregate year-to-date  Date	receipt this period \$200.00
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi Biloxi, M Name of Emp Not Emplo Occupation (F	nenberger sss Palafox p Code IS 39531-3733 loyer (Required) yed Required)	PAC			(Mo., Day, Year)  07/18/2023  Aggregate year-to-date	\$200.00 \$300.00
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi Biloxi, M Name of Emp Not Emplo Occupation (F	nenberger sss Palafox p Code (S 39531-3733) loyer (Required) yed Required)  Corporation Other (please specific	PAC			(Mo., Day, Year)  07/18/2023  Aggregate year-to-date  Date	\$200.00 \$300.00  Amount of each receipt this
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi Biloxi, M Name of Emp Not Emplo Occupation (F Retired Source: Full Name Edward F.	nenberger  ss Palafox p Code IS 39531-3733  loyer (Required) yed  Required)  Corporation  Other (please specified)	PAC			Aggregate year-to-date  Date (Mo., Day, Year)	\$200.00 \$300.00  Amount of each receipt this period
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi Biloxi, M Name of Emp Not Emplo Occupation (F Retired Source: Full Name Edward F. Mailing Addre	nenberger  ss Palafox p Code IS 39531-3733  loyer (Required) yed  Required)  Corporation  Other (please specified)	PAC			Aggregate year-to-date  Date (Mo., Day, Year)	\$200.00 \$300.00  Amount of each receipt this period
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi Biloxi, M Name of Emp Not Emplo Occupation (F Retired Source: Full Name Edward F. Mailing Addre 2559 Rive City, State, Zi	nenberger  ss Palafox p Code IS 39531-3733  loyer (Required) yed  Required)  Corporation  Other (please specials of the policy of the place blvd of the p Code	PAC			Aggregate year-to-date  Date (Mo., Day, Year)	\$200.00 \$300.00  Amount of each receipt this period
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi Biloxi, M Name of Emp Not Emplo Occupation (F Retired Source: Full Name Edward F. Mailing Addre 2559 Rive City, State, Zi Biloxi, M	nenberger  sss Palafox p Code (S 39531-3733) loyer (Required) yed  Corporation Other (please specially spe	PAC			Aggregate year-to-date  Date (Mo., Day, Year)	\$200.00 \$300.00  Amount of each receipt this period
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi Biloxi, M Name of Emp Not Emplo Occupation (F Retired Source: Full Name Edward F. Mailing Addre 2559 Rive City, State, Zi Biloxi, M	nenberger  ss Palafox Palafox Palafox Palafox Palafox Code S 39531-3733  Required)  Corporation Corporation Donovan  ss r Place Blvd P Code S 39531-2752  Required)	PAC			Aggregate year-to-date  Date (Mo., Day, Year)	\$200.00 \$300.00  Amount of each receipt this period
Full Name Thomas Li Mailing Addre 2584 Rue City, State, Zi Biloxi, M Name of Emp Not Emplo Occupation (F Retired Source: Full Name Edward F. Mailing Addre 2559 Rive City, State, Zi Biloxi, M Name of Emp	nenberger  ss Palafox p Code IS 39531-3733  loyer (Required) yed  Required)  Corporation  Other (please special specia	PAC			Aggregate year-to-date  Date (Mo., Day, Year)	\$200.00 \$300.00  Amount of each receipt this period

Name of Candidate or Committee Brandon Presle	эy
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Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Fel	ldman				07/28/2023	\$250.00
Mailing Addre						
915 Gille						
City, State, Z	•					
	MS 39202-1717 Dloyer (Required)					
Not Emplo						
Occupation (	Required)				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name George Jo	ordan				07/03/2023	\$2,500.00
Mailing Addr	ess					
1087 Augu						
City, State, Z	i <b>p Code</b> 4S 38655-6187					
	oloyer (Required)					
•	otels & Resorts	S				
Occupation (					Aggregate year-to-date	\$7,001.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name John C. H	Henegan				07/24/2023	\$1,000.00
Mailing Addre						
City, State, Z						
-	MS 39211-6714					
Name of Emplo	oloyer (Required) Dyed					
Occupation (	Required)				Aggregate year-to-date	\$2,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Michael (	Collins				07/15/2023	\$100.00
Mailing Addre						
City, State, Z						
	ings, MS 3956	4-2930				
	oloyer (Required)					
Not Emplo						
Occupation (					Aggregate year-to-date	\$650.00
MOC Embro	<u> </u>					

Reporting Period 7/1/2023

1/2023 **through** 

7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please sp	ecify)			(WIO., Day, Teal)	period
Full Name Ron Colem	nan				07/06/2023	\$25.00
Mailing Address 316 Quail	ess Creek Dr					
City, State, Zi						
	IS 38655-6108					
	loyer (Required)					
Not Emplo	yed					
Occupation (I					Aggregate year-to-date	\$335.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
oource.					(Mo., Day, Year)	receipt this
	Other (please sp	еспу)				period
Full Name David Boo	onin				07/18/2023	\$100.00
Mailing Addre	ess					
203 River						
City, State, Zi	p Code					
Swarthmor	ce, PA 19081-12	217				
Name of Emp	loyer (Required)					
					Ammonoto	
Occupation (I Public Ut	cility Planner	and Econo	omist		Aggregate year-to-date	\$450.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name		ecify)			(Mo., Day, Year) 07/29/2023	•
Raleigh E	Byars	ecify)				period
Raleigh E	Byars ess	ecify)				period
Raleigh E	Byars PSS 7 Road 229U	ecify)				period
Mailing Address 48 County	Byars PSS Road 229U P Code	ecify)				period
Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M Name of Emp	Byars Poss Road 229U P Code US 38655 Royer (Required)	ecify)				period
Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M	Byars Poss Road 229U P Code US 38655 Royer (Required)	ecify)				period
Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M Name of Emp	Required)	ecify)				period
Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M Name of Emplo Occupation (I	Required)	ecify)	✓ Individual	Loan	07/29/2023 Aggregate	\$25.00 \$675.00 Amount of each
Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo	Byars  Poss  Road 229U  P Code  IS 38655  Required)  Dyed  Required)	PAC	✓Individual	Loan	Aggregate year-to-date	\$25.00 \$675.00
Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo Source:	Byars  Byars  Road 229U  p Code  4S 38655  Bloyer (Required)  byed  Corporation	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$675.00 Amount of each receipt this period
Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo	Byars  Byars  Road 229U  p Code  4S 38655  Bloyer (Required)  byed  Corporation	PAC	✓Individual	Loan	Aggregate year-to-date  Date	\$25.00 \$675.00 Amount of each receipt this
Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Don Keim	Byars  Byars  Road 229U  p Code  4S 38655  Bloyer (Required)  byed  Corporation  Other (please speeds	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$675.00 Amount of each receipt this period
Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Don Keim Mailing Addre 202 S Dee	Byars  Poss  Road 229U  p Code  Is 38655  Required)  Dyed  Corporation  Other (please sp	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$675.00 Amount of each receipt this period
Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Don Keim Mailing Addre 202 S Dee City, State, Zi	Byars  Poss  Road 229U  p Code  Is 38655  Required)  Dyed  Corporation  Other (please sp	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$675.00 Amount of each receipt this period
Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Don Keim Mailing Addre 202 S Dee City, State, Zi Leland, M	Byars  Poss  Road 229U  p Code  Is 38655  Required)  Dyed  Corporation  Other (please species or Creek Dr W  p Code	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$675.00 Amount of each receipt this period
Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Don Keim Mailing Addre 202 S Dee City, State, Zi Leland, M	Required)  Other (please sports of the product of t	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$675.00 Amount of each receipt this period
Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Don Keim Mailing Addre 202 S Dee City, State, Zi Leland, M Name of Emp	Required)  Other (please sport of the content of th	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$675.00 Amount of each receipt this period

**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please spec	PAC Individ	dual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Allan Ben	alen			07/13/2023	\$250.00
Mailing Addre					
Ū	est Hill Dr				
City, State, Zi <sub>l</sub>	p Code				
Columbus,	MS 39701-3530				
Name of Emplo	loyer (Required) yed				
Occupation (F				Aggregate year-to-date	\$1,050.00
Source:	Corporation	PAC Indivi	dual Loan	Date	Amount of each
	Other (please spec	ify)		(Mo., Day, Year)	receipt this period
<b>Full Name</b> Barbara R	ankin			07/23/2023	\$50.00
Mailing Addre					
City, State, Zi	p Code				
	MS 39044-0219				
Name of Emplo	loyer (Required) yed				
Occupation (F				Aggregate year-to-date	\$675.00
Source:	Corporation	PAC Indivi	dual Loan	Date	Amount of each receipt this
	Other Inlesse spec	ify)		(Mo., Day, Year)	period
	Other (please spec	,			periou
<b>Full Name</b> Judi Leak		,		07/15/2023	\$25.00
Judi Leak  Mailing Addre	ee ess	,, 		07/15/2023	<del>`</del>
Judi Leak  Mailing Addre  5645 Trac	eside Dr			07/15/2023	<del>`</del>
Judi Leak Mailing Addre 5645 Trac City, State, Zij Nashville	ess eside Dr p Code , TN 37221-4093			07/15/2023	<del>`</del>
Judi Leak Mailing Addre 5645 Trac City, State, Zij Nashville Name of Empl	ess eside Dr p Code , TN 37221-4093	,,		07/15/2023	<del>`</del>
Judi Leak Mailing Addre 5645 Trac City, State, Zin Nashville Name of Emplo Occupation (F	ess eside Dr p Code , TN 37221-4093 loyer (Required) yed Required)			Aggregate year-to-date	<del>`</del>
Judi Leak Mailing Addre 5645 Trac City, State, Zin Nashville Name of Emplo Occupation (F	ess eside Dr p Code , TN 37221-4093 loyer (Required) yed Required)	PAC ✓ Indivi	dual □Loan	Aggregate year-to-date	\$25.00 \$275.00 Amount of each
Judi Leak Mailing Addre 5645 Trac City, State, Zig Nashville Name of Emplo Not Emplo Occupation (F Not Emplo	ess eside Dr p Code r, TN 37221-4093 loyer (Required) yed Required)	PAC Individ	dual □Loan	Aggregate year-to-date	\$25.00 \$275.00
Judi Leak Mailing Addre 5645 Trac City, State, Zig Nashville Name of Emplo Not Emplo Occupation (F Not Emplo	ess eside Dr p Code r, TN 37221-4093 loyer (Required) yed Required) yed Corporation Other (please spec	PAC Individ	dual □Loan	Aggregate year-to-date	\$25.00 \$275.00 Amount of each receipt this
Judi Leak Mailing Addre 5645 Trac City, State, Zig Nashville Name of Emplo Occupation (F Not Emplo Source: Full Name Alec Bash	ee ess eeside Dr p Code r, TN 37221-4093 loyer (Required) eyed Corporation Other (please spec	PAC Individ	dual □Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$275.00  Amount of each receipt this period
Judi Leak  Mailing Addre 5645 Trac  City, State, Zij Nashville Name of Empl Not Emplo  Occupation (F Not Emplo  Source:  Full Name Alec Bash  Mailing Addre 155 Jacks  City, State, Zij	ee ess eside Dr p Code r, TN 37221-4093  loyer (Required) eyed Corporation Other (please spec	□PAC ☑Individ	dualLoan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$275.00  Amount of each receipt this period
Judi Leak  Mailing Addre 5645 Trac  City, State, Zin Nashville  Name of Emplo Occupation (F Not Emplo  Source:  Full Name Alec Bash  Mailing Addre 155 Jacks  City, State, Zin San Franc  Name of Emplo	ess eside Dr p Code r, TN 37221-4093 loyer (Required) yed Corporation Other (please spec	□PAC ☑Individ	dual □Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$275.00  Amount of each receipt this period
Judi Leak  Mailing Addre 5645 Trac  City, State, Zij Nashville  Name of Emplo Not Emplo  Occupation (F Not Emplo  Source:  Full Name Alec Bash  Mailing Addre 155 Jacks  City, State, Zij San Franc	ess eside Dr p Code r, TN 37221-4093 loyer (Required) yed Corporation Other (please spec	□PAC ☑Individ	dual Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$275.00  Amount of each receipt this period
Judi Leak  Mailing Addre 5645 Trac  City, State, Zin Nashville  Name of Emplo Occupation (F Not Emplo  Source:  Full Name Alec Bash  Mailing Addre 155 Jacks  City, State, Zin San Franc  Name of Emplo	ess eside Dr p Code r, TN 37221-4093 loyer (Required) yed Corporation Other (please spec	□PAC ☑Individ	dual	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$275.00  Amount of each receipt this period

Name of Candidate or Committee Brandon Presle	эy
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name						period
Robert Sa	ılmon				07/27/2023	\$500.00
Mailing Addre	ess					
1068 Fact						
City, State, Zi	•					
	on, MS 38921-66	620				
Name of Emp	loyer (Required) ·Shoppe					
Occupation (I	• •				Aggregate year-to-date	\$2,500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Susan C.	Watkins				07/18/2023	\$1,000.00
Mailing Addre	ess					
2 Boone I	or N					
City, State, Zi						
	MS 38632-6549	9				
Name of Emp	loyer (Required) eyed					
Occupation (I	Required)				Aggregate year-to-date	\$1,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp				(Mo., Day, Year)	receipt this period
Full Name Connie M.	Moran				07/28/2023	\$100.00
Mailing Addre	vee					
	ngton Ave					
City, State, Zi	ngton Ave	4-4626				
City, State, Zi	ngton Ave p Code rings, MS 39564	4-4626				
City, State, Zi	ngton Ave p Code rings, MS 39564 loyer (Required)	4-4626				
Occupation (I	ngton Ave p Code rings, MS 39564 loyer (Required) ryed Required)	4-4626			Aggregate year-to-date	\$225.00
Ocean Spr Name of Emp Not Emplo	ngton Ave p Code rings, MS 39564 loyer (Required) ryed Required)	4-4626 □PAC	✓Individual	Loan		Amount of each
City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (I Not Emplo	ngton Ave p Code rings, MS 39564 loyer (Required) byed Required) byed	PAC	✓Individual	Loan	year-to-date	
City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (I Not Emplo	ngton Ave p Code rings, MS 39564 loyer (Required) byed Required) byed Corporation Other (please sp	PAC	✓Individual	Loan	year-to-date Date	Amount of each receipt this
City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Lydia Qua Mailing Addre	ngton Ave p Code rings, MS 39564 loyer (Required) byed Corporation Other (please sp	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Lydia Qua Mailing Addre 1016 Loui	ngton Ave p Code rings, MS 39564 loyer (Required) byed Corporation Other (please sp arles ess sville St	PAC	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Lydia Qua Mailing Addre 1016 Loui City, State, Zi	ngton Ave p Code rings, MS 39564 loyer (Required) byed Corporation Other (please sp arles ess sville St	PAC pecify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Lydia Qua Mailing Addre 1016 Loui City, State, Zi Starkvill Name of Emp	ngton Ave p Code rings, MS 39564 loyer (Required) byed Corporation Other (please sp arles ess sville St p Code e, MS 39759-39 loyer (Required)	PAC pecify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
City, State, Zi Ocean Spr Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Lydia Qua Mailing Addre 1016 Loui City, State, Zi Starkvill Name of Emp	ngton Ave p Code rings, MS 39564 loyer (Required) byed Corporation Other (please sp arles ess sville St p Code e, MS 39759-39 loyer (Required) buarles PLLC	PAC pecify)	✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	☐PAC ✓ Individua		Date (Mo., Day, Year)	Amount of each receipt this period
Full Name				07/10/2023	\$25.00
Anita Yan					
Mailing Address 202 Lakes					
City, State, Z					
	MS 38851-7432				
Name of Emp	ployer (Required)				
Occupation (				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC / Individua	I Loan	Date	Amount of each
	Other (please sp	ecify)	_	(Mo., Day, Year)	receipt this period
Full Name Cornelis	Gispen			07/03/2023	\$100.00
Mailing Addr					
City, State, Z					
	4S 38655-4610				
Name of Emp	oloyer (Required)				
Occupation (	Required)			Aggregate year-to-date	\$1,275.00
Source:	Corporation	PAC / Individua	I Loan	Date	Amount of each
		ecify)		(Mo., Day, Year)	receipt this period
Full Name Felicia I	Brown-Williams			07/14/2023	\$50.00
Mailing Address					
City, State, Z	ip Code				
Jackson,	MS 39206-5813				
	oloyer (Required) Lucile Packard	Foundation			
Occupation (	Required)			Aggregate year-to-date	\$450.00
Source:	Corporation	PAC Individua	I Loan	Date	Amount of each receipt this
	Other (please sp	ecify)		(Mo., Day, Year)	period
Full Name Eugene Br	ramlett Jr			07/16/2023	\$25.00
Mailing Addr					
City, State, Z					
	MS 39705-9179	)			
	loyer (Required)				
Grace Un:					
	ited Methodist	Church			
Occupation (		Church		Aggregate year-to-date	\$500.00

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name		<u> </u>			07/26/2023	\$250.00
Calvin Fi						
Mailing Addre						
City, State, Zi						
•	N 38063-1623					
Name of Emp Bank Of F	loyer (Required) Ripley					
Occupation (I	Required)				Aggregate year-to-date	\$350.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name H. Rodger	r Wilder				07/28/2023	\$500.00
Mailing Addre	ess Larstone Pl					
City, State, Zi	p Code					
Gulfport,	MS 39503-6171	1				
Name of Emp	oloyer (Required) Dyed					
Occupation (Not Emplo					Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Agnes Gur	nd				07/06/2023	\$8,000.00
Mailing Addre						
City, State, Zi						
-	NY 10021-4254	4				
Name of Emp	oloyer (Required) Dyed					
Occupation (	Required)				Aggregate year-to-date	\$15,000.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Stacy Cal	lender				07/07/2023	\$100.00
Mailing Addre						
City, State, Zi						
	MS 39206-5739					
MS Dept of	loyer (Required)					
-1 -	I Education					
Occupation (					Aggregate year-to-date	\$300.00

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Roge	arg.				07/27/2023	\$250.00
Mailing Addre						
•	ass CLake Rd					
City, State, Zi						
Biloxi, N	MS 39532-4619					
Name of Emp	oloyer (Required) oyed					
Occupation (	Required)				Aggregate year-to-date	\$600.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Dana Gonz	zalez				07/18/2023	\$25.00
Mailing Address	ess es Monroe Dr					
City, State, Zi						
•	MS 39213-3020					
Name of Emp	oloyer (Required) oyed					
Occupation (					Aggregate year-to-date	\$280.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp		_		(Mo., Day, Year)	receipt this period
Full Name Maureen M	1akorna				07/19/2023	\$25.00
Mailing Address 813 42nd						
City, State, Zi						
Gulfport,	MS 39501-1451	1				
Name of Emp	oloyer (Required) oyed					
Occupation (					Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Thomas Lo	ombardo				07/29/2023	\$250.00
Mailing Addre	ess					
	l Oaks Dr					
City, State, Zi	i <b>p Code</b> 4S 38655-9058					
	loyer (Required)					
Universit	cy of Mississip	opi				
Occupation (						
Professor					Aggregate year-to-date	\$250.00

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
	Other (please spe	ecify)			— (INIO., Day, Teal)	period
Full Name Dana Gonz	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				07/20/2023	\$25.00
Mailing Addre	ess Es Monroe Dr					
City, State, Zi						
	MS 39213-3020					
	loyer (Required)					
Not Emplo						
Occupation (I	Required)				Aggregate	\$280.00
Not Emplo					year-to-date	7200.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name						· · · · · · · · · · · · · · · · · · ·
Robert M.	Pugh				07/11/2023	\$25.00
Mailing Addre	ess					
5924 Whit	estone Rd					
City, State, Zi	p Code					
Jackson,	MS 39206-2515					
Name of Emp	loyer (Required)					
Not Emplo	yed					
Occupation (I					Aggregate year-to-date	\$400.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
Cource.	_ ·		<u>V</u> marviduai	Loan	(Mo., Day, Year)	receipt this
	Other (please spe	ecify)			_   ( 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	period
Full Name	Other (please spe	ecify)				<u>-</u>
Full Name Joanna Sh		ecify)			07/21/2023	<b>period</b> \$25.00
Joanna Sh Mailing Addre	nows	ecify)				<u>-</u>
Joanna Sh Mailing Addre 3 S Heror	nows ess n Cv	ecify)				<u>-</u>
Joanna Sh Mailing Addre 3 S Heror City, State, Zi	nows ess 1 Cv p Code					<u>-</u>
Joanna Sh Mailing Addre 3 S Heror City, State, Zi Hattiesbu	nows ess n Cv p Code arg, MS 39402-8					<u>-</u>
Joanna Sh Mailing Addre 3 S Heror City, State, Zi Hattiesbu Name of Emp	nows  pss  p Code  prg, MS 39402-8  loyer (Required)					<u>-</u>
Joanna Sh Mailing Addre 3 S Heror City, State, Zi Hattiesbu Name of Emplo	nows  Pass  Cv  P Code  arg, MS 39402-8  Nover (Required)  Dyed				07/21/2023	\$25.00
Joanna Sh Mailing Addre 3 S Heror City, State, Zi Hattiesbu Name of Emp	nows  process  proces					<u>-</u>
Joanna Sh Mailing Addre 3 S Heror City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I	nows  process  proces		✓Individual	Loan	07/21/2023 Aggregate	\$25.00 \$625.00 Amount of each
Joanna Sh Mailing Addre 3 S Heror City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I Not Emplo	nows  pess prode p	3723 □ <b>PAC</b>	✓ Individual	Loan	Aggregate year-to-date	\$25.00 \$625.00
Joanna Sh Mailing Addre 3 S Heror City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I Not Emplo	nows  pss n Cv p Code arg, MS 39402-8  lloyer (Required) byed  Required) byed  Corporation	3723 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$625.00 Amount of each receipt this period
Mailing Addres 3 S Heror City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I Not Emplo	prows prode	3723 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date	\$25.00 \$625.00 Amount of each receipt this
Joanna Sh  Mailing Addre 3 S Heror  City, State, Zi Hattiesbu Name of Emplo Occupation (I Not Emplo Source:  Full Name Fred L. E Mailing Addre	nows  psss n Cv p Code arg, MS 39402-8  loyer (Required) byed  Corporation  Other (please species)	3723 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$625.00 Amount of each receipt this period
Mailing Address 3 S Heror City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Fred L. E Mailing Address 25 Saint	nows  process  n Cv  process  ng, Ms 39402-8  process  process  process  ng, Ms 39402-8  process  comporation  process  comporation  co	3723 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$625.00 Amount of each receipt this period
Mailing Address 3 S Heror City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Fred L. E Mailing Address 25 Saint City, State, Zi	alows  Poss  Cov  P Code  Arg, MS 39402-8  Required)  Dyed  Corporation  Other (please specials)  Banks Jr  Poss  Andrews Dr  P Code	3723 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$625.00 Amount of each receipt this period
Mailing Address 3 S Heror City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Fred L. E Mailing Address 25 Saint City, State, Zi Jackson,	nows  Poss  Cov  P Code  Programmed Corporation  Corporation  Other (please specifies)  Poss  Andrews Dr  P Code  MS 39211-2438	3723 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$625.00 Amount of each receipt this period
Joanna Sh Mailing Addre 3 S Heror City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Fred L. E Mailing Addre 25 Saint City, State, Zi Jackson, Name of Emp	process a Cv process a Subject (Required) byed Corporation Corporation Corporation Corporation Andrews Dr process	3723 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$625.00 Amount of each receipt this period
Joanna Sr Mailing Addres 3 S Heror City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Fred L. E Mailing Addres 25 Saint City, State, Zi Jackson, Name of Emplo	nows  Pass  1 Cv  P Code  Parg, MS 39402-8  Poyed  Required  Poyed  Corporation  Other (please specific process)  Andrews Dr  P Code  MS 39211-2438  Poyed  Required  MS 39211-2438  Required  P Code	3723 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)  07/24/2023	\$625.00  \$625.00  Amount of each receipt this period \$250.00
Joanna Sh Mailing Addre 3 S Heror City, State, Zi Hattiesbu Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Fred L. E Mailing Addre 25 Saint City, State, Zi Jackson, Name of Emp	nows  Pass  1 Cv  P Code  Parg, MS 39402-8  Poyed  Required  Poyed  Corporation  Other (please specific process)  Andrews Dr  P Code  MS 39211-2438  Poyed  Required  MS 39211-2438  Required  P Code	3723 □ <b>PAC</b>	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$625.00 Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date (Ma. Day Year)	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Cindy Aki	กร				07/27/2023	\$50.00
Mailing Addre						
•	adowwood Dr					
City, State, Zi						
Yulee, FI	32097-6427					
Name of Emp	lloyer (Required) byed					
Occupation (I					Aggregate year-to-date	\$646.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Cynthia I	I. Mitchell				07/18/2023	\$100.00
Mailing Addre						
1620 Anne						
City, State, Zi	p Code					
Clarksdal	le, MS 38614-18	302				
Name of Emp	oloyer (Required)					
Occupation (I	Required)				Aggregate	\$2,100.00
Retired	. ,				year-to-date	Ψ2 <b>,</b> 100.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
		- a:f: .\			(Mo., Day, Year)	receipt this
	Other (please sp	еспу)				period
Full Name		еспу)			07/18/2023	<b>period</b> \$50.00
Barbara A	Austin	еспу)				<u>-</u>
	Austin	еспу)				<u>-</u>
Barbara A	Austin Pss nt Ann St	еспу)				<u>-</u>
Barbara A  Mailing Addre 1435 Sain  City, State, Zi	Austin Pss nt Ann St	<u> </u>				<u>-</u>
Barbara A Mailing Addre 1435 Sain City, State, Zi Jackson, Name of Emp	Austin  Pass  Int Ann St  P Code  MS 39202-1847  Ployer (Required)	еспу)				<u>-</u>
Barbara A Mailing Addre 1435 Sain City, State, Zi Jackson,	Austin  Pass  Int Ann St  P Code  MS 39202-1847  Ployer (Required)	еспу)				<u>-</u>
Barbara A Mailing Addre 1435 Sain City, State, Zi Jackson, Name of Emp	Austin  Poss Int Ann St  P Code MS 39202-1847  Ployer (Required)  Dyed  Required)					<u>-</u>
Mailing Addre 1435 Sain City, State, Zi Jackson, Name of Emp Not Emplo	Austin  Poss Int Ann St  P Code MS 39202-1847  Ployer (Required)  Dyed  Required)	PAC	✓Individual	Loan	07/18/2023 Aggregate	\$50.00 \$325.00 Amount of each
Mailing Addre 1435 Sair City, State, Zi Jackson, Name of Emp Not Emplo Occupation (I Not Emplo	Austin  ess  nt Ann St  p Code  MS 39202-1847  eloyer (Required)  eyed  Required)  eyed	PAC	✓Individual	Loan	Aggregate year-to-date	\$50.00 \$325.00
Mailing Addre 1435 Sair City, State, Zi Jackson, Name of Emp Not Emplo Occupation (I Not Emplo	Austin  Pess Int Ann St  P Code  MS 39202-1847  Ployer (Required)  Dayed  Required)  Dayed  Corporation  Other (please specific process)	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$325.00  Amount of each receipt this period
Mailing Addre 1435 Sair City, State, Zi Jackson, Name of Emplo Occupation (I Not Emplo Source: Full Name Marcus Wi	Austin  Poss Int Ann St  P Code  MS 39202-1847  Ployer (Required)  Proposed  Required)  Pyed  Corporation  Other (please speces)	PAC	√Individual	Loan	Aggregate year-to-date  Date	\$325.00  Amount of each receipt this
Mailing Addre 1435 Sair City, State, Zi Jackson, Name of Emp Not Emplo Occupation (I Not Emplo	Austin  Pass Int Ann St  P Code  MS 39202-1847  Ployer (Required)  Dayed  Corporation  Other (please species)	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$325.00  Amount of each receipt this period
Mailing Address 1435 Sair City, State, Zi Jackson, Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Marcus Wi Mailing Address 917 Arlin City, State, Zi	Austin  Poss  Int Ann St  P Code  MS 39202-1847  Ployer (Required)  Proposition  Corporation  Other (please species)  Poss  Po	PAC	√Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$325.00  Amount of each receipt this period
Mailing Address 1435 Sair City, State, Zi Jackson, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Marcus Wi Mailing Addres 917 Arlin City, State, Zi Jackson,	Austin  Poss Int Ann St  P Code  MS 39202-1847  Ployer (Required)  Dyed  Corporation  Other (please species)  Poss Poss Poss Poss Poss Poss Poss P	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$325.00  Amount of each receipt this period
Mailing Address 1435 Sairs City, State, Zi Jackson, Name of Emp Not Emplos Occupation (I Not Emplos Source:  Full Name Marcus Wi Mailing Addres 917 Arlin City, State, Zi Jackson, Name of Emp	Austin  Poss  Int Ann St  P Code  MS 39202-1847  Ployer (Required)  Proportion  Corporation  Other (please species agton St  P Code  MS 39202-1621  Ployer (Required)	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$325.00  Amount of each receipt this period
Mailing Address 1435 Sair City, State, Zi Jackson, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Marcus Wi Mailing Addres 917 Arlir City, State, Zi Jackson,	Austin  Poss  Int Ann St  P Code  MS 39202-1847  Ployer (Required)  Dayed  Corporation  Other (please spread)  Poss  Pos	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$325.00  Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Mck	ani da				07/21/2023	\$500.00
Mailing Addre						
•	akeshore Dr					
City, State, Zi	p Code					
Starkvill	Le, MS 39759-2	482				
Name of Emp	oloyer (Required) rials					
Occupation (I					Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name	kander				07/13/2023	\$100.00
Mailing Addre						
•	orthside Dr					
City, State, Zi	•					
	MS 39211-6125					
Name of Emp	oloyer (Required) Dyed					
Occupation (Not Emplo					Aggregate year-to-date	\$300.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	pecify)			(Mo., Day, Year)	receipt this period
Full Name George Q.	. Evans				07/14/2023	\$25.00
Mailing Addre						
	Garden Ter					
City, State, Zi	p Code MS 39110-6954					
Name of Emp	oloyer (Required) Dyed					
Occupation (	Required)				Aggregate	\$275.00
Not Emplo	·1· · · <del>· ·</del> /					
					year-to-date	7270:00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	oyed		✓Individual	Loan		Amount of each
Full Name	Corporation Other (please sp		✓Individual	Loan	Date	Amount of each receipt this
Full Name Robert Gr	Corporation Other (please sp		✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	Corporation Other (please sp		✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Gr	Corporation Other (please speak cay ess cson St		✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Gr Mailing Addre 1425 Jack City, State, Zi Corinth,	Corporation Other (please speed)  cay ess cson St p Code MS 38834-3423	pecify)	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Gr Mailing Addre 1425 Jack City, State, Zi Corinth, Name of Emp	Corporation Other (please speeds) Cay	pecify)	<b>✓</b> Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Gr Mailing Addre 1425 Jack City, State, Zi Corinth,	Corporation Other (please speeds) Cay	pecify)	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Gr Mailing Addre 1425 Jack City, State, Zi Corinth, Name of Emp	Corporation  Cay  Say  Say  Say  Cay  Cay  Cay  Cay	pecify)	<b>✓</b> Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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 Reporting Period
 7/1/2023
 through
 7/29/2023

Source:	☐ Corporation☐ Other (please spe	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/06/2023	\$5.00
Suzanne F	Robinson					40.00
Mailing Addre						
206 Wood						
City, State, Zi	i <b>p Code</b> Lley, MS 38965-	2603				
	oloyer (Required)	2003				
Not Emplo						
Occupation (I					Aggregate year-to-date	\$1,030.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	ecify)			(Mo., Day, Year)	receipt this period
Full Name	T-7 - 1- 1-				07/16/2023	\$20.00
R. Clark						
Mailing Address 846 Van D						
City, State, Zi	sland, NY 10304	-1816				
	oloyer (Required)	1010				
•	itan Transporta	tion Auth	nority			
Occupation (I	Required)				Aggregate	\$225.00
It Profes					year-to-date	+220 <b>:</b> 00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
					(Mo., Day, Year)	receipt this
	Other (please spe	ecity)			— (o., 2 <b>,</b> , 10 <b></b> ,	period
Full Name		ecify)			07/28/2023	<b>period</b> \$50.00
Barbara C	Casey	ecify)				
Barbara C	Casey					
Barbara C	Casey ess ntree Hills Ave					
Barbara C Mailing Addre 229 Peach City, State, Zi	Casey ess ntree Hills Ave					<u>-</u>
Mailing Addre 229 Peach City, State, Zi Atlanta, Name of Emp	Casey ess atree Hills Ave p Code GA 30305-4413 cloyer (Required)					
Barbara C Mailing Addre 229 Peach City, State, Zi Atlanta,	Casey ess atree Hills Ave p Code GA 30305-4413 cloyer (Required)					<u>-</u>
Mailing Addre 229 Peach City, State, Zi Atlanta, Name of Emp	Casey ess atree Hills Ave p Code GA 30305-4413 eloyer (Required) eyed Required)					
Mailing Addre 229 Peach City, State, Zi Atlanta, Name of Emp Not Emplo	Casey ess atree Hills Ave p Code GA 30305-4413 eloyer (Required) eyed Required)		✓Individual	Loan	07/28/2023 Aggregate	\$50.00 \$525.00 Amount of each
Mailing Addre 229 Peach City, State, Zi Atlanta, Name of Emp Not Emplo Occupation (I Not Emplo	Casey ess atree Hills Ave p Code GA 30305-4413 eloyer (Required) byed Required) byed	. NE □PAC	✓Individual	Loan	Aggregate year-to-date	\$50.00 \$525.00
Mailing Addre 229 Peach City, State, Zi Atlanta, Name of Emp Not Emplo Occupation (I Not Emplo Source:	Casey ess atree Hills Ave p Code GA 30305-4413 eloyer (Required) byed  Required) byed  Corporation  Other (please specific	. NE □PAC	✓Individual	Loan	Aggregate year-to-date  Date	\$50.00 \$525.00 Amount of each receipt this
Barbara C Mailing Addre 229 Peach City, State, Zi Atlanta, Name of Emplo Occupation (I Not Emplo Source: Full Name	Casey  Pess Intree Hills Ave  Ip Code  GA 30305-4413  Polyed  Required)  Dyed  Corporation  Other (please spectrum)	. NE □PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00  \$525.00  Amount of each receipt this period
Mailing Addre 229 Peach City, State, Zi Atlanta, Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Lisa Stev Mailing Addre	Casey  Pess Intree Hills Ave  Ip Code  GA 30305-4413  Polyed  Required)  Dyed  Corporation  Other (please spectrums	. NE □PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00  \$525.00  Amount of each receipt this period
Mailing Address 229 Peach City, State, Zi Atlanta, Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Lisa Stev Mailing Address 101 Boone	Casey  ess atree Hills Ave  p Code GA 30305-4413  eloyer (Required)  pyed  Corporation  Other (please spectrum)  rens  ess en Dr	. NE □PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00  \$525.00  Amount of each receipt this period
Mailing Address 229 Peach City, State, Zi Atlanta, Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Lisa Stev Mailing Address 101 Boone City, State, Zi	Casey  ess atree Hills Ave  p Code GA 30305-4413  eloyer (Required)  pyed  Corporation  Other (please spectrum)  rens  ess en Dr	PAC ecify)	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$525.00  Amount of each receipt this period
Mailing Addre 229 Peach City, State, Zi Atlanta, Name of Emp Not Emplo Occupation (I Not Emplo Source: Full Name Lisa Stev Mailing Addre 101 Boone City, State, Zi Boonevill	Casey  ess atree Hills Ave  p Code GA 30305-4413  eloyer (Required)  eyed  Corporation  Other (please spectrum)  rens  ess e Dr  p Code	PAC ecify)	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$525.00  Amount of each receipt this period
Mailing Addre 229 Peach City, State, Zi Atlanta, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Lisa Stev Mailing Addre 101 Boone City, State, Zi Boonevill Name of Emp	Casey  ess atree Hills Ave  p Code GA 30305-4413  eloyer (Required)  byed  Corporation  Other (please spectage)  yens  ess e Dr  p Code Le, MS 38829-26	PAC ecify)	√Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$525.00  Amount of each receipt this period
Mailing Address 229 Peach City, State, Zi Atlanta, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Lisa Stev Mailing Address 101 Boone City, State, Zi Boonevill Name of Emp NE MS Com Occupation (I	Casey  ess atree Hills Ave  p Code  GA 30305-4413  loyer (Required)  byed  Corporation  Other (please spectage)  rens  ess e Dr  p Code  Le, MS 38829-26  loyer (Required)  munity College	PAC ecify)	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$525.00  Amount of each receipt this period

Reporting Period

7/1/2023

7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Ma	170				07/29/2023	\$250.00
Mailing Addre						
•	ds Pleasant Cir	r				
City, State, Zi	•	0010				
	ley, MS 38965-	-2318				
CoreLogic	loyer (Required)					
Occupation (I	Required)				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name					07/21/2023	\$100.00
John B. C						
Mailing Addre	ess .ng Meadows Rd					
City, State, Zi						
	d, MS 39157-948	38				
Name of Emp	loyer (Required) oyed					
Occupation (I					Aggregate year-to-date	\$2,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name	- 11				07/25/2023	\$1,000.00
Marie Mck						
Mailing Address 425 Davis						
City, State, Zi						
Evanston,	IL 60201-4830	)				
Name of Emp	loyer (Required)					
					Aggregate	
Occupation (I	kequirea)				year-to-date	\$9,000.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name	ollom				07/25/2023	\$25.00
Mailing Addre						
201 Hoffm						
City, State, Zi						
	MS 39576-4312	<u> </u>				
Name of Emp	loyer (Required)					
	ATTITUES					
Occupation (					Aggregate	¢506 75
Occupation (I Flight At	Required)				Aggregate year-to-date	\$536.75

Name of Candidate or Committee Br	randon Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please spe	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name	Other (please spe					period
Full Name James Lyr	nch				07/26/2023	\$100.00
Mailing Addre						
617 Camel						
City, State, Zi	p Code					
Brandon,	MS 39047-6316					
Name of Emp	lloyer (Required)					
Occupation (I	Required)				Aggregate year-to-date	\$575.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	cify)			(Mo., Day, Year)	receipt this period
Full Name	. 1				07/27/2023	\$100.00
Andrew Je						
Mailing Addre	ess Land Meadow Rd					
City, State, Zi						
	39071-9553					
Name of Emp	loyer (Required)					
AJA Manag	gement & Techni	cal Serv	ices			
Occupation (I					Aggregate year-to-date	\$3,100.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please spe	cify)			(Mo., Day, Year)	receipt this period
Full Name		cify)			(Mo., Day, Year) 07/28/2023	•
John Brac	iley	cify)				period
	alley	cify)				period
John Brac	alley ess .p Rd	cify)				period
John Brace Mailing Addres 107 Phili City, State, Zi	alley ess .p Rd	cify)				period
Mailing Address 107 Philii City, State, Zi Oxford, M	alley  p Rd  p Code  4s 38655-2013  cloyer (Required)	cify)				period
John Brace Mailing Addres 107 Philis City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I	alley  p Rd  p Code  as 38655-2013  cloyer (Required)  pyed  Required)	cify)				period
John Brace Mailing Addres 107 Philis City, State, Zi Oxford, M Name of Emplo	alley  p Rd  p Code  as 38655-2013  cloyer (Required)  pyed  Required)	□ PAC	✓Individual	Loan	07/28/2023 Aggregate	\$50.00 \$50.00 \$8,050.00 Amount of each
John Brace Mailing Addre 107 Phili City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo	Alley  pess p Rd p Code  4S 38655-2013  ployer (Required) pyed  Required) pyed	PAC	✓Individual	Loan	Aggregate year-to-date	\$50.00 \$50.00 \$8,050.00
John Brace Mailing Addre 107 Phili City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo	ess p Rd p Code 4S 38655-2013 cloyer (Required) byed Required) pyed Corporation	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$8,050.00  Amount of each receipt this period
John Brace Mailing Addre 107 Phili City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo	Alley  Pess Pess Pess Pess Pess Pess Pess P	PAC	✓Individual	Loan	Aggregate year-to-date  Date	\$50.00 \$8,050.00  Amount of each receipt this
John Brace Mailing Addre 107 Phili City, State, Zi Oxford, M Name of Emplo Occupation (I Not Emplo Source: Full Name Douglas A Mailing Addre	dley  ess p Rd p Code 4S 38655-2013  cloyer (Required) cyed  Corporation  Other (please spe	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$8,050.00  Amount of each receipt this period
John Brace Mailing Addre 107 Phili City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Douglas A Mailing Addre 412 N Cec	A. Horne  cess  p Rd  p Code  4S 38655-2013  cloyer (Required)  pyed  Corporation  Other (please specials)  A. Horne  cess  dar Bluff Rd	PAC	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$8,050.00  Amount of each receipt this period
John Brace Mailing Addre 107 Phili City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Douglas A Mailing Addre 412 N Cec City, State, Zi	A. Horne  cess  p Rd  p Code  4S 38655-2013  cloyer (Required)  pyed  Corporation  Other (please specials)  A. Horne  cess  dar Bluff Rd	□PAC cify)	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$8,050.00  Amount of each receipt this period
John Brace Mailing Addre 107 Philis City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Douglas A Mailing Addre 412 N Cec City, State, Zi Knoxville	Required) Dyed  Corporation Other (please specials)  A. Horne  Star Bluff Rd  P Code  TN 37923-360	□PAC cify)	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$8,050.00  Amount of each receipt this period
John Brace Mailing Addre 107 Phili City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Douglas A Mailing Addre 412 N Cee City, State, Zi Knoxville Name of Emp	A. Horne  cess  p Rd  p Code  ds 38655-2013  cloyer (Required)  pyed  Corporation  Other (please specials)  A. Horne  cess  dar Bluff Rd  p Code	□PAC cify)	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$8,050.00  Amount of each receipt this period
John Brace Mailing Addre 107 Phili City, State, Zi Oxford, M Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Douglas A Mailing Addre 412 N Cee City, State, Zi Knoxville Name of Emp	Required) Other (please special and Bluff Rd  p Code A. Horne Base dar Bluff Rd p Code p, TN 37923-360 Dioyer (Required)	□PAC cify)	✓Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$50.00 \$8,050.00  Amount of each receipt this period

**Reporting Period** 7

7/1/2023 **through** 

7/29/2023

Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please spe	ecify)			(Mo., Day, Year)	period
Full Name Sumati Th	oma d				07/29/2023	\$25.00
Mailing Address						
City, State, Zip						
	MS 39211-6404					
Name of Empl	oyer (Required)					
Change Re	search					
Occupation (R	Required)				Aggregate	\$318.60
Analyst					year-to-date	
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please spe	ecify)			(Mo., Day, Year)	period
Full Name					07/21/2023	\$25.00
James Hut	to					·
Mailing Addres						
62 Redfer:						
City, State, Zip	39465-9415					
	oyer (Required)					
Self Empl						
Occupation (R	Required)				Aggregate	\$615.00
Education	Consultant				year-to-date	4 0 1 0 0 0
Education	CONSULCANC				· ·	
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
			✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Source:	Corporation Other (please spe		✓ Individual	Loan		receipt this period
Source: Full Name Richard R	☐ Corporation☐ Other (please spo		✓ Individual	Loan	(Mo., Day, Year)	receipt this
Source: Full Name Richard R Mailing Addres	Corporation Other (please specially)		✓ Individual	Loan	(Mo., Day, Year)	receipt this period
Source:  Full Name Richard R  Mailing Addres 2630 Thru	Corporation Other (please specially ss sh Rd		✓ Individual	Loan	(Mo., Day, Year)	receipt this period
Source:  Full Name Richard R Mailing Addres 2630 Thru City, State, Zip	Corporation Other (please specially ss sh Rd o Code	ecify)	<b>√</b> Individual	Loan	(Mo., Day, Year)	receipt this period
Source:  Full Name Richard R Mailing Addre: 2630 Thru City, State, Zip Charlotte	Corporation Other (please specially) iley ss sh Rd o Code sville, VA 229	ecify)	<b>✓</b> Individual	Loan	(Mo., Day, Year)	receipt this period
Full Name Richard R Mailing Addre 2630 Thru City, State, Zig Charlotte Name of Empl	Corporation Other (please specially ss sh Rd o Code	ecify)	✓ Individual	Loan	(Mo., Day, Year)	receipt this period
Full Name Richard R Mailing Addre 2630 Thru City, State, Zig Charlotte Name of Empl	Corporation Other (please specially) iley ss sh Rd Code sville, VA 229 loyer (Required) ardner LLP	ecify)	✓ Individual	Loan	(Mo., Day, Year)  07/24/2023  Aggregate	receipt this period \$500.00
Full Name Richard R Mailing Addre 2630 Thru City, State, Zip Charlotte Name of Empl Foley & L	Corporation Other (please specially) iley ss sh Rd Code sville, VA 229 loyer (Required) ardner LLP	ecify)	✓ Individual	Loan	(Mo., Day, Year) 07/24/2023	receipt this period
Full Name Richard R Mailing Addre 2630 Thru City, State, Zip Charlotte Name of Empl Foley & L. Occupation (R	Corporation Other (please specially) iley ss sh Rd Code sville, VA 229 loyer (Required) ardner LLP	ecify)	✓ Individual	Loan	(Mo., Day, Year)  07/24/2023  Aggregate	\$500.00
Full Name Richard R Mailing Addres 2630 Thru City, State, Zip Charlotte Name of Empl Foley & Le Occupation (R Attorney	Corporation Other (please specially) iley ss sh Rd o Code sville, VA 229 over (Required) ardner LLP Required)	ecify)			(Mo., Day, Year)  07/24/2023  Aggregate year-to-date	receipt this period \$500.00
Full Name Richard R Mailing Addre 2630 Thru City, State, Zip Charlotte Name of Empl Foley & L Occupation (R Attorney Source:	Corporation Other (please specially) SS Sh Rd CODE SVILLE, VA 229 Oyer (Required) ardner LLP Required) Corporation Other (please specially)	ecify)			Aggregate year-to-date  Date (Mo., Day, Year)	\$500.00  Amount of each receipt this period
Full Name Richard R Mailing Addre 2630 Thru City, State, Zip Charlotte Name of Empl Foley & L. Occupation (R Attorney Source: Full Name William T	Corporation Other (please specially seems of the coordinate of the	ecify)			(Mo., Day, Year)  07/24/2023  Aggregate year-to-date  Date	\$500.00  Amount of each receipt this
Full Name Richard R Mailing Addres 2630 Thru City, State, Zip Charlotte Name of Empl Foley & Le Occupation (R Attorney Source: Full Name William T Mailing Addres	Corporation Other (please specially seems of the seems of	ecify)			Aggregate year-to-date  Date (Mo., Day, Year)	\$500.00  Amount of each receipt this period
Full Name Richard R Mailing Addre: 2630 Thru City, State, Zip Charlotte Name of Empl Foley & L Occupation (R Attorney Source: Full Name William T Mailing Addre: 119 Belle	Corporation Other (please specially seems of the corporation of the co	ecify)			Aggregate year-to-date  Date (Mo., Day, Year)	\$500.00  Amount of each receipt this period
Full Name Richard R Mailing Addre: 2630 Thru City, State, Zig Charlotte Name of Empl Foley & L Occupation (R Attorney Source: Full Name William T Mailing Addre: 119 Belle City, State, Zig	Corporation Other (please specially seems of the corporation of the co	ecify)			Aggregate year-to-date  Date (Mo., Day, Year)	\$500.00  Amount of each receipt this period
Full Name Richard R Mailing Addres 2630 Thru City, State, Zip Charlotte Name of Empl Foley & L Occupation (R Attorney Source: Full Name William T Mailing Addres 119 Belle City, State, Zip Madison,	Corporation Other (please specially seems of the please specially	ecify)			Aggregate year-to-date  Date (Mo., Day, Year)	\$500.00  Amount of each receipt this period
Full Name Richard R Mailing Addres 2630 Thru City, State, Zip Charlotte Name of Empl Foley & L Occupation (R Attorney Source: Full Name William T Mailing Addres 119 Belle City, State, Zip Madison,	Corporation  Other (please specially seed to Code soville, VA 229 doyer (Required) ardner LLP dequired)  Corporation  Other (please specially seed to Code means and seed to Code means	ecify)			Aggregate year-to-date  Date (Mo., Day, Year)	\$500.00  Amount of each receipt this period
Full Name Richard R Mailing Addres 2630 Thru City, State, Zip Charlotte Name of Empl Foley & L. Occupation (R Attorney Source:  Full Name William T Mailing Addres 119 Belle City, State, Zip Madison, I Name of Empl	Corporation Other (please specially seems of the seems of	ecify)			Aggregate year-to-date  Date (Mo., Day, Year)	\$500.00  Amount of each receipt this period

Name of Candidate or Committee Brandon Presle	эy
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	)				07/16/2023	\$100.00
Stanley C						
Mailing Address 24 Sweets						
City, State, Zi						
	ings, MS 39564	1-3455				
Name of Emp	loyer (Required) oyed					
Occupation (I					Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Cris Pick	kerina				07/17/2023	\$500.00
Mailing Addre						
232 Calum						
City, State, Zi	•					
Madison,	MS 39110-8685					
Name of Emp	loyer (Required) eyed					
Occupation (I					Aggregate year-to-date	\$1,650.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name	I a m m a				07/27/2023	\$250.00
Mark E. H	ioppe					·
Mark E. H	ess					·
Mark E. H. Mailing Addre	ess ook Corporate (	Ctr				·
Mark E. H Mailing Addre 1 Westbro City, State, Zi	ess ook Corporate (					
Mark E. E. Mailing Addre 1 Westbro City, State, Zi Westchest Name of Emp	p Code cer, IL 60154-5					
Mark E. F. Mailing Addre 1 Westbro City, State, Zi Westchest Name of Emp Fifth Thi	p Code cer, IL 60154-5 loyer (Required)					·
Mark E. E. Mailing Addre 1 Westbro City, State, Zi Westchest Name of Emp	p Code cer, IL 60154-5 loyer (Required)				Aggregate year-to-date	\$250.00
Mark E. F. Mailing Addre 1 Westbro City, State, Zi Westchest Name of Emp Fifth Thi Occupation (I	p Corporation  Corporation		✓Individual	Loan	year-to-date Date	\$250.00  Amount of each
Mark E. F. Mailing Addre 1 Westbro City, State, Zi Westchest Name of Emp Fifth Thi Occupation (I Banker	p Code cer, IL 60154-5 loyer (Required) rd Bank		✓ Individual	Loan	year-to-date	\$250.00
Mark E. F. Mailing Addre 1 Westbro City, State, Zi Westchest Name of Emp Fifth Thi Occupation (I Banker	p Code eer, IL 60154-5 loyer (Required) rd Bank Required)  Corporation  Other (please sp		✓ Individual	Loan	year-to-date Date	\$250.00  Amount of each receipt this
Mark E. F. Mailing Addre 1 Westbro City, State, Zi Westchest Name of Emp Fifth Thi Occupation (I Banker Source:	p Corporation  Corporation  Corporation  Other (please sp		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	\$250.00  Amount of each receipt this period
Mark E. F. Mailing Addre 1 Westbro City, State, Zi Westchest Name of Emp Fifth Thi Occupation (I Banker Source: Full Name Raleigh E Mailing Addre 48 County	pcok Corporate C p Code cer, IL 60154-5 loyer (Required) crd Bank Required)  Corporation  Other (please sp		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	\$250.00  Amount of each receipt this period
Mark E. F. Mailing Addre 1 Westbro City, State, Zi Westchest Name of Emp Fifth Thi Occupation (I Banker Source: Full Name Raleigh E	p Corporation  Corporation  Corporation  Corporation  Corporation  Corporation  Required)  Byars  Ress  Road 229U  p Code		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	\$250.00  Amount of each receipt this period
Mark E. F. Mailing Addre 1 Westbro City, State, Zi Westchest Name of Emp Fifth Thi Occupation (I Banker Source: Full Name Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M	p Corporation  Corporation  Corporation  Corporation  Corporation  Corporation  Required)  Byars  Ress  Road 229U  p Code		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	\$250.00  Amount of each receipt this period
Mark E. F. Mailing Addre 1 Westbro City, State, Zi Westchest Name of Emp Fifth Thi Occupation (I Banker Source: Full Name Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M	p Code cer, IL 60154-5 loyer (Required) rd Bank Required)  Corporation  Other (please sp  Byars Road 229U p Code ds 38655 loyer (Required)		✓ Individual	Loan	year-to-date  Date (Mo., Day, Year)	\$250.00  Amount of each receipt this period
Mark E. F. Mailing Addre 1 Westbro City, State, Zi Westchest Name of Emp Fifth Thi Occupation (I Banker Source: Full Name Raleigh E Mailing Addre 48 County City, State, Zi Oxford, M Name of Emp	p Corporation Corporation Corporation Corporation Corporation Corporation Corporation Corporation Corporation Syars Read 229U p Code 48 38655 Cloyer (Required) Coyed Required)		✓Individual	Loan	year-to-date  Date (Mo., Day, Year)	\$250.00  Amount of each receipt this period

Reporting Period 7/1/2023

through

7/29/2023

Source:	☐ Corporation ☐ Other (please spec	□ PAC ☑ Individual ify)	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John A. (	Conway Jr			07/28/2023	\$50.00
<b>Mailing Addre</b> 202 Brae					
City, State, Zi Jackson,	<b>p Code</b> MS 39211-2504				
Name of Emp	oloyer (Required) Oyed				
Occupation (Not Emplo				Aggregate year-to-date	\$350.00
Source:	Corporation Other (please spec	☐PAC ✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jacquelir		<i>"</i>		07/29/2023	\$25.00
Mailing Addre					
City, State, Zi Jackson,	<b>p Code</b> MS 39209-3744				
Name of Emp	loyer (Required) Canton				
Occupation (	<b>Required)</b> Inistrator			Aggregate year-to-date	\$205.00
Source:	Corporation	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
	Other (please spec	···y)			periou
<b>Full Name</b> Claire Da		<u>.</u>		07/03/2023	\$25.00
	avis	y)		07/03/2023	<u>-</u>
Claire Da Mailing Addre 44714 Auc City, State, Zi Ashburn,	avis ess dubon Sq p Code VA 20147-6295	y)		07/03/2023	<u>-</u>
Claire Da Mailing Addre 44714 Auc City, State, Zi Ashburn,	exis ess dubon Sq p Code VA 20147-6295 cloyer (Required)	y)		07/03/2023	<u>-</u>
Mailing Address 44714 Auc City, State, Zi Ashburn, Name of Emp	avis  pess dubon Sq p Code VA 20147-6295 ployer (Required) pyed  Required)	,		Aggregate year-to-date	<u>-</u>
Mailing Address 44714 Auc City, State, Zi Ashburn, Name of Empl Occupation (I	avis  pess dubon Sq p Code VA 20147-6295 ployer (Required) pyed  Required)	☐PAC ✓ Individual	<b>Loan</b>	Aggregate	\$25.00 \$265.00 Amount of each receipt this
Mailing Address 44714 Aug City, State, Zi Ashburn, Name of Emp Not Emplo Occupation (I Not Emplo	evis  ess  dubon Sq  p Code  VA 20147-6295  cloyer (Required)  byed  Required)  pyed  Corporation  Other (please spec	☐PAC ✓ Individual	Loan	Aggregate year-to-date	\$25.00 \$265.00 Amount of each
Mailing Address 44714 Aug City, State, Zi Ashburn, Name of Emp Not Emplo Occupation (I Not Emplo Source:	avis  ess dubon Sq p Code VA 20147-6295  cloyer (Required) cyed  Corporation  Other (please spec	☐PAC ✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$265.00  Amount of each receipt this period
Mailing Address 44714 Aud City, State, Zi Ashburn, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Dick Ledo Mailing Address 488 CR 14 City, State, Zi Tupelo, N Name of Emp	p Code VA 20147-6295 Ployer (Required) Pyed Corporation Other (please spec	☐PAC ✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$265.00  Amount of each receipt this period
Mailing Address 44714 Aug City, State, Zi Ashburn, Name of Emp Not Emplo Occupation (I Not Emplo Source:  Full Name Dick Ledo Mailing Address 488 CR 14 City, State, Zi Tupelo, N Name of Emp Insource Occupation (I	avis  ess dubon Sq p Code VA 20147-6295  loyer (Required) byed  Corporation  Other (please spec  bux ess 160 p Code 4S 38804  loyer (Required) Solutions	☐PAC ✓ Individual	Loan	Aggregate year-to-date  Date (Mo., Day, Year)	\$25.00 \$265.00  Amount of each receipt this period

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	Convillo				07/16/2023	\$250.00
Mailing Addre						
104 Chero						
City, State, Zi	•					
	irg, MS 39401-7	7036				
Not Emplo	oloyer (Required) byed					
Occupation (Not Emplo					Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Gloria Bu	ıtler Thomas				07/17/2023	\$250.00
Mailing Addre						
City, State, Zi						
Vicksburg	g, MS 39183-837	75				
Name of Emp	lloyer (Required) oyed					
Occupation (I	Required)				Aggregate year-to-date	\$250.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Robin Wei	lgle				07/18/2023	\$100.00
Mailing Addre	ess Old River Trl					
City, State, Zi	<b>p Code</b> MS 39503-9046					
	loyer (Required)					
Not Emplo						
Occupation (	Required)				Aggregate year-to-date	\$305.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Eleanor F	Haimsohn				07/18/2023	\$50.00
Mailing Addre						
City, State, Zi	=					
Name of Emp						
Not Emplo	loyer (Required)					
	lloyer (Required) byed Required)				Aggregate year-to-date	\$225.00

Name of Candidate or Committee	Brandon	Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	☐ Corporation☐ Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles H	Parrott				07/29/2023	\$100.00
Mailing Address 9 Nabbey						
City, State, Zi	p Code					
	oloyer (Required)					
Occupation (I	Required)				Aggregate year-to-date	\$600.00
Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara A	Austin				07/11/2023	\$50.00
Mailing Addre						
City, State, Zi	p Code MS 39202-1847					
Name of Emp	oloyer (Required) byed					
Occupation (Not Emplo					Aggregate year-to-date	\$325.00
Source:	☐ Corporation☐ Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Margaret	Thomas				07/21/2023	\$25.00
Mailing Addre	ess					
City, State, Zi	p Code urg, MS 39401-8	3209				
Name of Emp	ployer (Required)					
Occupation (Not Emplo	• '				Aggregate year-to-date	\$417.00
Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne F	Robinson				07/24/2023	\$5.00
Mailing Addre	ess					
City, State, Zi		-2603				
	loyer (Required)	2005				
Occupation (I	Required)				Aggregate year-to-date	\$1,030.00

**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tom Rhode	.n				07/05/2023	\$1,000.00
Mailing Addre						
•	Circle Dr					
City, State, Zi						
	MS 39232-8878					
Name of Emp	loyer (Required) eyed					
Occupation (I	Required)				Aggregate year-to-date	\$3,500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Roger Kli	ngler				07/15/2023	\$10.00
Mailing Addre	ess Indalwood Dr					
City, State, Zi						
Scottsdal	e, AZ 85250-72	269				
Name of Emp	loyer (Required) oyed					
Occupation (I					Aggregate year-to-date	\$845.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)	_		(Mo., Day, Year)	receipt this period
Full Name James P.	Smith				07/06/2023	\$1,000.00
Mailing Addre	ess Old River Trl					
	_ ~ _ ~ ~ ~					
City, State, Zi	p Code					
Gulfport,	<b>p Code</b> MS 39503-905	7				
Gulfport,	p Code MS 39503-9057 loyer (Required)	7				
Gulfport, Name of Emp	p Code MS 39503-9057 loyer (Required) byed	7			Aggregate year-to-date	\$1,100.00
Name of Emp	p Code MS 39503-9057 loyer (Required) byed	7 PAC	✓Individual	Loan	year-to-date Date	Amount of each
Occupation (I	p Code  MS 39503-9057  loyer (Required)  byed  Required)	PAC	✓Individual	Loan	year-to-date	
Occupation (I	p Code  MS 39503-9057  loyer (Required)  byed  Required)  Corporation  Other (please sp	PAC	✓ Individual	Loan	year-to-date Date	Amount of each receipt this
Gulfport, Name of Emp Not Emplo Occupation (I Retired Source: Full Name Rubye D. Mailing Addre	p Code  MS 39503-9057  loyer (Required)  byed  Required)  Corporation  Other (please sp	PAC	✓Individual	Loan	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Gulfport, Name of Emp Not Emplo Occupation (I Retired Source:  Full Name Rubye D. Mailing Addre 450 E Pre City, State, Zi	p Code  MS 39503-9057  loyer (Required)  byed  Required)  Corporation  Other (please sp  Harden  ess esident Ave p Code	PAC	✓Individual	Loan	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Gulfport, Name of Emp Not Emplo Occupation (I Retired Source:  Full Name Rubye D. Mailing Addre 450 E Pre City, State, Zi Tupelo, M	p Code  MS 39503-9057  loyer (Required)  byed  Required)  Corporation  Other (please sp  Harden  ess  esident Ave	PAC	✓Individual	Loan	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Gulfport, Name of Emp Not Emplo Occupation (I Retired Source:  Full Name Rubye D. Mailing Addre 450 E Pre City, State, Zi Tupelo, M	p Code  MS 39503-9057  loyer (Required)  byed  Required)  Corporation  Other (please sp  Harden  ess esident Ave  p Code  IS 38801-5599	PAC	✓Individual	Loan	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period
Gulfport, Name of Emp Not Emplo Occupation (I Retired Source:  Full Name Rubye D. Mailing Addre 450 E Pre City, State, Zi Tupelo, M	p Code  MS 39503-9057  loyer (Required)  pyed  Required)  Corporation  Other (please sp  Harden  ess esident Ave p Code IS 38801-5599  loyer (Required) eterprises  Required)	PAC	✓Individual	Loan	year-to-date  Date  (Mo., Day, Year)	Amount of each receipt this period

**Reporting Period** 7/1/2023

through

7/29/2023

	Amount of each receipt this period
Full Name Marietta J. Goodloe 07/11/2023	\$200.00
Mailing Address	
3105 N 1st St	
City, State, Zip Code	
Ocean Springs, MS 39564-8566	
Name of Employer (Required) Not Employed	
Occupation (Required) Retired  Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan Date	Amount of each
Other (please specify) (Mo., Day, Year)	receipt this period
Full Name 07/21/2023	\$75.00
Zilla Spencer	·
Mailing Address 382 Highway 342 S	
City, State, Zip Code	
Vardaman, MS 38878	
Name of Employer (Required) Not Employed	
Occupation (Required) Not Employed  Aggregate year-to-date	\$250.00
Source: Corporation PAC Individual Loan Date	Amount of each
Other (please specify) (Mo., Day, Year)	receipt this period
Full Name Mary A. Alford  07/24/2023	\$1,000.00
Mailing Address 182 Woodbriar Dr	
City, State, Zip Code	
Kosciusko, MS 39090-9098	
Name of Employer (Required) Not Employed	
Not Employed	44 500 00
Occupation (Populated)	\$1,700.00
Occupation (Required) Not Employed  Aggregate year-to-date	
Not Employed year-to-date  Source: Corporation PAC Individual Loan Date	Amount of each receipt this
Not Employed year-to-date  Source: Corporation PAC Individual Loan Date Other (please specify) (Mo., Day, Year)	Amount of each receipt this period
Not Employed year-to-date  Source: Corporation PAC Individual Loan Date	receipt this
Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Diane Irvin  Mailing Address  year-to-date  (Mo., Day, Year)  07/24/2023	receipt this period
Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Diane Irvin  Mailing Address 4047 Wyandot St  City, State, Zip Code	receipt this period
Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Diane Irvin  Mailing Address 4047 Wyandot St  City, State, Zip Code Denver, CO 80211-2140	receipt this period
Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Diane Irvin  Mailing Address 4047 Wyandot St  City, State, Zip Code Denver, CO 80211-2140  Name of Employer (Required)	receipt this period
Not Employed  Source: Corporation PAC Individual Loan Other (please specify)  Full Name Diane Irvin  Mailing Address 4047 Wyandot St  City, State, Zip Code Denver, CO 80211-2140	receipt this period

Name of Candidate or Committee Brandon	Presley
Name of Candidate of Committee Brandon	TTESTE

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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source:	Corporation Other (please sp	PAC	✓ Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name					07/15/2023	\$250.00
David Roz	zier					
Mailing Address 303 Wood	ess Land Hills Dr					
City, State, Zi	ip Code 4S 38655-8429					
Name of Emp	oloyer (Required)					
Occupation (	Required)				Aggregate year-to-date	\$500.00
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Brenda Pl	lunkett				07/15/2023	\$250.00
Mailing Addre						
City, State, Zi		3				
Name of Emp	ployer (Required)					
Occupation (	Required)				Aggregate year-to-date	\$1,628.45
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each
	Other (please sp	ecify)			(Mo., Day, Year)	receipt this period
Full Name Linda Fos	shee				07/25/2023	\$25.00
Mailing Addre						
City, State, Zi						
Hattiesbu	irg, MS 39402					
Name of Emp	oloyer (Required) Dyed					
Occupation (					Aggregate year-to-date	\$482.60
Source:	Corporation	PAC	✓ Individual	Loan	Date	Amount of each receipt this
	Other (please sp	ecify)			(Mo., Day, Year)	period
Full Name Charles (	Griffith				07/18/2023	\$100.00
Mailing Address 102 Mamie	ess					
102 Mamie	ess e St ip Code	3873				
102 Mamie City, State, Zi Hattiesbu	ess e St p Code arg, MS 39401-3	3873				
102 Mamie City, State, Zi Hattiesbu Name of Emp	ess e St ip Code					
102 Mamie City, State, Zi Hattiesbu Name of Emp	ess e St p Code arg, MS 39401-3 ployer (Required) General Hospita				Aggregate year-to-date	\$400.00

Name of Candidate or Committee Brandon Presle	эy
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**Reporting Period** 7/1/2023 **through** 7/29/2023

Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Stiefel	07/05/2023	\$2,000.00
Mailing Address PO Box 141128		
City, State, Zip Code		
Coral Gables, FL 33114-1128		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,000.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Robert Alexander	07/25/2023	\$50.00
Mailing Address 18 Highland Meadows Dr		
City, State, Zip Code Jackson, MS 39211-5949		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Suzanne Robinson	07/26/2023	\$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	\$1,030.00
Source: Corporation PAC Individual Loan	Date	Amount of each receipt this
Other (please specify)	(Mo., Day, Year)	period
Full Name	07/07/2023	\$25.00
Don A. Zatroch		
Don A. Zatroch  Mailing Address 2366 17th Ave NW		
Mailing Address 2366 17th Ave NW City, State, Zip Code		
Mailing Address 2366 17th Ave NW		

Reporting Period 7/1/2023

1/2023 through

7/29/2023

Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name	07/27/2023	\$500.00
Allan Benglen		
Mailing Address		
1725 Forrest Hill Dr		
City, State, Zip Code Columbus, MS 39701-3530		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Michelle Zeng	07/19/2023	\$46.00
Mailing Address		
536 Dampier Dr		
City, State, Zip Code		
Greenville, MS 38701-7430		
Name of Employer (Required) Accenture		
Occupation (Required) Consultant	Aggregate year-to-date	\$296.00
Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full Name Meredith Gowan Le Goff	07/21/2023	\$46.00
Mailing Address		
1629 Acadia Ct		
City, State, Zip Code Jackson, MS 39211-5644		
Name of Employer (Required)		
Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$271.00
Source: Corporation PAC Individual Loan	Date	Amount of each receipt this
Other (please specify)	(Mo., Day, Year)	period
Full Name Wilson Golden	07/23/2023	\$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)	Aggregate	\$1,235.00

**Reporting Period** 7/1/2023 **through** 7/29/2023

25.00 18.30
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each nis
25.00
30.00

Name of Candidate or Committee Br	randon Presley
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**Reporting Period** 7/1/2023 **through** 7/29/2023

## ITEMIZED RECEIPTS

		1 1 - 14112		. •	
Source:	☐ Corporation☐ Other (please speci	☐PAC ✓Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joel Brur	nt.			07/24/2023	\$1,000.00
Mailing Addre	ess			-	
City, State, Zi				-	
Moss Poir	nt, MS 39563-270	6		]	
Name of Emp	loyer (Required)				
Occupation (I				Aggregate year-to-date	\$3,500.00
Source:	Corporation	PAC Individual	Loan	Date (Mo., Day, Year)	Amount of each receipt this
Full Name	Other (please speci	ту)			period
	Cervantes			07/24/2023	\$25.00
Mailing Address 2109 Suns					
City, State, Zi	<b>p Code</b> arg, MS 39402-284	43			
Name of Emp	loyer (Required)				
Occupation (I				Aggregate year-to-date	\$225.00
Source:	Corporation	PAC / Individual	Loan	Date	Amount of each
	Other (please speci			(Mo., Day, Year)	receipt this period
Full Name Keith Mar	nsel			07/06/2023	\$1,000.00
Mailing Addre				-	
City, State, Zi	<b>p Code</b> MS 39216-4716			-	
	loyer (Required)			-	
-	y of Mississipp:	i Medical Center			
Occupation (I	• •			Aggregate year-to-date	\$2,000.00
Source:	Corporation	PAC Individual	Loan	Date	Amount of each
	Other (please speci	fy)		(Mo., Day, Year)	receipt this period
Full Name Debbie Ha	all			07/16/2023	\$25.00
Mailing Addre					
127 Sesan City, State, Zi				-	
	1S 38801-8615				
-	loyer(Required) cy of Mississipp:	i			
Occupation (I	Required)			Aggregate year-to-date	\$487.40
Professor	-			,	

Name of Candidate or	Committee Brand	on Presley		Page <u>182</u> of <u>227</u>
Reporting Period	7/1/2023	through	7/29/2023	<del></del>

# ITEMIZED RECEIPTS

Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pamelia C. Howorth	07/29/2023	\$500.00
Mailing Address 6531 Jackson Raymond Rd		
City, State, Zip Code Raymond, MS 39154-9007		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00

Name	of Can	didate	٥r	Committee	Brandon	Preslev

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Reporting Period \_\_\_\_

7/1/2023

through 7/29/2023

## ITEMIZED RECEIPTS - IN-KIND CONTRIBUTIONS

Source: Corporation PAC Individual Loan	Date	
Other (please specify)	(Mo., Day, Year)	
Full Name		
Democratic Governors Association	07/28/2023	
Mailing Address 1225 I St NW	Estimated Amount	
City, State, Zip Code Washington, DC 20005-3914	of In-Kind Contribution*	
Name of Employer (Required)	\$171.72	
Occupation (Required)		
In-Kind Contribution: Digital Services		

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

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Full Name	Date	Amount of each
Fastlane Gas Stations	(Mo., Day, Year)	disbursement this period
Mailing Address		
320 W Government St	07/20/2023	\$158.71
City, State, Zip Code		
Brandon, MS 39042-3146		
Purpose of Disbursement (Optional)	Aggregate	\$451.42
Travel	year-to-date	1
Full Name	Date	Amount of each
Shawn Patterson	(Mo., Day, Year)	disbursement this period
Mailing Address		
1160 1st St NE	07/11/2023	\$44.51
City, State, Zip Code		
Washington, DC 20002-4799		
Purpose of Disbursement (Optional)	Aggregate	\$24,175.91
Reimbursement - Software, Postage	year-to-date	, ,
Full Name	Date	Amount of each
Greta Presley	(Mo., Day, Year)	disbursement this period
Mailing Address		
182 Verona Ave	07/03/2023	\$1,994.23
City, State, Zip Code		
Nettleton, MS 38858-6004		
Purpose of Disbursement (Optional)	Aggregate	\$8,286.80
Salary	year-to-date	
Full Name	Date	Amount of each
David Reimer	(Mo., Day, Year)	disbursement this period
Mailing Address		
3511 W Oakridge Ave	07/14/2023	\$1,167.30
City, State, Zip Code		
Visalia, CA 93291-8005		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,988.05
Salary	year-to-date	
Full Name	Date	Amount of each
Weidmann's Restaurant	(Mo., Day, Year)	disbursement this period
Mailing Address		
210 22nd Ave	07/27/2023	\$608.25
City, State, Zip Code		
Meridian, MS 39301-5849		
Purpose of Disbursement (Optional)	Aggregate	\$758.25
Event Catering	year-to-date	

Name of Candidate or Committee	Brandon	Presley
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Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/03/2023	\$1,525.00
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Full Name	Date	Amount of each
ActBlue Technical Services	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 382110	07/24/2023	\$1,291.59
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate	\$18,074.89
Credit Card Processing	year-to-date	710,011.03
Full Name	Date	Amount of each
Texaco, Inc.	(Mo., Day, Year)	disbursement this period
Mailing Address		
2000 Westchester Ave	07/14/2023	\$89.68
City, State, Zip Code		
White Plains, NY 10604		
Purpose of Disbursement (Optional)	Aggregate	\$280.78
Travel	year-to-date	7200.70
Full Name	Date	Amount of each
Katharine Kurz	(Mo., Day, Year)	disbursement this period
Mailing Address		
634 W Main St	07/25/2023	\$13.85
City, State, Zip Code		
Tupelo, MS 38804-3745		
Purpose of Disbursement (Optional)	Aggregate	\$9,230.30
Reimbursement - Travel	year-to-date	¥ 3 <b>,</b> 230 <b>.</b> 30
Full Name	Date	Amount of each
ActBlue Technical Services	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 382110	07/17/2023	\$727.83
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate	\$18,074.89
Credit Card Processing	year-to-date	710,074.09

Name of Candidate or Committee Brandon Presley

**Reporting Period** \_\_\_\_\_\_ 7/1/2023 \_\_\_\_\_through \_\_\_\_ 7/29/2023

3501   E Frontage Rd	Disbursements from contributions accumulated Prior to Jan	uary 1, 2018 or 🗸 On or Aft	er January 1, 2018
Rayroll Data Processing	Full Name	Date	Amount of each
3501 E Frontage Rd	Payroll Data Processing		
City, State, Zip Code         Aggregate year-to-date         \$149,847.77           Purpose of Disbursement (Optional)         Aggregate year-to-date         \$149,847.77           Payrol I Fees         Date (Mo., Day, Year)         Amount of each disbursement this period           Shell Oil Co         Date (Mo., Day, Year)         Amount of each disbursement this period           Rouston, TX 77252-2463         07/19/2023         \$75.45           Purpose of Disbursement (Optional)         Aggregate year-to-date         \$1,404.53           Travel         Date (Mo., Day, Year)         Amount of each disbursement this period           Mailing Address         07/14/2023         \$55.58           Po Box 2463         07/14/2023         \$55.58           City, State, Zip Code         307.04/2023         \$55.58           Rouston, TX 77252-2463         Purpose of Disbursement (Optional)         Aggregate year-to-date         \$1,404.53           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Scale to Win         Mailing Address         07/03/2023         \$673.73           City, State, Zip Code         307.04         Amount of each disbursement this period           Mailing Address         07/03/2023         \$673.73           City, State, Zip Code         307.02	Mailing Address		
Tampa, FL 33607-1723   Purpose of Disbursement (Optional)   Purpose of Disbursement	3501 E Frontage Rd	07/28/2023	\$53.23
Purpose of Disbursement (Optional) Payro11 Fees	City, State, Zip Code		
Payrol   Fees   Pees   Peer   Peer	Tampa, FL 33607-1723		
Payroll Fees         Jean Count of Each (Mo., Day, Vear)         Amount of each disbursement this period of Mailing Address         Amount of each disbursement this period disbursement this period of Mailing Address           Purpose of Disbursement (Optional)         Aggregate year-to-date (Mo., Day, Vear)         \$1,404.53           Full Name         Date (Mo., Day, Vear)         Amount of each disbursement this period disbursement this period disbursement this period disbursement this period pear-to-date           Full State, Zip Code         07/14/2023         \$55.58           Full Name         Aggregate year-to-date         \$1,404.53           Full Name         Date (Mo., Day, Vear)         Amount of each disbursement this period disbursement (Optional)           Mailing Address         Date (Mo., Day, Vear)         Amount of each disbursement this period disbursement this period disbursement this period pear-to-date           Mailing Address         07/03/2023         \$673.73           City, State, Zip Code         07/03/2023         \$2,030.26           Full Name         Date (Mo., Day, Vear)         Amount of each disbursement this period disbursement this period disbursement this period disbursement (Optional)         Aggregate year-to-date         \$2,030.26           Full Name         Date (Mo., Day, Vear)         Amount of each disbursement this period disbursement this period disbursement this period dis	Purpose of Disbursement (Optional)		\$149,847.77
Shell 0il Co	Payroll Fees	year-to-date	1 = 10,0 = 1111
Shell 0il Co   Mailing Address   PO Box 2463   07/19/2023   \$75.45	Full Name	Date	Amount of each
PO Box 2463   07/19/2023   \$75.45	Shell Oil Co		
City, State, Zip Code         Aggregate year-to-date         \$1,404.53           Purpose of Disbursement (Optional)         Aggregate year-to-date         \$1,404.53           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Mailing Address         70 Box 2463         07/14/2023         \$55.58           City, State, Zip Code         Aggregate year-to-date         \$1,404.53           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Scale to Win         Aggregate year-to-date         \$673.73           City, State, Zip Code         313/42 Harper St         07/03/2023         \$673.73           City, State, Zip Code         Aggregate year-to-date         \$2,030.26           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Full Name         Poster, Olise         On/13/2023         \$5,025.00	Mailing Address		
Houston, TX 77252-2463   Purpose of Disbursement (Optional)   Aggregate year-to-date   \$1,404.53   Travel   Date (Mo., Day, Year)   Aggregate disbursement this period   Mailing Address		07/19/2023	\$75.45
Purpose of Disbursement (Optional)         Aggregate year-to-date         \$1,404.53           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Shell 0il Co         07/14/2023         \$55.58           City, State, Zip Code         07/14/2023         \$55.58           Houston, TX 77252-2463         Aggregate year-to-date         \$1,404.53           Purpose of Disbursement (Optional)         Aggregate year-to-date         \$1,404.53           Travel         Date (Mo., Day, Year)         Amount of each disbursement this period           Mailing Address         07/03/2023         \$673.73           City, State, Zip Code         3742 Harper St         07/03/2023         \$673.73           City, State, Zip Code         Aggregate year-to-date         \$2,030.26           Purpose of Disbursement (Optional)         Aggregate year-to-date         \$2,030.26           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Full Name         On Box 70156         On Mailing Address         On Mailing Address         On Mailing Address         On Mailing Address	City, State, Zip Code		
Travel   Salar   Sal	Houston, TX 77252-2463		
Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Shell Oil Co         07/14/2023         \$55.58           City, State, Zip Code         07/14/2023         \$55.58           City, State, Zip Code         Aggregate year-to-date         \$1,404.53           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Scale to Win         Mamount of each disbursement this period           Mailing Address         07/03/2023         \$673.73           13742 Harper St         07/03/2023         \$673.73           City, State, Zip Code         Aggregate year-to-date         \$2,030.26           Santa Ana, CA 92703-1419         Aggregate year-to-date         \$2,030.26           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Boosters Inc         Mailing Address         Aggregate year-to-date         \$5,025.00           PO Box 70156         07/13/2023         \$5,025.00           City, State, Zip Code         Aggregate year-to-date         \$10,211.33	Purpose of Disbursement (Optional)		\$1,404.53
Shell Oil Co  Mailing Address PO Box 2463 O7/14/2023 PURPOSE of Disbursement (Optional) Travel  Aggregate year-to-date (Mo., Day, Year)  Amount of each disbursement this period  Aggregate year-to-date (Mo., Day, Year)  Amount of each disbursement (Optional)  Travel  Amount of each disbursement this period  Aggregate year-to-date  Purpose of Disbursement (Optional)  Aggregate year-to-date (Mo., Day, Year)  Aggregate year-to-date (Mo., Day, Year)  Amount of each disbursement this period  Aggregate year-to-date (Mo., Day, Year)  Amount of each disbursement this period  Aggregate year-to-date (Mo., Day, Year)  Aggregate year-to-date (Mo., Day, Year)  Aggregate special year-to-date (Mo., Day, Year)  Aggregate year-to-date (Mo., Day, Year)	Travel	year-to-date	, , , , , , , , , , , , , , , , , , , ,
Mailing Address   PO Box 2463   07/14/2023   \$55.58	Full Name	Date	Amount of each
PO Box 2463	Shell Oil Co	(Mo., Day, Year)	disbursement this period
City, State, Zip Code         Aggregate year-to-date         \$1,404.53           Purpose of Disbursement (Optional)         Aggregate year-to-date         \$1,404.53           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Mailing Address         07/03/2023         \$673.73           City, State, Zip Code         Santa Ana, CA 92703-1419         Aggregate year-to-date         \$2,030.26           Purpose of Disbursement (Optional)         Aggregate year-to-date         \$2,030.26           Digital Consulting         Date (Mo., Day, Year)         Amount of each disbursement this period           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Mailing Address         07/13/2023         \$5,025.00           PO Box 70156         07/13/2023         \$5,025.00           City, State, Zip Code         Aggregate         \$10,211.33	Mailing Address		
Houston, TX 77252-2463  Purpose of Disbursement (Optional) Travel  Full Name Scale to Win  Mailing Address  13742 Harper St  City, State, Zip Code Santa Ana, CA 92703-1419  Purpose of Disbursement (Optional) Digital Consulting  Full Name Boosters Inc  Mailing Address  PO Box 70156  City, State, Zip Code  Montgomery, AL 36107-0156  Purpose of Disbursement (Optional)  Aggregate (Mo., Day, Year)  Amount of each disbursement this period	PO Box 2463	07/14/2023	\$55.58
Purpose of Disbursement (Optional) Travel  Full Name Scale to Win  Mailing Address  13742 Harper St  City, State, Zip Code Santa Ana, CA 92703-1419  Purpose of Disbursement (Optional) Digital Consulting  Full Name Boosters Inc  Mailing Address  PO Box 70156  City, State, Zip Code  Montgomery, AL 36107-0156  Purpose of Disbursement (Optional)  Aggregate (Mo., Day, Year)  Amount of each disbursement this period  \$1,404.53  Amount of each disbursement this period  \$2,030.26  \$2,030.26  \$3,025.00  Aggregate (Mo., Day, Year)  Amount of each disbursement this period  \$3,025.00  Aggregate (Mo., Day, Year)	City, State, Zip Code		
Travel  Full Name Scale to Win  Mailing Address 13742 Harper St City, State, Zip Code Santa Ana, CA 92703-1419  Purpose of Disbursement (Optional) Digital Consulting  Full Name Boosters Inc Mailing Address PO Box 70156 City, State, Zip Code Montgomery, AL 36107-0156  Purpose of Disbursement (Optional)  Aggregate (Mo., Day, Year)  Amount of each disbursement this period  Amount of each disbursement this period  Aggregate (Mo., Day, Year)  Amount of each disbursement this period	Houston, TX 77252-2463		
Travel Full Name Scale to Win  Mailing Address  13742 Harper St  City, State, Zip Code Santa Ana, CA 92703-1419  Purpose of Disbursement (Optional) Date (Mo., Day, Year)  Amount of each disbursement this period  \$2,030.26  Purl Name Boosters Inc  Mailing Address PO Box 70156 City, State, Zip Code  Montgomery, AL 36107-0156  Purpose of Disbursement (Optional)  Aggregate year-to-date  \$2,030.26  \$2,030.26  \$3,025.00  Amount of each disbursement this period  \$3,025.00  Aggregate year-to-date  \$4,030.20  \$5,025.00  Aggregate (Mo., Day, Year)  \$5,025.00  Aggregate (Mo., Day, Year)  Aggregate (Mo., Day, Year)  \$5,025.00	Purpose of Disbursement (Optional)		\$1,404.53
Scale to Win  Mailing Address  13742 Harper St  City, State, Zip Code Santa Ana, CA 92703-1419  Purpose of Disbursement (Optional) Digital Consulting  Full Name Boosters Inc  Mailing Address PO Box 70156  City, State, Zip Code  Montgomery, AL 36107-0156  Purpose of Disbursement (Optional)  Aggregate year-to-date  May Address  07/13/2023  Aggregate (Mo., Day, Year)  disbursement this period  Amount of each disbursement this period  \$5,025.00  Aggregate \$10,211.33	Travel	year-to-date	. ,
Mailing Address  13742 Harper St  City, State, Zip Code Santa Ana, CA 92703-1419  Purpose of Disbursement (Optional) Digital Consulting  Full Name Boosters Inc Mailing Address PO Box 70156 City, State, Zip Code Montgomery, AL 36107-0156  Purpose of Disbursement (Optional)  Aggregate \$2,030.26  (Mo., Day, Year)  Amount of each disbursement this period  77/13/2023 \$5,025.00  Aggregate \$10,211.33	Full Name	Date	Amount of each
13742 Harper St  City, State, Zip Code Santa Ana, CA 92703-1419  Purpose of Disbursement (Optional) Digital Consulting  Full Name Boosters Inc Mailing Address PO Box 70156 City, State, Zip Code Montgomery, AL 36107-0156  Purpose of Disbursement (Optional)  Aggregate year-to-date  \$2,030.26  Amount of each disbursement this period  \$5,025.00  Aggregate \$5,025.00  Aggregate \$10,211.33		(Mo., Day, Year)	disbursement this period
City, State, Zip Code Santa Ana, CA 92703-1419  Purpose of Disbursement (Optional) Digital Consulting  Full Name Boosters Inc Mailing Address PO Box 70156 City, State, Zip Code Montgomery, AL 36107-0156  Purpose of Disbursement (Optional)  Aggregate year-to-date \$2,030.26  \$2,030.26  \$4 Amount of each disbursement this period \$5,025.00  \$5,025.00	Mailing Address		
Santa Ana, CA 92703-1419  Purpose of Disbursement (Optional) Digital Consulting  Full Name Boosters Inc Mailing Address PO Box 70156 City, State, Zip Code Montgomery, AL 36107-0156  Purpose of Disbursement (Optional)  Aggregate year-to-date \$2,030.26  Amount of each disbursement this period  \$5,025.00  Aggregate year-to-date \$2,030.26  \$2,030.26		07/03/2023	\$673.73
Purpose of Disbursement (Optional) Digital Consulting  Full Name Boosters Inc  Mailing Address PO Box 70156 City, State, Zip Code Montgomery, AL 36107-0156  Purpose of Disbursement (Optional)  Aggregate year-to-date  \$2,030.26  Amount of each disbursement this period  \$5,025.00  Aggregate \$5,025.00	City, State, Zip Code		
Digital Consulting  Full Name Boosters Inc Mailing Address PO Box 70156 City, State, Zip Code Montgomery, AL 36107-0156 Purpose of Disbursement (Optional)  year-to-date \$2,030.26 Amount of each disbursement this period  O7/13/2023 \$5,025.00  Aggregate \$10,211.33			
Full Name Boosters Inc Mailing Address PO Box 70156 City, State, Zip Code Montgomery, AL 36107-0156 Purpose of Disbursement (Optional)  Amount of each disbursement this period  \$5,025.00			\$2,030.26
Boosters Inc  Mailing Address  PO Box 70156  City, State, Zip Code  Montgomery, AL 36107-0156  Purpose of Disbursement (Optional)  Amount of each disbursement this period disbursement this period  \$5,025.00	Digital Consulting	year-to-date	
Mailing Address       07/13/2023       \$5,025.00         PO Box 70156       07/13/2023       \$5,025.00         City, State, Zip Code       Montgomery, AL 36107-0156       Aggregate       \$10,211.33	Full Name	Date	Amount of each
PO Box 70156 07/13/2023 \$5,025.00  City, State, Zip Code  Montgomery, AL 36107-0156  Purpose of Disbursement (Optional) \$10,211.33		(Mo., Day, Year)	disbursement this period
City, State, Zip Code  Montgomery, AL 36107-0156  Purpose of Disbursement (Optional)  Aggregate \$10,211.33	Mailing Address		
Montgomery, AL 36107-0156  Purpose of Disbursement (Optional)  Aggregate \$10,211.33		07/13/2023	\$5,025.00
Purpose of Disbursement (Optional)  Aggregate \$10,211.33			
10,211.33	Montgomery, AL 36107-0156		
Printing of Campaign Materials			\$10,211.33
	Printing of Campaign Materials	year-to-date	

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Disbursements from contributions accumulated Prior to January	1, 2018 or <b>✓</b> On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Neshoba County Fair	(Mo., Day, Year)	disbursement this period
Mailing Address		
16800 Highway 21 S	07/27/2023	\$155.25
City, State, Zip Code		
Philadelphia, MS 39350-7721		
Purpose of Disbursement (Optional)	Aggregate	\$1,500.75
Event Sponsorship	year-to-date	, ,
Full Name	Date	Amount of each
Jamaal Barksdale	(Mo., Day, Year)	disbursement this period
Mailing Address		
446 Pimlico Pl	07/03/2023	\$657.99
City, State, Zip Code		
Jackson, MS 39211-4029		
Purpose of Disbursement (Optional)	Aggregate	\$657.99
Salary	year-to-date	¥ 037.33
Full Name	Date	Amount of each
Morgan Benjamin	(Mo., Day, Year)	disbursement this period
Mailing Address		
4212 28th St	07/14/2023	\$1,812.30
City, State, Zip Code		
Long Island City, NY 11101-6258		
Purpose of Disbursement (Optional)	Aggregate	\$5,436.90
Salary	year-to-date	Ψο, 130.90
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/05/2023	\$616.75
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	φ10 <b>,</b> 337.10
Full Name	Date	Amount of each
Benjamin Hunt	(Mo., Day, Year)	disbursement this period
Mailing Address		
510 S Broadway St	07/17/2023	\$701.08
City, State, Zip Code		
Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional)	Aggregate	\$16,332.53
Reimbursement - Travel, Subscription, Shipping	year-to-date	710,332.33

Name of Candidate or Committee	Brandon	Presley
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Disbursements from contributions accumulated Prior to Janu	ary 1, 2018 or   ✓ On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Benjamin Hunt	(Mo., Day, Year)	disbursement this period
Mailing Address		
510 S Broadway St	07/03/2023	\$2,167.10
City, State, Zip Code		
Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional)	Aggregate	\$16,332.53
Salary	year-to-date	1 10,002.00
Full Name	Date	Amount of each
Jordan Kelley	(Mo., Day, Year)	disbursement this period
Mailing Address		
8364 Barton Dr	07/14/2023	\$2,495.98
City, State, Zip Code		
Strongsville, OH 44149-1017		
Purpose of Disbursement (Optional)	Aggregate	\$11,869.90
Salary	year-to-date	Ψ11 <b>,</b> 009 <b>.</b> 90
Full Name	Date	Amount of each
David Reimer	(Mo., Day, Year)	disbursement this period
Mailing Address		
3511 W Oakridge Ave	07/03/2023	\$820.75
City, State, Zip Code		
Visalia, CA 93291-8005		
Purpose of Disbursement (Optional)	Aggregate	\$1,988.05
Salary	year-to-date	γ1, 300.03
Full Name	Date	Amount of each
Stripe	(Mo., Day, Year)	disbursement this period
Mailing Address		-
3180 18th St	07/03/2023	\$25.92
City, State, Zip Code		
San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional)	Aggregate	\$579.88
Credit Card Processing	year-to-date	4373.00
Full Name	Date	Amount of each
Mark Rennie	(Mo., Day, Year)	disbursement this period
Mailing Address		
3203 Nuttree Woods Dr	07/14/2023	\$1,617.38
City, State, Zip Code		
Midlothian, VA 23112-4503		
Purpose of Disbursement (Optional)	Aggregate	\$5,664.20
Salary	year-to-date	\$3,664.20

Name of Candidate or Committee	Brandon	Presley
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Disbursements from contributions accumulated Prior to January	1, 2018 or	er January 1, 2018
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/14/2023	\$452.52
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	,
Full Name	Date	Amount of each
Stripe	(Mo., Day, Year)	disbursement this period
Mailing Address		
3180 18th St	07/24/2023	\$12.52
City, State, Zip Code		
San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional)	Aggregate	\$579.88
Credit Card Processing	year-to-date	4373.00
Full Name	Date	Amount of each
Dodge's Store	(Mo., Day, Year)	disbursement this period
Mailing Address		
2290 W Main St	07/10/2023	\$38.08
City, State, Zip Code		
Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional)	Aggregate	\$277.41
Travel	year-to-date	7277.41
Full Name	Date	Amount of each
James Warren	(Mo., Day, Year)	disbursement this period
Mailing Address		-
695 Luckney Rd	07/11/2023	\$5,000.00
City, State, Zip Code		
Brandon, MS 39042-9269		
Purpose of Disbursement (Optional)	Aggregate	\$5,000.00
Reimbursement - Travel (Mileage)	year-to-date	Ψ3,000.00
Full Name	Date	Amount of each
Hilton Hotels	(Mo., Day, Year)	disbursement this period
Mailing Address		
7930 Jones Branch Dr	07/13/2023	\$171.77
City, State, Zip Code		
Mclean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate	\$3,347.70
Travel	year-to-date	\$3,341.1U

Name of Candidate or Committee	Brandon	Presley
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Disbursements from contributions accumulated Prior t	to January 1, 2018 or 🗸 On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/27/2023	\$124.34
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	410,037,110
Full Name	Date	Amount of each
Old Town Media	(Mo., Day, Year)	disbursement this period
Mailing Address		
114 Quay St	07/28/2023	\$258,214.00
City, State, Zip Code		
Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional)	Aggregate	\$1,067,825.00
Advertising	year-to-date	V1/00//023.00
Full Name	Date	Amount of each
Walmart	(Mo., Day, Year)	disbursement this period
Mailing Address		
702 SW 8th St	07/07/2023	\$224.52
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate	\$2,129.96
Office Supplies	year-to-date	12,123.30
Full Name	Date	Amount of each
Walmart	(Mo., Day, Year)	disbursement this period
Mailing Address		
702 SW 8th St	07/27/2023	\$59.92
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate	\$2,129.96
Office Supplies	year-to-date	72,123.30
Full Name	Date	Amount of each
United States Postal Service	(Mo., Day, Year)	disbursement this period
Mailing Address		
475 Lenfant Plz SW	07/05/2023	\$28.75
City, State, Zip Code		
Washington, DC 20260-0004		
Purpose of Disbursement (Optional)	Aggregate	\$379.65
Postage	year-to-date	7373.03

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Disbursements from contributions accumulated Prior	to January 1, 2018 or 🗸 On or Afto	er January 1, 2018
Full Name	Date	Amount of each
Lowe's	(Mo., Day, Year)	disbursement this period
Mailing Address		
3354 N Gloster St	07/26/2023	\$20.05
City, State, Zip Code		
Tupelo, MS 38804-9704		
Purpose of Disbursement (Optional)	Aggregate	\$1,677.23
Office Supplies	year-to-date	1 - 7 - 7 - 7 - 7 - 7
Full Name	Date	Amount of each
Shell Oil Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 2463	07/12/2023	\$7.35
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate	\$1,404.53
Travel	year-to-date	Ψ1,101.00
Full Name	Date	Amount of each
Scale to Win	(Mo., Day, Year)	disbursement this period
Mailing Address		
13742 Harper St	07/03/2023	\$1,356.53
City, State, Zip Code		
Santa Ana, CA 92703-1419		
Purpose of Disbursement (Optional)	Aggregate	\$2,030.26
Digital Consulting	year-to-date	72,030.20
Full Name	Date	Amount of each
Dodge's Store	(Mo., Day, Year)	disbursement this period
Mailing Address		
2290 W Main St	07/27/2023	\$32.54
City, State, Zip Code		
Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional)	Aggregate	\$277.41
Travel	year-to-date	7277,11
Full Name	Date	Amount of each
Chevron Stations	(Mo., Day, Year)	disbursement this period
Mailing Address		
6001 Bollinger Canyon Rd	07/03/2023	\$43.36
City, State, Zip Code		
San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional)	Aggregate	\$478.46
Travel	year-to-date	7770.40

Name of Candidate or Committee Brandon Presley

**Reporting Period** \_\_\_\_\_\_ 7/1/2023 \_\_\_\_\_through \_\_\_\_ 7/29/2023

Full Name	Date	Amount of each
Lowe's	(Mo., Day, Year)	disbursement this period
Mailing Address		
3354 N Gloster St	07/17/2023	\$32.15
City, State, Zip Code		
Tupelo, MS 38804-9704		
Purpose of Disbursement (Optional)	Aggregate	\$1 <b>,</b> 677.23
Office Supplies	year-to-date	, , , , , ,
Full Name	Date	Amount of each
Neshoba County Fair	(Mo., Day, Year)	disbursement this period
Mailing Address		
16800 Highway 21 S	07/27/2023	\$103.50
City, State, Zip Code		
Philadelphia, MS 39350-7721		
Purpose of Disbursement (Optional)	Aggregate	\$1,500.75
Event Sponsorship	year-to-date	71,000.70
Full Name	Date	Amount of each
Jada Barnes	(Mo., Day, Year)	disbursement this period
Mailing Address		
395 Lampton Hilltop Rd	07/03/2023	\$1,528.98
City, State, Zip Code		
Columbia, MS 39429-9189		
Purpose of Disbursement (Optional)	Aggregate	\$5,646.32
Salary	year-to-date	70,010.02
Full Name	Date	Amount of each
Adam Beyer	(Mo., Day, Year)	disbursement this period
Mailing Address		
4288 N Gloster St	07/14/2023	\$2,974.48
City, State, Zip Code		
Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional)	Aggregate	\$25 <b>,</b> 291.66
Salary	year-to-date	<sup>+20</sup> / <sub>231</sub> .00
Full Name	Date	Amount of each
Greta Presley	(Mo., Day, Year)	disbursement this period
Mailing Address		
182 Verona Ave	07/17/2023	\$100.00
City, State, Zip Code		
Nettleton, MS 38858-6004		
Purpose of Disbursement (Optional)	Aggregate	\$8,286.80
Reimbursement - Sponsorship	year-to-date	70,200.00

Name of Candidate or Committee Brandon Pres	le
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Disbursements from contributions accumulated Prior to January 1, 2018	or ☑On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Battleaxe Digital	(Mo., Day, Year)	disbursement this period
Mailing Address		
1405 Florida Ave NW	07/11/2023	\$13,000.00
City, State, Zip Code	1	
Washington, DC 20009-5801		
Purpose of Disbursement (Optional)	Aggregate	\$95,303.72
Digital Consulting	year-to-date	100,000
Full Name	Date	Amount of each
Jordan Kelley	(Mo., Day, Year)	disbursement this period
Mailing Address		
8364 Barton Dr	07/03/2023	\$2,320.98
City, State, Zip Code		
Strongsville, OH 44149-1017		
Purpose of Disbursement (Optional)	Aggregate	\$11,869.90
Salary	year-to-date	711,003.30
Full Name	Date	Amount of each
Jaquann King	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 758	07/14/2023	\$1,173.32
City, State, Zip Code		
Fayette, MS 39069-0758		
Purpose of Disbursement (Optional)	Aggregate	\$3,691.16
Salary	year-to-date	43,031.10
Full Name	Date	Amount of each
Mark Rennie	(Mo., Day, Year)	disbursement this period
Mailing Address		
3203 Nuttree Woods Dr	07/03/2023	\$1,528.98
City, State, Zip Code	7	
Midlothian, VA 23112-4503		
Purpose of Disbursement (Optional)	Aggregate	\$5,664.20
Salary	year-to-date	40,001.20
Full Name	Date	Amount of each
Angelo Ruiz	(Mo., Day, Year)	disbursement this period
Mailing Address		
127 S Roach St	07/14/2023	\$2,124.43
		1
City, State, Zip Code		
City, State, Zip Code	Aggregate year-to-date	\$8,237.32

Name of Candidate or Committee Brandon Presi	ley
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Full Name	Date	Amount of each
United Healthcare	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 94017	07/07/2023	\$12,249.66
City, State, Zip Code		
Palatine, IL 60094-4017		
Purpose of Disbursement (Optional)	Aggregate	\$36,299.30
Health Insurance	year-to-date	
Full Name	Date	Amount of each
Bradley Palmer	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 925	07/18/2023	\$2,049.92
City, State, Zip Code		
New Albany, MS 38652-0925		
Purpose of Disbursement (Optional)	Aggregate	\$4,343.72
Reimbursement - Travel (Mileage)	year-to-date	1 - 7 - 2 - 2 - 2 - 2
Full Name	Date	Amount of each
Wyndham Hotel Group	(Mo., Day, Year)	disbursement this period
Mailing Address		
22 Sylvan Way	07/20/2023	\$247.78
City, State, Zip Code		
Parsippany, NJ 07054-3801		
Purpose of Disbursement (Optional)	Aggregate	\$1,785.87
Travel	year-to-date	1=7:0000
Full Name	Date	Amount of each
Dodge's Store	(Mo., Day, Year)	disbursement this period
Mailing Address		
2290 W Main St	07/13/2023	\$20.00
City, State, Zip Code		
Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional)	Aggregate	\$277.41
Travel	year-to-date	,
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/24/2023	\$98.03
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	740,007.40

Name of Candidate or Committee	Brandon	Presley
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Full Name	Date	Amount of each
Walmart	(Mo., Day, Year)	disbursement this period
Mailing Address		
702 SW 8th St	07/26/2023	\$84.53
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate	\$2,129.96
Office Supplies	year-to-date	1 = 7 = 2 = 2 = 2
Full Name	Date	Amount of each
J. Walter Michel Agency, Inc.	(Mo., Day, Year)	disbursement this period
Mailing Address		
2660 Ridgewood Rd	07/06/2023	\$2,500.00
City, State, Zip Code		
Jackson, MS 39216-4921		
Purpose of Disbursement (Optional)	Aggregate	\$2,500.00
Rent	year-to-date	72,000.00
Full Name	Date	Amount of each
Firestone Complete Auto Care	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 4th Ave S	07/24/2023	\$1,563.15
City, State, Zip Code		
Nashville, TN 37201-2255		
Purpose of Disbursement (Optional)	Aggregate	\$1,584.59
Travel	year-to-date	41,001.03
Full Name	Date	Amount of each
Shell Oil Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 2463	07/10/2023	\$34.19
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate	\$1,404.53
Travel	year-to-date	Ψ1 <b>,</b> 101 <b>.</b> 33
Full Name	Date	Amount of each
MBA Consulting Group	(Mo., Day, Year)	disbursement this period
Mailing Address		
611 Pennsylvania Ave SE	07/03/2023	\$10,120.00
City, State, Zip Code		
Washington, DC 20003-4303		
Purpose of Disbursement (Optional)	Aggregate	\$40,240.00
Compliance Services	year-to-date	740,240.00

Name of Candidate or Committee	Brandon	Presley
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Disbursements from contributions accumulated Prior to January 1	, 2018 or 🗸 On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Bradley Palmer	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 925	07/03/2023	\$2,293.80
City, State, Zip Code		
New Albany, MS 38652-0925		
Purpose of Disbursement (Optional)	Aggregate	\$4,343.72
Reimbursement - Travel (Mileage)	year-to-date	-,
Full Name	Date	Amount of each
Chevron Stations	(Mo., Day, Year)	disbursement this period
Mailing Address		
6001 Bollinger Canyon Rd	07/05/2023	\$39.84
City, State, Zip Code		
San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional)	Aggregate	\$478.46
Travel	year-to-date	Ψ170 <b>:</b> 10
Full Name	Date	Amount of each
Morgan Benjamin	(Mo., Day, Year)	disbursement this period
Mailing Address		
4212 28th St	07/03/2023	\$1,812.30
City, State, Zip Code		
Long Island City, NY 11101-6258		
Purpose of Disbursement (Optional)	Aggregate	\$5,436.90
Salary	year-to-date	Ψ3, 130.30
Full Name	Date	Amount of each
Jones Mandel	(Mo., Day, Year)	disbursement this period
Mailing Address		
1752 NW Market St	07/13/2023	\$12,000.00
City, State, Zip Code		
Seattle, WA 98107-5264		
Purpose of Disbursement (Optional)	Aggregate	\$12,000.00
Research Consulting	year-to-date	Ψ12,000.00
Full Name	Date	Amount of each
Andrew Buehrer	(Mo., Day, Year)	disbursement this period
Mailing Address		
3249 Pepper Ridge Dr	07/14/2023	\$1,812.30
City, State, Zip Code		
Maumee, OH 43537-9697		
Purpose of Disbursement (Optional)	Aggregate	62 602 62
	year-to-date	\$3,603.63

Name of Candidate or Committee	Brandon	Presley
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 Reporting Period
 7/1/2023
 through
 7/29/2023

Full Name	Date	Amount of each
KMM Consulting	(Mo., Day, Year)	disbursement this period
Mailing Address		
8242 Birch St	07/11/2023	\$7,500.00
City, State, Zip Code		
New Orleans, LA 70118-2822		
Purpose of Disbursement (Optional)	Aggregate	\$55 <b>,</b> 774.44
Fundraising Consulting	year-to-date	400,771.11
Full Name	Date	Amount of each
Jaquann King	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 758	07/03/2023	\$1,528.98
City, State, Zip Code		
Fayette, MS 39069-0758		
Purpose of Disbursement (Optional)	Aggregate	\$3,691.16
Salary	year-to-date	Ψ3,031.10
Full Name	Date	Amount of each
Katharine Kurz	(Mo., Day, Year)	disbursement this period
Mailing Address		
634 W Main St	07/14/2023	\$1,994.23
City, State, Zip Code		
Tupelo, MS 38804-3745		
Purpose of Disbursement (Optional)	Aggregate	\$9,230.30
Salary	year-to-date	+3,230.30
Full Name	Date	Amount of each
Buffalo Wild Wings	(Mo., Day, Year)	disbursement this period
Mailing Address		
5500 Wayzata Blvd	07/21/2023	\$202.79
City, State, Zip Code		
Minneapolis, MN 55416-1237		
Purpose of Disbursement (Optional)	Aggregate	\$202.79
Staff Meals	year-to-date	7202.73
Full Name	Date	Amount of each
Angelo Ruiz	(Mo., Day, Year)	disbursement this period
Mailing Address		
127 S Roach St	07/03/2023	\$1,994.23
City, State, Zip Code		
Jackson, MS 39201-2916		
Purpose of Disbursement (Optional)	Aggregate	\$8,237.32
Salary	year-to-date	70,231.32

Name of Candidate or Committee Brandon Presley

**Reporting Period** \_\_\_\_\_\_ 7/1/2023 \_\_\_\_\_through \_\_\_\_ 7/29/2023

Full Name	Date	Amount of each
Shinitra Russell	(Mo., Day, Year)	disbursement this period
Mailing Address		
1185 Collier Rd NW	07/14/2023	\$2,720.98
City, State, Zip Code		
Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional)	Aggregate	\$16,758.38
Salary	year-to-date	410,700.00
Full Name	Date	Amount of each
Hilton Hotels	(Mo., Day, Year)	disbursement this period
Mailing Address		
7930 Jones Branch Dr	07/17/2023	\$151.58
City, State, Zip Code		
Mclean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate	\$3,347.70
Travel	year-to-date	40,017.70
Full Name	Date	Amount of each
Wyndham Hotel Group	(Mo., Day, Year)	disbursement this period
Mailing Address		
22 Sylvan Way	07/20/2023	\$247.78
City, State, Zip Code		
Parsippany, NJ 07054-3801		
Purpose of Disbursement (Optional)	Aggregate	\$1 <b>,</b> 785.87
Travel	year-to-date	, ,
Full Name	Date	Amount of each
Dodge's Store	(Mo., Day, Year)	disbursement this period
Mailing Address		
2290 W Main St	07/03/2023	-\$2.27
City, State, Zip Code		
Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional)	Aggregate	\$277.41
Travel Refund	year-to-date	,
Full Name	Date	Amount of each
Walmart	(Mo., Day, Year)	disbursement this period
Mailing Address		
702 SW 8th St	07/26/2023	\$177.75
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate	\$2 <b>,</b> 129.96
Office Supplies	year-to-date	1 , 123.30

Name of Candidate or Committee	Brandon	Presley
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Disbursements from contributions accumulated Prior to January 1, 201	l8 or ☑On or Aft	er January 1, 2018
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	
Mailing Address		
200 Spectrum Center Dr	07/12/2023	\$71.50
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	Ψ 10 <b>,</b> 03 / <b>.</b> 10
Full Name	Date	Amount of each
The Law Office of Michael Winfield	(Mo., Day, Year)	
Mailing Address		
106 S President St	07/03/2023	\$1,500.00
City, State, Zip Code		
Jackson, MS 39201-3601		
Purpose of Disbursement (Optional)	Aggregate	\$4,500.00
Rent	year-to-date	γ <b>1,</b> 300.00
Full Name	Date	Amount of each
Indianola Pecan House	(Mo., Day, Year)	disbursement this period
Mailing Address		
1013 US-82	07/07/2023	\$127.95
City, State, Zip Code		
Indianola, MS 38751		
Purpose of Disbursement (Optional)	Aggregate	\$210.85
Staff Meals	year-to-date	7210.03
Full Name	Date	Amount of each
Acme Investment Company	(Mo., Day, Year)	disbursement this period
Mailing Address		
2032 Tidewater Ln	07/03/2023	\$500.00
City, State, Zip Code		
Madison, MS 39110-8981		
Purpose of Disbursement (Optional)	Aggregate	\$1,000.00
Rent	year-to-date	Ψ1,000.00
Full Name	Date	Amount of each
Old Town Media	(Mo., Day, Year)	
Mailing Address		
114 Quay St	07/07/2023	\$205,155.00
City, State, Zip Code		
Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional)	Aggregate	\$1,067,825.00
Advertising	year-to-date	71,007,023.00

Name of Candidate or Committee Brandon Presley

**Reporting Period** \_\_\_\_\_\_ 7/1/2023 \_\_\_\_\_through \_\_\_\_\_ 7/29/2023

Full Name	Date	Amount of each
Neshoba County Fair	(Mo., Day, Year)	disbursement this period
Mailing Address		
16800 Highway 21 S	07/28/2023	\$1,242.00
City, State, Zip Code		
Philadelphia, MS 39350-7721		
Purpose of Disbursement (Optional)	Aggregate	\$1,500.75
Event Sponsorship	year-to-date	1 = 7 = 2 = 2 = 2
Full Name	Date	Amount of each
Shell Oil Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 2463	07/05/2023	\$57.98
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate	\$1,404.53
Travel	year-to-date	Ψ1 <b>/</b> 101 <b>.</b> 33
Full Name	Date	Amount of each
Bumperactive	(Mo., Day, Year)	disbursement this period
Mailing Address		
5907 Burnet Rd	07/03/2023	\$1,074.28
City, State, Zip Code		
Austin, TX 78757-3224		
Purpose of Disbursement (Optional)	Aggregate	\$7 <b>,</b> 365.17
Store Overhead	year-to-date	+ / <b>/</b> 3 6 3 <b>.</b> 1 /
Full Name	Date	Amount of each
Lowe's	(Mo., Day, Year)	disbursement this period
Mailing Address		
3354 N Gloster St	07/07/2023	\$408.74
City, State, Zip Code		
Tupelo, MS 38804-9704		
Purpose of Disbursement (Optional)	Aggregate	\$1,677.23
Office Supplies	year-to-date	41/077120
Full Name	Date	Amount of each
Adam Beyer	(Mo., Day, Year)	disbursement this period
Mailing Address		
4288 N Gloster St	07/03/2023	\$2,974.48
City, State, Zip Code		
Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional)	Aggregate	\$25,291.66
Salary	year-to-date	723,231.00

Name of Candidate or Committee	Brandon	Presley
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Full Name	Date	Amount of each
Alexis Carraway	(Mo., Day, Year)	disbursement this period
Mailing Address		
106 Roberts Cv	07/14/2023	\$1,486.43
City, State, Zip Code		
Starkville, MS 39759-6628		
Purpose of Disbursement (Optional)	Aggregate	\$3 <b>,</b> 642.76
Salary	year-to-date	
Full Name	Date	Amount of each
KEP Strategies, LLC	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 450268	07/11/2023	\$7,500.00
City, State, Zip Code		
Atlanta, GA 31145-0268		
Purpose of Disbursement (Optional)	Aggregate	\$55,108.46
Fundraising Consulting	year-to-date	400,100,10
Full Name	Date	Amount of each
Katharine Kurz	(Mo., Day, Year)	disbursement this period
Mailing Address		
634 W Main St	07/03/2023	\$1,994.23
City, State, Zip Code		
Tupelo, MS 38804-3745		
Purpose of Disbursement (Optional)	Aggregate	\$9,230.30
Salary	year-to-date	10,2000
Full Name	Date	Amount of each
Issac Lampner	(Mo., Day, Year)	disbursement this period
Mailing Address		
945 Mitchell St	07/14/2023	\$2,798.60
City, State, Zip Code		
Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional)	Aggregate	\$38,579.18
Salary	year-to-date	. ,
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/06/2023	\$54.69
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	, 10,037.10

Name of Candidate or Committee	Brandon	Presley
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Disbursements from contributions accumulated Prior to	January 1, 2018 or 🗸 On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Cambria Hotels	(Mo., Day, Year)	disbursement this period
Mailing Address		
1 Choice Hotels Cir	07/21/2023	\$461.25
City, State, Zip Code		
Rockville, MD 20850-5172		
Purpose of Disbursement (Optional)	Aggregate	\$944.50
Travel	year-to-date	, , , , , , , , , , , , , , , , , , , ,
Full Name	Date	Amount of each
Shinitra Russell	(Mo., Day, Year)	disbursement this period
Mailing Address		
1185 Collier Rd NW	07/03/2023	\$2,320.98
City, State, Zip Code		
Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional)	Aggregate	\$16,758.38
Salary	year-to-date	Ψ10 <b>,</b> 730 <b>.</b> 30
Full Name	Date	Amount of each
Jacob Smith	(Mo., Day, Year)	disbursement this period
Mailing Address		
4100 N Gloster St	07/14/2023	\$1,994.23
City, State, Zip Code		
Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional)	Aggregate	\$14,595.93
Salary	year-to-date	γ14 <b>,</b> 333.33
Full Name	Date	Amount of each
Hilton Hotels	(Mo., Day, Year)	disbursement this period
Mailing Address		-
7930 Jones Branch Dr	07/17/2023	\$321.76
City, State, Zip Code		
Mclean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate	\$3,347.70
Travel	year-to-date	Ψ3,341.10
Full Name	Date	Amount of each
Wyndham Hotel Group	(Mo., Day, Year)	disbursement this period
Mailing Address		
22 Sylvan Way	07/20/2023	\$247.78
City, State, Zip Code		
Parsippany, NJ 07054-3801		
Purpose of Disbursement (Optional)	Aggregate	\$1,785.87
Travel	year-to-date	Ş1,/03.8/

Name of Candidate or Committee	Brandon	Presley
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Full Name	Date	Amount of each
Walmart	(Mo., Day, Year)	disbursement this period
Mailing Address		
702 SW 8th St	07/25/2023	\$172.46
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate	\$2,129.96
Office Supplies	year-to-date	-,
Full Name	Date	Amount of each
Nettleton Main Street Association	(Mo., Day, Year)	disbursement this period
Mailing Address		
7122 Will Robbins Hwy	07/03/2023	\$250.00
City, State, Zip Code		
Nettleton, MS 38858-5918		
Purpose of Disbursement (Optional)	Aggregate	\$250.00
Event Sponsorship	year-to-date	Ψ230.00
Full Name	Date	Amount of each
Indianola Pecan House	(Mo., Day, Year)	disbursement this period
Mailing Address		
1013 US-82	07/07/2023	\$82.90
City, State, Zip Code		
Indianola, MS 38751		
Purpose of Disbursement (Optional)	Aggregate	\$210.85
Staff Meals	year-to-date	7210.00
Full Name	Date	Amount of each
Old Town Media	(Mo., Day, Year)	disbursement this period
Mailing Address		-
114 Quay St	07/14/2023	\$320,779.00
City, State, Zip Code		
Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional)	Aggregate	\$1,067,825.00
Advertising	year-to-date	Ψ1,007,023.00
Full Name	Date	Amount of each
Shell Oil Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 2463	07/03/2023	\$52.07
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate	\$1,404.53
Travel	year-to-date	۶۱,404.53

Name of Candidate or Committee	Brandon	Presley
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Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/17/2023	\$101.19
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	4 10 / 03 / 1 10
Full Name	Date	Amount of each
Silver Star Hotel & Casino	(Mo., Day, Year)	disbursement this period
Mailing Address		
13541 MS-16	07/28/2023	\$287.83
City, State, Zip Code		
Philadelphia, MS 39350		
Purpose of Disbursement (Optional)	Aggregate	\$863.49
Travel	year-to-date	7003.13
Full Name	Date	Amount of each
Andrew Buehrer	(Mo., Day, Year)	disbursement this period
Mailing Address		
3249 Pepper Ridge Dr	07/03/2023	\$1,623.42
City, State, Zip Code		
Maumee, OH 43537-9697		
Purpose of Disbursement (Optional)	Aggregate	\$3,603.63
Salary	year-to-date	γο <b>,</b> ουσ. οσ
Full Name	Date	Amount of each
Louise Cole	(Mo., Day, Year)	disbursement this period
Mailing Address		
518 N Church St	07/14/2023	\$1,582.62
City, State, Zip Code		
Okolona, MS 38860-1017		
Purpose of Disbursement (Optional)	Aggregate	\$2,403.37
Salary	year-to-date	72,103.37
Full Name	Date	Amount of each
Switchboard Public Benefit Corp.	(Mo., Day, Year)	disbursement this period
Mailing Address		-
195 Binney St	07/11/2023	\$7,120.21
City, State, Zip Code		
Cambridge, MA 02142-1095		
Purpose of Disbursement (Optional)	Aggregate	\$29,049.12
Digital Fundraising	year-to-date	Ş∠ઝ <b>,</b> ∪4ઝ.1∠

Name of Candidate or Committee Brandon Presi	ley
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Full Name	Date	Amount of each
Issac Lampner	(Mo., Day, Year)	disbursement this period
Mailing Address		
945 Mitchell St	07/03/2023	\$2,798.60
City, State, Zip Code		
Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional)	Aggregate	\$38,579.18
Salary	year-to-date	, , , , , , , , , , , , , , , , , , , ,
Full Name	Date	Amount of each
Jake Laves	(Mo., Day, Year)	disbursement this period
Mailing Address		
699 Nation Hills Dr	07/14/2023	\$2,974.48
City, State, Zip Code		
Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional)	Aggregate	\$25,161.09
Salary	year-to-date	120,200
Full Name	Date	Amount of each
Cambria Hotels	(Mo., Day, Year)	disbursement this period
Mailing Address		
1 Choice Hotels Cir	07/21/2023	\$483.25
City, State, Zip Code		
Rockville, MD 20850-5172		
Purpose of Disbursement (Optional)	Aggregate	\$944.50
Travel	year-to-date	, , , , , ,
Full Name	Date	Amount of each
Jacob Smith	(Mo., Day, Year)	disbursement this period
Mailing Address		
4100 N Gloster St	07/03/2023	\$1,994.23
City, State, Zip Code		
Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional)	Aggregate	\$14,595.93
Salary	year-to-date	, , ,
Full Name	Date	Amount of each
Daniel Trimble	(Mo., Day, Year)	disbursement this period
Mailing Address		
8 Iris Ln	07/14/2023	\$308.50
City, State, Zip Code		
Redding, CT 06896-2112		
Purpose of Disbursement (Optional)	Aggregate	\$308.50
Salary	year-to-date	1300.00

Name of Candidate or Committee	Brandon	Presley
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Disbursements from contributions accumulated Prior to J	anuary 1, 2018 or 🗸 On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Hilton Hotels	(Mo., Day, Year)	disbursement this period
Mailing Address		
7930 Jones Branch Dr	07/17/2023	\$160.88
City, State, Zip Code		
Mclean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate	\$3,347.70
Travel	year-to-date	,
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/19/2023	\$85.81
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	φ±0 <b>,</b> 557.±0
Full Name	Date	Amount of each
Walmart	(Mo., Day, Year)	disbursement this period
Mailing Address		-
702 SW 8th St	07/17/2023	\$9.09
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate	\$2,129.96
Office Supplies	year-to-date	72,123.30
Full Name	Date	Amount of each
Walmart	(Mo., Day, Year)	disbursement this period
Mailing Address		
702 SW 8th St	07/24/2023	\$21.96
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate	\$2,129.96
Office Supplies	year-to-date	72,129.90
Full Name	Date	Amount of each
Tom Bigbee Fiber	(Mo., Day, Year)	disbursement this period
Mailing Address		
1346 Auburn Rd	07/04/2023	\$304.90
City, State, Zip Code		
Tupelo, MS 38804-8412	1	
Purpose of Disbursement (Optional)	Aggregate	č1 402 OF
Internet	year-to-date	\$1,493.25

Name of Candidate or Committee Brandon Pres	le
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Disbursements from contributions accumulated Prior to January 1,	2018 or 🗸 On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Silas Adams	(Mo., Day, Year)	disbursement this period
Mailing Address		
4527 Union Ave	07/25/2023	\$130.00
City, State, Zip Code		
Nettleton, MS 38858-6037		
Purpose of Disbursement (Optional)	Aggregate	\$280.00
Reimbursement - Travel (Mileage)	year-to-date	7200.00
Full Name	Date	Amount of each
ActBlue Technical Services	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 382110	07/10/2023	\$1,025.32
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate	\$18,074.89
Credit Card Processing	year-to-date	710,074.09
Full Name	Date	Amount of each
Old Town Media	(Mo., Day, Year)	disbursement this period
Mailing Address		
114 Quay St	07/21/2023	\$283,677.00
City, State, Zip Code		
Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional)	Aggregate	\$1,067,825.00
Advertising	year-to-date	71,007,023.00
Full Name	Date	Amount of each
Amazon, Inc.	(Mo., Day, Year)	disbursement this period
Mailing Address		
410 Terry Ave N	07/12/2023	\$116.93
City, State, Zip Code		
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Aggregate	\$1,298.94
Office Supplies	year-to-date	71,290.94
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address	, , , ,	
200 Spectrum Center Dr	07/03/2023	\$394.36
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	¢40 F07 40
Credit Card Processing	year-to-date	\$40,597.46

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Disbursements from contributions accumulated Prior to January 1, 2	2018 or ☑ On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/01/2023	\$704.88
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	Ψ10 <b>,</b> 03, 110
Full Name	Date	Amount of each
Will Palmer	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 925	07/03/2023	\$290.00
City, State, Zip Code		
New Albany, MS 38652-0925		
Purpose of Disbursement (Optional)	Aggregate	\$507.50
Reimbursement - Travel (Mileage)	year-to-date	4307.30
Full Name	Date	Amount of each
Jada Barnes	(Mo., Day, Year)	disbursement this period
Mailing Address		
395 Lampton Hilltop Rd	07/28/2023	\$1,528.98
City, State, Zip Code		
Columbia, MS 39429-9189		
Purpose of Disbursement (Optional)	Aggregate	\$5,646.32
Salary	year-to-date	Ψ3,040.32
Full Name	Date	Amount of each
United Healthcare	(Mo., Day, Year)	disbursement this period
Mailing Address		-
PO Box 94017	07/21/2023	\$9,957.92
City, State, Zip Code		
Palatine, IL 60094-4017		
Purpose of Disbursement (Optional)	Aggregate	\$36,299.30
Health Insurance	year-to-date	Ψ30 <b>,</b> 233.30
Full Name	Date	Amount of each
Alexis Carraway	(Mo., Day, Year)	disbursement this period
Mailing Address		-
106 Roberts Cv	07/03/2023	\$1,351.15
City, State, Zip Code		
Starkville, MS 39759-6628		
Purpose of Disbursement (Optional)	Aggregate	\$3,642.76
Salary	year-to-date	73,042.70

Name of Candidate or Committee	Brandon	Presley
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Disbursements from contributions accumulated Prior to Ja	nuary 1, 2018 or 🗸 On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Nicholas Cosmo	(Mo., Day, Year)	disbursement this period
Mailing Address		
202 Milford St	07/14/2023	\$2,320.98
City, State, Zip Code		
Tupelo, MS 38801-4687		
Purpose of Disbursement (Optional)	Aggregate	\$2,320.98
Salary	year-to-date	1 = 7 = 2 = 2 = 2
Full Name	Date	Amount of each
Jake Laves	(Mo., Day, Year)	disbursement this period
Mailing Address		
699 Nation Hills Dr	07/03/2023	\$2,974.48
City, State, Zip Code		
Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional)	Aggregate	\$25,161.09
Salary	year-to-date	1 = 2 , = 2 = 2 = 2
Full Name	Date	Amount of each
Jefferson Stevens, LLC	(Mo., Day, Year)	disbursement this period
Mailing Address		
5907 Baxter Dr	07/03/2023	\$7,500.00
City, State, Zip Code		
Jackson, MS 39211-3319		
Purpose of Disbursement (Optional)	Aggregate	\$26,445.56
Political Strategy Consultant	year-to-date	, ,,
Full Name	Date	Amount of each
Julie McDermott	(Mo., Day, Year)	disbursement this period
Mailing Address		
1119 Bratton Rd	07/14/2023	\$1,909.95
City, State, Zip Code		
New Albany, MS 38652-9328		
Purpose of Disbursement (Optional)	Aggregate	\$4,399.55
Salary	year-to-date	, ,
Full Name	Date	Amount of each
GMBSC of Mississippi Inc	(Mo., Day, Year)	disbursement this period
Mailing Address		
3160 J R Lynch St	07/07/2023	\$1,500.00
City, State, Zip Code		
Jackson, MS 39209-7335		
Purpose of Disbursement (Optional)	Aggregate	\$1,500.00
Event Sponsorship	year-to-date	71,300.00

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Disbursements from contributions accumulated Prior to January 1, 20	18 or	er January 1, 2018
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/20/2023	\$106.66
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	410,037,110
Full Name	Date	Amount of each
Shalonda Spencer	(Mo., Day, Year)	disbursement this period
Mailing Address		
1509 Hawthorne Pl	07/03/2023	\$7,335.58
City, State, Zip Code		
Clinton, MS 39056-3910		
Purpose of Disbursement (Optional)	Aggregate	\$22,880.65
Salary	year-to-date	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Full Name	Date	Amount of each
Michael Waller	(Mo., Day, Year)	disbursement this period
Mailing Address		
103 Redbud Dr	07/14/2023	\$2,081.03
City, State, Zip Code		
Hendersonville, TN 37075-3982		
Purpose of Disbursement (Optional)	Aggregate	\$8,150.52
Salary	year-to-date	Ψ0 <b>,</b> 130.32
Full Name	Date	Amount of each
Char Restaurant	(Mo., Day, Year)	disbursement this period
Mailing Address		-
4500 Interstate 55 North Frontage Rd	07/25/2023	\$420.19
City, State, Zip Code		
Jackson, MS 39211		
Purpose of Disbursement (Optional)	Aggregate	\$420.19
Staff Meals	year-to-date	7420.19
Full Name	Date	Amount of each
Hilton Hotels	(Mo., Day, Year)	disbursement this period
Mailing Address		
7930 Jones Branch Dr	07/17/2023	\$338.11
City, State, Zip Code		
City, State, Zip Code Mclean, VA 22102-3388		
	Aggregate year-to-date	\$3,347.70

Name of Candidate or Committee Brandon Presley

**Reporting Period** \_\_\_\_\_\_ 7/1/2023 \_\_\_\_\_ through \_\_\_\_\_ 7/29/2023

Full Name	to January 1, 2018 or  On or Afte	<u> </u>
	Date (Mo. Day Year)	Amount of each
Wyndham Hotel Group  Mailing Address	(Mo., Day, Year)	disbursement this period
22 Sylvan Way	07/20/2023	\$247.78
City, State, Zip Code	07/20/2023	7247.70
Parsippany, NJ 07054-3801		
Purpose of Disbursement (Optional)	Aggregate	
Travel	year-to-date	\$1,785.87
Full Name		
Firestone Complete Auto Care	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	(MO., Day, Teal)	dispursement this period
200 4th Ave S	07/13/2023	\$21.44
City, State, Zip Code	07/13/2023	721.44
Nashville, TN 37201-2255		
Purpose of Disbursement (Optional)	Aggregate	
Travel	year-to-date	\$1,584.59
Full Name		
Walmart	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	(, 223, 122.)	diobarocinont tino period
702 SW 8th St.	07/21/2023	\$327.25
City, State, Zip Code	0 , , 21, 2020	4027.20
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate	20 100 06
Office Supplies	year-to-date	\$2,129.96
Full Name	D-4-	A
Mississippi Democratic Party	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
811 E River Pl	07/12/2023	\$18,000.00
City, State, Zip Code		,
Jackson, MS 39202-3432		
Purpose of Disbursement (Optional)	Aggregate	622 164 00
Political Contribution	year-to-date	\$23,164.00
Full Name	Data	Amount of each
Silly Sisters, LLC	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	, , ,	
310 County Road 640	07/03/2023	\$900.00
City, State, Zip Code		
Baldwyn, MS 38824-8680		
Purpose of Disbursement (Optional)	Aggregate	¢E 400 00
Rent	year-to-date	\$5,400.00

Name of Candidate or Committee	Brandon	Presley
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Full Name	Disbursements from contributions accumulated Prior to Janua	ary 1, 2018 or	er January 1, 2018
Malling Address   Malling Ad	Full Name	Date	Amount of each
318.0   18th St	Stripe		
City, State, Zip Code         San Francisco, CA 94110-2042           Purpose of Disbursement (Optional)         Aggregate year-to-date         \$579.88           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period disbursement this period disbursement this period disbursement this period disbursement (Optional)           City, State, Zip Code         O7/17/2023         \$22.03           San Francisco, CA 94110-2042         Aggregate year-to-date         \$79.88           Purpose of Disbursement (Optional)         Aggregate year-to-date         \$79.88           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period disbursement this period           Mailing Address         3501 E Frontage Rd         07/03/2023         \$135.23           City, State, Zip Code         Aggregate year-to-date         \$149,847.77           Purpose of Disbursement (Optional)         Aggregate year-to-date         \$149,847.77           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Mailing Address         3614 N Fremont St         07/17/2023         \$2,081.10           City, State, Zip Code         Chick State, Zip Code         Aggregate year-to-date         \$15,050.48           Purpose of Disbursement (Optional)         Aggregate year-to-date         \$15,050.48         \$15,050.48 <td>Mailing Address</td> <td></td> <td></td>	Mailing Address		
San Francisco, CA 94110-2042  Purpose of Disbursement (Optional) Credit Card Processing  Full Name Stripe  Malling Address 3180 18th St  City, State, Zip Code San Francisco, CA 94110-2042  Purpose of Disbursement (Optional) Credit Card Processing  Full Name Aggregate year-to-date  Purpose of Disbursement (Optional) Credit Card Processing  Full Name Aggregate year-to-date  S579.88  Amount of each disbursement this period  Aggregate year-to-date  S579.88  Amount of each disbursement this period  Malling Address  3501 E Frontage Rd  City, State, Zip Code  Tampar, FL 33607-1723  Purpose of Disbursement (Optional) Payrol1 Fees  Ethan Cox  Malling Address  3614 N Fremont St  City, State, Zip Code  Tampar, FL 36613-4372  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Full Name Mark Rennie Mark Rennie Mark Rennie Mark Rennie Mark Rennie Malling Address  3203 Nuttree Woods Dr  City, State, Zip Code  Totage of Disbursement (Optional) Railing Address  3203 Nuttree Woods Dr  City, State, Zip Code  Totage of Disbursement (Optional) Railing Address  3203 Nuttree Woods Dr  City, State, Zip Code  Malling Address  3203 Nuttree Woods Dr  City, State, Zip Code  Malling Address  3203 Nuttree Woods Dr  City, State, Zip Code  Malling Address  3203 Nuttree Woods Dr  City, State, Zip Code  Midling Address  3203 Nuttree Woods Dr  City, State, Zip Code  Midling Address  3203 Nuttree Woods Dr  City, State, Zip Code  Midlothan, VA 23112-4503  Purpose of Disbursement (Optional) Reported the State of Adgregate year-to-date  S579.88  Amount of each disbursement this period  Aggregate year-to-date  S15, 559.88  Amount of each disbursement this period  Aggregate year-to-date  S15, 559.88  Amount of each disbursement this period  Aggregate year-to-date  S15, 559.88  S2, 664.20	3180 18th St	07/10/2023	\$37.12
Purpose of Disbursement (Optional) Credit Card Processing  Pull Name Stripe Mailing Address 3180 18th St Credit Card Processing  Purpose of Disbursement (Optional) Credit Card Processing  Purpose of Disbursement (Optional) Aggregate (Mo., Day, Year) Full Name Purpose of Disbursement (Optional) Aggregate (Mo., Day, Year) Aggregate (Mo., Day, Year) City, State, Zip Code  Tampa, FL 33607-1723  Purpose of Disbursement (Optional) Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period  Aggregate (Mo., Day, Year) Amount of each disbursement this period	City, State, Zip Code		
Credit Card Processing         year-to-date         \$379.88           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period disbursement (Drift State, Zip Code           3180 18th St         07/17/2023         \$22.03           City, State, Zip Code         Aggregate year-to-date         \$579.88           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period disbursement this period           Mailing Address         3501 E Frontage Rd         07/03/2023         \$135.23           City, State, Zip Code         20         \$149,847.77           Payroll Fees         Date (Mo., Day, Year)         Amount of each disbursement (Optional)           Full Name         Date (Mo., Day, Year)         Amount of each disbursement this period           Mailing Address         3614 N Fremont St         07/17/2023         \$2,081.10           City, State, Zip Code         07/17/2023         \$2,081.10           City, State, Zip Code         07/17/2023         \$15,050.48           Full Name         Aggregate year-to-date         \$15,050.48           Full Name         Aggregate year-to-date         \$15,050.48           Full Name         Amount of each disbursement (Optional)         Aggregate year-to-date <td>San Francisco, CA 94110-2042</td> <td></td> <td></td>	San Francisco, CA 94110-2042		
Full Name Stripe Malling Address 3180 18th St	Purpose of Disbursement (Optional)		\$579.88
Stripe	Credit Card Processing	year-to-date	4073.00
Stripe	Full Name	Date	Amount of each
3180 18th St	Stripe		
City, State, Zip Code       San Francisco, CA 94110-2042       Purpose of Disbursement (Optional)     Aggregate year-to-date     \$579.88       Credit Card Processing     Date (Mo., Day, Year)     Amount of each disbursement this period       Full Name     07/03/2023     \$135.23       City, State, Zip Code     Tampa, FL 33607-1723     Aggregate year-to-date     \$149,847.77       Purpose of Disbursement (Optional)     Aggregate year-to-date     \$149,847.77       Full Name     Date (Mo., Day, Year)     Amount of each disbursement this period       Mailing Address     3614 N Fremont St     07/17/2023     \$2,081.10       City, State, Zip Code     Chicago, TL 60613-4372     Aggregate year-to-date     \$15,050.48       Purpose of Disbursement (Optional)     Aggregate year-to-date     \$15,050.48       Reimbursement - Travel, Supplies, Shipping     Date (Mo., Day, Year)     Amount of each disbursement this period       Full Name     Date (Mo., Day, Year)     Amount of each disbursement this period       Mailing Address     3203 Nuttree Woods Dr     07/28/2023     \$1,528.98       City, State, Zip Code     07/28/2023     \$1,528.98       City, State, Zip Code     07/28/2024     \$1,528.98       Midlothian, VA 23112-4503     \$2,664.20       Purpose of Disbursement (Optional)     \$5,664.20	Mailing Address		
San Francisco, CA 94110-2042   Purpose of Disbursement (Optional)   Aggregate year-to-date   \$579.88   Pull Name   Date (Mo., Day, Year)   Aggregate disbursement this period   Malling Address   Aggregate year-to-date   \$149,847.77   Payroll Fees   Pull Name   Date (Mo., Day, Year)   Amount of each disbursement (Optional)   Aggregate year-to-date   \$149,847.77   Payroll Fees   Purpose of Disbursement (Optional)   Aggregate year-to-date   \$149,847.77   Payroll Fees   Purpose of Disbursement (Optional)   Aggregate year-to-date   \$149,847.77   Payroll Fees   O7/17/2023   \$2,081.10   Purpose of Disbursement (Optional)   Aggregate year-to-date   \$15,050.48   Purpose of Disbursement (Optional)   \$1,528.98   Purpose of Disbursement (Optional)   Aggregate year-to-date   \$1,528.98   Purpose of Disbursement (Optional)   Aggregate year-to-date year-to-date   \$1,528.98   Purpose of Disbursement (Optional)   Aggregate year-to-date year-to-date year-to-date   \$1,528.98   Purpose of Disbursement (Optional)   Aggregate year-to-date year	3180 18th St	07/17/2023	\$22.03
Purpose of Disbursement (Optional)     Aggregate year-to-date     \$579.88       Full Name     Date (Mo., Day, Year)     Amount of each disbursement this period       Mailling Address     3501 E Frontage Rd     07/03/2023     \$135.23       City, State, Zip Code     Tampa, FL 33607-1723     Aggregate year-to-date     \$149,847.77       Purpose of Disbursement (Optional)     Aggregate year-to-date     \$149,847.77       Payroll Fees     Date (Mo., Day, Year)     Amount of each disbursement this period       Mailing Address     3614 N Fremont St     07/17/2023     \$2,081.10       City, State, Zip Code     Chicago, IL 60613-4372     Aggregate year-to-date     \$15,050.48       Purpose of Disbursement (Optional)     Aggregate (Mo., Day, Year)     \$15,050.48       Reimbursement - Travel, Supplies, Shipping     Amount of each disbursement this period       Full Name     Date (Mo., Day, Year)     Amount of each disbursement this period       Mailing Address     3203 Nuttree Woods Dr     07/28/2023     \$1,528.98       City, State, Zip Code     City, State, Zip Code     97/28/2023     \$1,528.98       Midlothian, VA 23112-4503     Purpose of Disbursement (Optional)     \$9,664.20	City, State, Zip Code		
Credit Card Processing     year-to-date     \$55/9.88       Full Name     Date (Mo., Day, Year)     Amount of each disbursement this period       Mailing Address     07/03/2023     \$135.23       2501 E Frontage Rd     07/03/2023     \$135.23       City, State, Zip Code     Tampa, FL 33607-1723     Aggregate year-to-date     \$149,847.77       Payrol1 Fees     Date (Mo., Day, Year)     Amount of each disbursement this period       Full Name     Date (Mo., Day, Year)     Amount of each disbursement this period       City, State, Zip Code     07/17/2023     \$2,081.10       City, State, Zip Code     Aggregate year-to-date     \$15,050.48       Full Name     Date (Mo., Day, Year)     Amount of each disbursement this period       Mailing Address     Date (Mo., Day, Year)     Amount of each disbursement this period       Mailing Address     3203 Nuttree Woods Dr     07/28/2023     \$1,528.98       City, State, Zip Code     Aggregate year-to-date     \$5,664.20	San Francisco, CA 94110-2042		
Full Name Payroll Data Processing  Mailing Address  3501 E Frontage Rd  City, State, Zip Code Tampa, FL 33607-1723  Purpose of Disbursement (Optional) Payroll Fees  Full Name Ethan Cox  Mailing Address  3614 N Fremont St  City, State, Zip Code Chicago, IL 60613-4372  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Full Name Mark Rennie Mark Rennie Mailing Address 3203 Nuttree Woods Dr City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Raggregate (Mo., Day, Year)  Amount of each disbursement this period  Amount of each disbursement this period  Amount of each disbursement this period  Aggregate (Mo., Day, Year)  Aggregate (Mo., Day, Year)  Amount of each disbursement this period  Aggregate (Mo., Day, Year)  Aggregate (Mo., Day, Year)  Amount of each disbursement this period  Amount of each disbursement this period  Aggregate (Mo., Day, Year)	Purpose of Disbursement (Optional)		\$579.88
Payroll Data Processing  Mailing Address 3501 E Frontage Rd  City, State, Zip Code Tampa, FL 33607-1723  Purpose of Disbursement (Optional) Payroll Fees  Pull Name Ethan Cox Mailing Address 3614 N Fremont St City, State, Zip Code Chicago, IL 60613-4372  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Pull Name  Date (Mo., Day, Year)  Aggregate year-to-date (Mo., Day, Year)  Amount of each disbursement this period  Aggregate year-to-date (Mo., Day, Year)  Aggregate (Mo., Day, Year)  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Date (Mo., Day, Year)  Amount of each disbursement this period  Aggregate (Mo., Day, Year)  Amount of each disbursement this period  Amount of each disbursement this period  Aggregate (Mo., Day, Year)  Amount of each disbursement this period  Amount of each disbursement this period  Aggregate (Mo., Day, Year)	Credit Card Processing	year-to-date	4373.00
Payroll Data Processing  Mailing Address 3501 E Frontage Rd 07/03/2023 \$135.23  City, State, Zip Code Tampa, FL 33607-1723  Purpose of Disbursement (Optional) Payroll Fees  Full Name Ethan Cox Mailing Address 3614 N Fremont St City, State, Zip Code Chicago, IL 60613-4372  Purpose of Disbursement (Optional) Reimbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Pull Name  Mark Rennie Mark Rennie Mark Rennie Malling Address 3203 Nuttree Woods Dr City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional) Regregate (Mo., Day, Year) Mailing Address 3203 Nuttree Woods Dr City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional) Aggregate (Mo., Day, Year) Amount of each disbursement this period	Full Name	Date	Amount of each
3501 E Frontage Rd	Payroll Data Processing		
City, State, Zip Code Tampa, FL 33607-1723  Purpose of Disbursement (Optional) Payroll Fees  Full Name Ethan Cox Mailing Address 3614 N Fremont St City, State, Zip Code Chicago, IL 60613-4372  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Full Name Mark Rennie Mark Rennie Mark Rennie Mailing Address 3203 Nuttree Woods Dr City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Raggregate year-to-date (Mo., Day, Year)  Aggregate year-to-date (Mo., Day, Year)  Amount of each disbursement this period  Amount of each disbursement this period	Mailing Address		
Purpose of Disbursement (Optional) Payroll Fees  Full Name Ethan Cox  Mailing Address 3614 N Fremont St City, State, Zip Code Chicago, IL 60613-4372  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Full Name Mark Rennie  Mark Rennie  Mailing Address 3203 Nuttree Woods Dr City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional) Aggregate (Mo., Day, Year)	3501 E Frontage Rd	07/03/2023	\$135.23
Purpose of Disbursement (Optional) Payroll Fees  Full Name Ethan Cox  Mailing Address 3614 N Fremont St City, State, Zip Code Chicago, IL 60613-4372  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Full Name Mark Rennie  Mailing Address 3203 Nuttree Woods Dr City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Aggregate (Mo., Day, Year)  Aggregate (Mo., Day, Year)  Aggregate (Mo., Day, Year)  \$15,050.48  \$15,050.48  Amount of each disbursement this period	City, State, Zip Code		
Payroll Fees  Full Name Ethan Cox  Mailing Address 3614 N Fremont St City, State, Zip Code Chicago, IL 60613-4372  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Full Name Mark Rennie Mark Rennie Mailing Address 3203 Nuttree Woods Dr City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Aggregate (Mo., Day, Year)  Amount of each disbursement this period  \$1,528.98  Aggregate \$1,528.98  Aggregate \$2,081.10  \$2,081.10  \$2,081.10  \$2,081.10  \$3,050.48  \$4,050.48  \$4,000.00  \$4,000.00  \$5,664.20	Tampa, FL 33607-1723		
Payroll Fees  Full Name Ethan Cox  Mailing Address 3614 N Fremont St City, State, Zip Code Chicago, IL 60613-4372  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Full Name Mark Rennie Mark Rennie Mark Rennie Mark Rennie Mark Rennie Mark Rennie Mailing Address 3203 Nuttree Woods Dr City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional) Aggregate year-to-date Amount of each disbursement this period  \$15,050.48  \$15,050.48  \$2,081.10  \$2,081.10  \$2,081.10  \$3,050.48  \$15,050.48  \$4,000.00  \$4,000.00  \$1,528.98  \$1,528.98  \$2,081.10  Aggregate year-to-date  \$3,664.20	Purpose of Disbursement (Optional)		\$149 847 77
Ethan Cox  Mailing Address  3614 N Fremont St  City, State, Zip Code Chicago, IL 60613-4372  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Full Name Mark Rennie  Mailing Address 3203 Nuttree Woods Dr  City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Aggregate (Mo., Day, Year)  \$15,050.48  Amount of each disbursement this period  \$15,050.48  \$2,081.10  Aggregate (Mo., Day, Year)  \$15,050.48  \$2,081.10  Aggregate (Mo., Day, Year)  Amount of each disbursement this period  Amount of each disbursement this period  Aggregate (Mo., Day, Year)  Aggregate (Mo., Day, Year)  \$2,081.10  Aggregate (Mo., Day, Year)  Aggregate (Mo., Day, Year)  \$2,081.10	Payroll Fees	year-to-date	Ψ149 <b>,</b> 047.77
Ethan Cox (Mo., Day, Year) disbursement this period  Mailing Address  3614 N Fremont St 07/17/2023 \$2,081.10  City, State, Zip Code Chicago, IL 60613-4372  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping Adgress Mark Rennie Date (Mo., Day, Year)  Mailing Address  3203 Nuttree Woods Dr 07/28/2023 \$1,528.98  City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional) \$5,664.20	Full Name	Date	Amount of each
3614 N Fremont St  City, State, Zip Code Chicago, IL 60613-4372  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Full Name Mark Rennie  Mailing Address 3203 Nuttree Woods Dr  City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Aggregate year-to-date (Mo., Day, Year)  67/28/2023 \$1,528.98  Aggregate year-to-date \$5,664.20	Ethan Cox		
City, State, Zip Code Chicago, IL 60613-4372  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Full Name Mark Rennie Mark Rennie Mailing Address 3203 Nuttree Woods Dr City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Aggregate year-to-date  \$15,050.48  Amount of each disbursement this period  \$1,528.98	Mailing Address		-
Chicago, IL 60613-4372  Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Full Name  Mark Rennie  Mailing Address  3203 Nuttree Woods Dr  City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Aggregate year-to-date  \$15,050.48  Amount of each disbursement this period  \$1,528.98  \$2,664.20	3614 N Fremont St	07/17/2023	\$2,081.10
Purpose of Disbursement (Optional) Reimbursement - Travel, Supplies, Shipping  Full Name Mark Rennie  Mailing Address 3203 Nuttree Woods Dr City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Aggregate year-to-date \$15,050.48  Amount of each disbursement this period  \$15,050.48  Amount of each disbursement this period  \$15,050.48  Amount of each disbursement this period  \$15,050.48	City, State, Zip Code		
Reimbursement - Travel, Supplies, Shipping  Full Name Mark Rennie  Mailing Address 3203 Nuttree Woods Dr  City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  year-to-date  Amount of each disbursement this period  77/28/2023 \$1,528.98  Aggregate \$5,664.20	Chicago, IL 60613-4372		
Reimbursement - Travel, Supplies, Shipping  Full Name Mark Rennie  Mailing Address  3203 Nuttree Woods Dr  City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Aggregate Veger, to date  \$5,664.20	Purpose of Disbursement (Optional)		\$15 050 48
Mark Rennie  Mailing Address  3203 Nuttree Woods Dr  City, State, Zip Code Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Aggregate Veger, to date  \$5,664.20	Reimbursement - Travel, Supplies, Shipping	year-to-date	713,030.40
Mark Rennie  Mailing Address  3203 Nuttree Woods Dr  City, State, Zip Code  Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Aggregate  year-to-date  \$5,664.20	Full Name	Date	Amount of each
3203 Nuttree Woods Dr  City, State, Zip Code  Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Aggregate year-to-date \$5,664.20	Mark Rennie		
City, State, Zip Code  Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Aggregate year-to-date \$5,664.20	Mailing Address		
City, State, Zip Code  Midlothian, VA 23112-4503  Purpose of Disbursement (Optional)  Aggregate \$5,664.20	3203 Nuttree Woods Dr	07/28/2023	\$1,528.98
Purpose of Disbursement (Optional)  Aggregate \$5,664.20	City, State, Zip Code		
Purpose of Disbursement (Optional)  Aggregate \$5,664.20	Midlothian, VA 23112-4503		
			\$5 664 20
	Salary	year-to-date	ې۵,004.2U

Name of Candidate or Committee Brandon Pres	le
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Disbursements from contributions accumulated Prior t	to January 1, 2018 or   ✓️On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Louise Cole	(Mo., Day, Year)	disbursement this period
Mailing Address		
518 N Church St	07/03/2023	\$820.75
City, State, Zip Code		
Okolona, MS 38860-1017		
Purpose of Disbursement (Optional)	Aggregate	\$2,403.37
Salary	year-to-date	
Full Name	Date	Amount of each
Ethan Cox	(Mo., Day, Year)	disbursement this period
Mailing Address		
3614 N Fremont St	07/14/2023	\$1,623.42
City, State, Zip Code		
Chicago, IL 60613-4372		
Purpose of Disbursement (Optional)	Aggregate	\$15,050.48
Salary	year-to-date	710,000.10
Full Name	Date	Amount of each
Dodge's Store	(Mo., Day, Year)	disbursement this period
Mailing Address		
2290 W Main St	07/28/2023	\$65.01
City, State, Zip Code		
Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$277.41
Staff Meals	year-to-date	
Full Name	Date	Amount of each
Julie McDermott	(Mo., Day, Year)	disbursement this period
Mailing Address		
1119 Bratton Rd	07/03/2023	\$2,489.60
City, State, Zip Code		
New Albany, MS 38652-9328		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,399.55
Salary	year-to-date	·
Full Name	Date	Amount of each
Abby O'Keefe	(Mo., Day, Year)	disbursement this period
Mailing Address	1	
1404 Highland Valley Cir	07/14/2023	\$2,811.60
City, State, Zip Code	1	
Wildwood, MO 63005-4259		
Purpose of Disbursement (Optional)	Aggregate	\$22,807.63
Salary	year-to-date	1

me of Candidate or Committee Brandon Presley
me of Candidate or Committee Brandon Presle

Full Name	Date	Amount of each
Service Printing Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
1110 Emory Folmar Blvd	07/07/2023	\$2,926.00
City, State, Zip Code		
Montgomery, AL 36110-3228		
Purpose of Disbursement (Optional)	Aggregate	\$16,831.00
Printing of Campaign Materials	year-to-date	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Full Name	Date	Amount of each
Michael Waller	(Mo., Day, Year)	disbursement this period
Mailing Address		
103 Redbud Dr	07/03/2023	\$1,994.23
City, State, Zip Code		
Hendersonville, TN 37075-3982		
Purpose of Disbursement (Optional)	Aggregate	\$8,150.52
Salary	year-to-date	40,100.01
Full Name	Date	Amount of each
Hilton Hotels	(Mo., Day, Year)	disbursement this period
Mailing Address		
7930 Jones Branch Dr	07/13/2023	\$139.66
City, State, Zip Code		
Mclean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate	\$3 <b>,</b> 347.70
Travel	year-to-date	40/01/1/0
Full Name	Date	Amount of each
Felicia Yearwood	(Mo., Day, Year)	disbursement this period
Mailing Address		
5206 Lakeview Dr	07/14/2023	\$2,124.23
City, State, Zip Code		
Moss Point, MS 39563-2128		
Purpose of Disbursement (Optional)	Aggregate	\$8,237.12
Salary	year-to-date	10, 20, 12
Full Name	Date	Amount of each
Weidmann's Restaurant	(Mo., Day, Year)	disbursement this period
Mailing Address		
210 22nd Ave	07/14/2023	\$150.00
City, State, Zip Code		
Meridian, MS 39301-5849		
Purpose of Disbursement (Optional)	Aggregate	\$758.25
Event Catering	year-to-date	7,30.23

Name of Candidate or Committee	Brandon	Presley
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	anuary 1, 2018 or 🗸 On or Afto	er January 1, 2018
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/07/2023	\$72.22
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	
Full Name	Date	Amount of each
Walmart	(Mo., Day, Year)	disbursement this period
Mailing Address		
702 SW 8th St	07/17/2023	\$130.17
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate	\$2,129.96
Office Supplies	year-to-date	Ψ2,129.90
Full Name	Date	Amount of each
Google	(Mo., Day, Year)	disbursement this period
Mailing Address		
1600 Amphitheatre Pkwy	07/03/2023	\$255.60
City, State, Zip Code		
Mountain View, CA 94043-1351		
Purpose of Disbursement (Optional)	Aggregate	\$712.09
Web Hosting	year-to-date	Ÿ / 12 <b>.</b> 0 9
Full Name	Date	Amount of each
Walmart	(Mo., Day, Year)	disbursement this period
Mailing Address		
702 SW 8th St	07/18/2023	\$137.42
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate	\$2,129.96
Office Supplies	year-to-date	72,129.90
Full Name	Date	Amount of each
Heavenly Sunshine Property Services	(Mo., Day, Year)	disbursement this period
Mailing Address		·
9170 Southview St	07/12/2023	\$350.00
City, State, Zip Code		
Southaven, MS 38671-1506		
Purpose of Disbursement (Optional)	Aggregate	¢250 00
Cleaning Service	year-to-date	\$350.00

Name of Candidate or Committee Brandon Presley

**Reporting Period** \_\_\_\_\_\_ 7/1/2023 \_\_\_\_\_ through \_\_\_\_ 7/29/2023

Disbursements from contributions accumulated Prior to January 1		er January 1, 2018
Full Name	<u> </u>	
Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
PO Box 2463	07/25/2023	\$65.00
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate	\$1,404.53
Travel	year-to-date	41,101.00
Full Name	Date	Amount of each
Magnolia Ink LLC	(Mo., Day, Year)	disbursement this period
Mailing Address		
1223 Jackson Ave E	07/01/2023	\$22,000.00
City, State, Zip Code		
Oxford, MS 38655-4001		
Purpose of Disbursement (Optional)	Aggregate	\$27,855.58
Printing	year-to-date	727,000.00
Full Name	Date	Amount of each
Vision	(Mo., Day, Year)	disbursement this period
Mailing Address	07/02/0002	210 006 60
9346 Telge Rd	07/03/2023	\$12,206.69
City, State, Zip Code		
Houston, TX 77095-5107	A	
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$12 <b>,</b> 206.69
Direct Mail Production, Printing, and Postage		
Full Name	Date	Amount of each
State Farm Insurance	(Mo., Day, Year)	disbursement this period
Mailing Address	07/05/2022	¢102 F2
1 State Farm Plz  City, State, Zip Code	07/05/2023	\$102.52
Bloomington, IL 61710-0001		
Purpose of Disbursement (Optional)	Aggregate	
Insurance	year-to-date	\$615.12
Full Name	Data	A
ActBlue Technical Services	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	, , ,	
PO Box 382110	07/03/2023	\$469.47
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate	610 074 00
Credit Card Processing	year-to-date	\$18,074.89
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Name of Candidate or Committee Brandon Presley

**Reporting Period** \_\_\_\_\_\_ 7/1/2023 \_\_\_\_\_ through \_\_\_\_ 7/29/2023

Full Name	Date	Amount of each
ActBlue Technical Services	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 382110	07/01/2023	\$37.90
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate	\$18,074.89
Credit Card Processing	year-to-date	410/071.03
Full Name	Date	Amount of each
Silver Star Hotel & Casino	(Mo., Day, Year)	disbursement this period
Mailing Address		
13541 MS-16	07/28/2023	\$287.83
City, State, Zip Code		
Philadelphia, MS 39350		
Purpose of Disbursement (Optional)	Aggregate	\$863.49
Travel	year-to-date	7003.43
Full Name	Date	Amount of each
Payroll Data Processing	(Mo., Day, Year)	disbursement this period
Mailing Address		
3501 E Frontage Rd	07/03/2023	\$26,383.14
City, State, Zip Code		
Tampa, FL 33607-1723		
Purpose of Disbursement (Optional)	Aggregate	\$149,847.77
Payroll Taxes	year-to-date	γ14 <i>)</i> ,047.77
Full Name	Date	Amount of each
Shinitra Russell	(Mo., Day, Year)	disbursement this period
Mailing Address		
1185 Collier Rd NW	07/28/2023	\$2,320.98
City, State, Zip Code		
Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional)	Aggregate	\$16,758.38
Salary	year-to-date	710,730.30
Full Name	Date	Amount of each
Ethan Cox	(Mo., Day, Year)	disbursement this period
Mailing Address		·
3614 N Fremont St	07/03/2023	\$1,623.42
City, State, Zip Code		
Chicago, IL 60613-4372		
Purpose of Disbursement (Optional)	Aggregate	\$15,050.48
Salary	year-to-date	\$13,U3U.48

Name of Candidate or Committee	Brandon	Presley
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Full Name	Date	Amount of each
Nicholas Eden	(Mo., Day, Year)	disbursement this period
Mailing Address		
1106 Woodward Ave	07/14/2023	\$1,617.38
City, State, Zip Code		
Gulfport, MS 39501-2469		
Purpose of Disbursement (Optional)	Aggregate	\$2,438.13
Salary	year-to-date	1 = 7 = 3 = 3
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/10/2023	\$75.58
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	1 20, 20 2
Full Name	Date	Amount of each
Abby O'Keefe	(Mo., Day, Year)	disbursement this period
Mailing Address		
1404 Highland Valley Cir	07/03/2023	\$2,811.60
City, State, Zip Code		
Wildwood, MO 63005-4259		
Purpose of Disbursement (Optional)	Aggregate	\$22,807.63
Salary	year-to-date	, , , , , , , , , , , , , , , , , , , ,
Full Name	Date	Amount of each
Ron Owens	(Mo., Day, Year)	disbursement this period
Mailing Address		
3545 Mitchell Rd	07/14/2023	\$3,935.75
City, State, Zip Code		
Tupelo, MS 38801-9616		
Purpose of Disbursement (Optional)	Aggregate	\$49,553.21
Salary	year-to-date	,
Full Name	Date	Amount of each
NGP VAN	(Mo., Day, Year)	disbursement this period
Mailing Address		
1101 15th St NW	07/07/2023	\$2,123.64
City, State, Zip Code		
Washington, DC 20005-5006		
Purpose of Disbursement (Optional)	Aggregate	\$12 <b>,</b> 348.96
Database Services	year-to-date	712,010.50

Name of Candidate or Committee	Brandon	Presley
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Disbursements from contributions accumulated Prior to Ja	nuary 1, 2018 or 🗸 On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Felicia Yearwood	(Mo., Day, Year)	disbursement this period
Mailing Address		
5206 Lakeview Dr	07/03/2023	\$1,994.23
City, State, Zip Code		
Moss Point, MS 39563-2128		
Purpose of Disbursement (Optional)	Aggregate	\$8,237.12
Salary	year-to-date	10,-0
Full Name	Date	Amount of each
Dodge's Store	(Mo., Day, Year)	disbursement this period
Mailing Address		
2290 W Main St	07/03/2023	\$57.51
City, State, Zip Code		
Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional)	Aggregate	\$277.41
Travel	year-to-date	¥2//.11
Full Name	Date	Amount of each
Hilton Hotels	(Mo., Day, Year)	disbursement this period
Mailing Address		
7930 Jones Branch Dr	07/13/2023	\$163.20
City, State, Zip Code		
Mclean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate	\$3,347.70
Travel	year-to-date	43/31/1/0
Full Name	Date	Amount of each
Payroll Data Processing	(Mo., Day, Year)	disbursement this period
Mailing Address		
3501 E Frontage Rd	07/14/2023	\$24,205.18
City, State, Zip Code		
Tampa, FL 33607-1723		
Purpose of Disbursement (Optional)	Aggregate	\$149,847.77
Payroll Taxes	year-to-date	Ψ115 <b>,</b> 017 <b>.</b> 77
Full Name	Date	Amount of each
Wyndham Hotel Group	(Mo., Day, Year)	disbursement this period
Mailing Address		
22 Sylvan Way	07/20/2023	\$247.78
City, State, Zip Code		
Parsippany, NJ 07054-3801		
Purpose of Disbursement (Optional)	Aggregate	\$1,785.87
Travel	year-to-date	71,700.07

Name of Candidate or Committee	Brandon	Presley
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Disbursements from contributions accumulated Prior to January	1, 2018 or	er January 1, 2018
Full Name	Date	Amount of each
Shell Oil Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 2463	07/24/2023	\$38.95
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate	\$1,404.53
Travel	year-to-date	41,101.00
Full Name	Date	Amount of each
Chipotle	(Mo., Day, Year)	disbursement this period
Mailing Address		
610 Newport Center Dr	07/20/2023	\$22.81
City, State, Zip Code		
Newport Beach, CA 92660-6460		
Purpose of Disbursement (Optional)	Aggregate	\$316.60
Meals	year-to-date	7510.00
Full Name	Date	Amount of each
Silas Adams	(Mo., Day, Year)	disbursement this period
Mailing Address		
4527 Union Ave	07/10/2023	\$150.00
City, State, Zip Code		
Nettleton, MS 38858-6037		
Purpose of Disbursement (Optional)	Aggregate	\$280.00
Reimbursement - Travel (Mileage)	year-to-date	Ψ200.00
Full Name	Date	Amount of each
Battleaxe Digital	(Mo., Day, Year)	disbursement this period
Mailing Address		-
1405 Florida Ave NW	07/17/2023	\$4,552.20
City, State, Zip Code		
Washington, DC 20009-5801		
Purpose of Disbursement (Optional)	Aggregate	\$95,303.72
Digital Consulting	year-to-date	793,303.72
Full Name	Date	Amount of each
Silver Star Hotel & Casino	(Mo., Day, Year)	disbursement this period
Mailing Address		·
13541 MS-16	07/28/2023	\$287.83
City, State, Zip Code		
Philadelphia, MS 39350		
Purpose of Disbursement (Optional)	Aggregate	\$863.49
Travel	year-to-date	2003.49

Name of Candidate or Committee	Brandon	Presley
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Full Name	Date	Amount of each
William Adams	(Mo., Day, Year)	disbursement this period
Mailing Address		
12 Park Pl	07/14/2023	\$1,600.50
City, State, Zip Code		
Hattiesburg, MS 39402-1431		
Purpose of Disbursement (Optional)	Aggregate	\$4,100.46
Salary	year-to-date	-,
Full Name	Date	Amount of each
Lowe's	(Mo., Day, Year)	disbursement this period
Mailing Address		
3354 N Gloster St	07/06/2023	\$42.88
City, State, Zip Code		
Tupelo, MS 38804-9704		
Purpose of Disbursement (Optional)	Aggregate	\$1 <b>,</b> 677.23
Office Supplies	year-to-date	+1,077.20
Full Name	Date	Amount of each
Adam Beyer	(Mo., Day, Year)	disbursement this period
Mailing Address		
4288 N Gloster St	07/17/2023	\$536.88
City, State, Zip Code		
Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional)	Aggregate	\$25 <b>,</b> 291.66
Reimbursement - Travel, Subscription, Equipment	year-to-date	420,231.00
Full Name	Date	Amount of each
Nicholas Eden	(Mo., Day, Year)	disbursement this period
Mailing Address		
1106 Woodward Ave	07/03/2023	\$820.75
City, State, Zip Code		
Gulfport, MS 39501-2469		
Purpose of Disbursement (Optional)	Aggregate	\$2,438.13
Salary	year-to-date	42,100.10
Full Name	Date	Amount of each
Aaron Facio-Cortes	(Mo., Day, Year)	disbursement this period
Mailing Address		
27006 Fordham Dr	07/14/2023	\$2,167.83
City, State, Zip Code		
Wesley Chapel, FL 33544-8730		
Purpose of Disbursement (Optional)	Aggregate	\$8,324.12
Salary	year-to-date	70,324.12

Name of Candidate or Committee	Brandon	Presley
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Full Name	Data	Amount of each
Katharine Kurz	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
634 W Main St	07/11/2023	\$1,029.65
City, State, Zip Code		
Tupelo, MS 38804-3745		
Purpose of Disbursement (Optional)	Aggregate	\$9,230.30
Reimbursement - Printing, Travel	year-to-date	
Full Name	Date	Amount of each
Ron Owens	(Mo., Day, Year)	disbursement this period
Mailing Address		
3545 Mitchell Rd	07/03/2023	\$3,935.75
City, State, Zip Code		
Tupelo, MS 38801-9616		
Purpose of Disbursement (Optional)	Aggregate	\$49,553.21
Salary	year-to-date	4 13 / 000 121
Full Name	Date	Amount of each
Shawn Patterson	(Mo., Day, Year)	disbursement this period
Mailing Address		
1160 1st St NE	07/14/2023	\$2,974.48
City, State, Zip Code		
Washington, DC 20002-4799		
Purpose of Disbursement (Optional)	Aggregate	\$24,175.91
Salary	year-to-date	1-17-1-11-1
Full Name	Date	Amount of each
JC Media, LLC	(Mo., Day, Year)	disbursement this period
Mailing Address		
107 E Spring St	07/06/2023	\$80.00
City, State, Zip Code		
Ripley, MS 38663-2043		
Purpose of Disbursement (Optional)	Aggregate	\$880.00
Advertising	year-to-date	,
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/11/2023	\$216.17
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	, 10,037.10

Name of Candidate or Committee	Brandon	Presley
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Disbursements from contributions accumulated Prior to January 1	, 2018 or 🔽 On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Dodge's Store	(Mo., Day, Year)	disbursement this period
Mailing Address		
2290 W Main St	07/03/2023	\$66.54
City, State, Zip Code		
Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional)	Aggregate	\$277.41
Travel	year-to-date	
Full Name	Date	Amount of each
Hilton Hotels	(Mo., Day, Year)	disbursement this period
Mailing Address		
7930 Jones Branch Dr	07/13/2023	\$163.20
City, State, Zip Code		
Mclean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate	\$3,347.70
Travel	year-to-date	Ψ3/31/./0
Full Name	Date	Amount of each
Payroll Data Processing	(Mo., Day, Year)	disbursement this period
Mailing Address		
3501 E Frontage Rd	07/14/2023	\$143.98
City, State, Zip Code		
Tampa, FL 33607-1723		
Purpose of Disbursement (Optional)	Aggregate	\$149,847.77
Payroll Fees	year-to-date	γ14 <i>)</i> ,047.77
Full Name	Date	Amount of each
Walmart	(Mo., Day, Year)	disbursement this period
Mailing Address		-
702 SW 8th St	07/11/2023	\$264.85
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate	\$2,129.96
Office Supplies	year-to-date	Ψ2 <b>,</b> 129.90
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/13/2023	\$65.86
City, State, Zip Code		
City, State, Zip Code		
	Aggregate	\$40,597.46

Name of Candidate or Committee Brandon Pres	le
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Full Name	Date	Amount of each
Will Palmer	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 925	07/18/2023	\$217.50
City, State, Zip Code		
New Albany, MS 38652-0925		
Purpose of Disbursement (Optional)	Aggregate	\$507.50
Reimbursement - Travel (Mileage)	year-to-date	
Full Name	Date	Amount of each
Office Depot	(Mo., Day, Year)	disbursement this period
Mailing Address		
6600 N Military Trl	07/12/2023	\$267.49
City, State, Zip Code		
Boca Raton, FL 33496-2434		
Purpose of Disbursement (Optional)	Aggregate	\$267.49
Office Supplies	year-to-date	4207,13
Full Name	Date	Amount of each
United States Postal Service	(Mo., Day, Year)	disbursement this period
Mailing Address		
475 Lenfant Plz SW	07/19/2023	\$28.75
City, State, Zip Code		
Washington, DC 20260-0004		
Purpose of Disbursement (Optional)	Aggregate	\$379.65
Postage	year-to-date	4073.00
Full Name	Date	Amount of each
Shell Oil Co	(Mo., Day, Year)	disbursement this period
Mailing Address		
PO Box 2463	07/24/2023	\$50.00
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate	\$1,404.53
Travel	year-to-date	1 = 7 = 7 = 7 = 7
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/18/2023	\$78.29
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	V = 0, 00, 10

Name of Candidate or Committee Brandon Pres	le
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Disbursements from contributions accumulated Prior	to January 1, 2018 or 🗸 On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Payroll Data Processing	(Mo., Day, Year)	disbursement this period
Mailing Address		
3501 E Frontage Rd	07/28/2023	\$1,954.94
City, State, Zip Code		
Tampa, FL 33607-1723		
Purpose of Disbursement (Optional)	Aggregate	\$149,847.77
Payroll Taxes	year-to-date	(===, ====
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		
200 Spectrum Center Dr	07/21/2023	\$86.31
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	\$40,597.46
Credit Card Processing	year-to-date	Ψ10 <b>/</b> 337 <b>.</b> 10
Full Name	Date	Amount of each
William Adams	(Mo., Day, Year)	disbursement this period
Mailing Address		-
12 Park Pl	07/03/2023	\$1,528.98
City, State, Zip Code		
Hattiesburg, MS 39402-1431		
Purpose of Disbursement (Optional)	Aggregate	\$4,100.46
Salary	year-to-date	74,100.40
Full Name	Date	Amount of each
Jada Barnes	(Mo., Day, Year)	disbursement this period
Mailing Address		
395 Lampton Hilltop Rd	07/14/2023	\$1,617.38
City, State, Zip Code		
Columbia, MS 39429-9189		
Purpose of Disbursement (Optional)	Aggregate	\$5,646.32
Salary	year-to-date	ΨJ, 040.32
Full Name	Date	Amount of each
Numero	(Mo., Day, Year)	disbursement this period
Mailing Address		, , , , , ,
200 Spectrum Center Dr	07/26/2023	\$361.84
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate	640 E07 4C
Credit Card Processing	year-to-date	\$40,597.46

Name of Candidate or Committee	Brandon	Presley
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Full Name	Date	Amount of each
Issac Lampner	(Mo., Day, Year)	disbursement this period
Mailing Address		
945 Mitchell St	07/17/2023	\$212.40
City, State, Zip Code		
Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional)	Aggregate	\$38,579.18
Reimbursement - Travel (Mileage)	year-to-date	, ,
Full Name	Date	Amount of each
Aaron Facio-Cortes	(Mo., Day, Year)	disbursement this period
Mailing Address		
27006 Fordham Dr	07/03/2023	\$1,994.23
City, State, Zip Code		
Wesley Chapel, FL 33544-8730		
Purpose of Disbursement (Optional)	Aggregate	\$8,324.12
Salary	year-to-date	40,021.12
Full Name	Date	Amount of each
Benjamin Hunt	(Mo., Day, Year)	disbursement this period
Mailing Address		
510 S Broadway St	07/14/2023	\$2,167.10
City, State, Zip Code		
Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional)	Aggregate	\$16,332.53
Salary	year-to-date	120,00200
Full Name	Date	Amount of each
Battleaxe Digital	(Mo., Day, Year)	disbursement this period
Mailing Address		
1405 Florida Ave NW	07/25/2023	\$8,089.00
City, State, Zip Code		
Washington, DC 20009-5801		
Purpose of Disbursement (Optional)	Aggregate	\$95,303.72
Digital Consulting	year-to-date	,,,,,,,,,,
Full Name	Date	Amount of each
Jake Laves	(Mo., Day, Year)	disbursement this period
Mailing Address		
699 Nation Hills Dr	07/11/2023	\$601.57
City, State, Zip Code		
Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional)	Aggregate	\$25,161.09
Reimbursement - Equipment, Office Supplies	year-to-date	723,101.09

Name of Candidate or Committee	Brandon	Presley
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Disbursements from contributions accumulated Prior to January 1, 2018 of	or 🗸 On or Afte	er January 1, 2018
Full Name	Date	Amount of each
Shawn Patterson	(Mo., Day, Year)	disbursement this period
Mailing Address		
1160 1st St NE	07/03/2023	\$2,974.48
City, State, Zip Code		
Washington, DC 20002-4799		
Purpose of Disbursement (Optional)	Aggregate	\$24,175.91
Salary	year-to-date	721/1/0:31
Full Name	Date	Amount of each
Greta Presley	(Mo., Day, Year)	disbursement this period
Mailing Address		
182 Verona Ave	07/14/2023	\$1,994.23
City, State, Zip Code	1	
Nettleton, MS 38858-6004		
Purpose of Disbursement (Optional)	Aggregate	\$8,286.80
Salary	year-to-date	40,200.00
Full Name	Date	Amount of each
Amalgamated Bank	(Mo., Day, Year)	disbursement this period
Mailing Address		
275 7th Ave	07/26/2023	\$133.30
City, State, Zip Code		
New York, NY 10001-6708		
Purpose of Disbursement (Optional)	Aggregate	\$469.25
Bank Fee	year-to-date	Ψ40 <b>7.</b> 23
Full Name	Date	Amount of each
United States Postal Service	(Mo., Day, Year)	disbursement this period
Mailing Address		
475 Lenfant Plz SW	07/29/2023	\$28.75
City, State, Zip Code	1	
Washington, DC 20260-0004		
Purpose of Disbursement (Optional)	Aggregate	\$379.65
Postage	year-to-date	43,3.03