

Candidate's Committee  
REPORT OF RECEIPTS AND DISBURSEMENTS  
2023 Election

**RECEIVED** DATE STAMP  
By Secretary of State Elections Division at 4:44 pm, Oct 31, 2023

Name of Candidate Tate for Governor  
Address PO Box 24355 City/Zip Jackson 39225  
Telephone (Work) \_\_\_\_\_ (Fax) \_\_\_\_\_  
Treasurer Kristin McDevitt Email Address \_\_\_\_\_  
Office Sought Governor Party Affiliation \_\_\_\_\_

Check here if above information is different from previous report

**TYPE OF REPORT**

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

**IMPORTANT**

- (1) All candidates for office, and their political committees if organized as such, shall file periodic reports in the year in which they are to be elected.
- (2) Periodic Reports are mandatory, even if no expenditures were made during the period. In such case, the committee shall submit a report indicating "0" (zero) for total amount of reported contributions and/or expenditures during this period. Pre-Election reports are mandatory if the candidate is opposed.
- (3) Until a candidate files a Termination Report, all campaign finance disclosure reports must be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).

- (4) Beginning on Jan. 1, 2018, candidates and officeholders may not “personally use” campaign contributions. Section 23-15-821, Miss. Code Ann., sets forth those “personal use” expenditures which are specifically prohibited from campaign contributions and those disbursements which are not defined as “personal use” and therefore permissible from campaign contributions. Campaign contributions accepted and held prior to Jan. 1, 2018 ARE NOT subject to the “personal use” restrictions of Section 23-15-821, Miss. Code Ann. Beginning on Jan. 1, 2018, campaign contributions accepted and accumulated therefrom ARE subject to the “personal use” restrictions of Section 2-15-821, Miss. Code Ann. Separate record keeping and reporting is required for candidates and officeholders for any campaign contributions held prior to Jan. 1, 2018, disbursements made therefrom and contributions earned thereon in the form of interest or dividends.
- (5) The receiving office must be in actual receipt of the required report by 5:00 p.m. on the deadline. If the deadline falls on a weekend or legal holiday, the office must be in actual receipt of the required report 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
<b>TOTAL AMT OF CONTRIBUTIONS<sup>1</sup></b>				
<b>TOTAL AMT OF DISBURSEMENTS</b>				
<b>CASH ON HAND BALANCE</b>				

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

	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
<b>JAN. 1, 2023 CASH ON HAND BALANCE</b>				\$5,899,590.03
<b>TOTAL AMT OF CONTRIBUTIONS</b>	\$1,143,399.73	\$3,519.00	\$1,146,918.73	\$6,251,151.95
<b>TOTAL AMT OF DISBURSEMENTS</b>	\$4,121,077.10	\$6,247.19	\$4,127,324.29	\$10,978,957.79
<b>CASH ON HAND BALANCE</b>				\$1,171,784.19

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



Signature of Director or Treasurer

10/30/2023

Date

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

Political Committees supporting or opposing Statewide, State District or Legislative Candidates file this form with the Secretary of State to 401 Mississippi Street, Jackson, MS; P. O. Box 136, Jackson, MS 39205; fax (601) 576-2545; or email CampaignFinance@sos.ms.gov.

Political Committees supporting or opposing county and/or county district candidates file this form with the Circuit Clerk's Office.

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



Name of Candidate or Committee

Tate for Governor

Reporting Period

10/01/2023

through

10/29/2023

## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name DirecTV	10/23/2023	\$250.00
Mailing Address 2260 East Imperial Hwy		
City, State, Zip Code El Segundo, CA 90245-3501		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paul Dees	10/25/2023	\$1,000.00
Mailing Address 2110 Tribbett Rd		
City, State, Zip Code Leland, MS 38756-9680		
Name of Employer (Required) Self		
Occupation (Required) Farmer	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi Manufactured Housing Association PAC	10/10/2023	\$2,500.00
Mailing Address P.O. Box 320369		
City, State, Zip Code Flowood, MS 39232		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$3,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Limited Partnership</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Deviney Equipment/Rental & Supply	10/25/2023	\$1,000.00
Mailing Address PO Box 7179		
City, State, Zip Code Jackson, MS 39282-7179		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Tate for Governor  
 Reporting Period 10/01/2023 through 10/29/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lampkin Butts	10/18/2023	\$1,000.00
Mailing Address 8 Laurawood Court		
City, State, Zip Code Laurel, MS 39443-5811		
Name of Employer (Required) Sanderson Farms		
Occupation (Required) COO	<b>Aggregate Year-to-date</b>	<b>\$2,000.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Griffin Tanner	10/16/2023	\$5,000.00
Mailing Address 3841 Majestic Oaks Dr.		
City, State, Zip Code Oxford, MS 38655-8153		
Name of Employer (Required) Self		
Occupation (Required) Business	<b>Aggregate Year-to-date</b>	<b>\$5,000.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rimmer Covington Jr.	10/12/2023	\$5,000.00
Mailing Address 1215 East Beach Blvd		
City, State, Zip Code Pass Christian, MS 39571-4704		
Name of Employer (Required) C-REALOB, LLC		
Occupation (Required) Owner	<b>Aggregate Year-to-date</b>	<b>\$5,000.00</b>
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dish	10/23/2023	\$250.00
Mailing Address PO Box 6622		
City, State, Zip Code Englewood, CO 80155-6622		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$250.00</b>



Name of Candidate or Committee Tate for Governor  
 Reporting Period 10/01/2023 through 10/29/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tony Jones	10/12/2023	\$1,000.00
Mailing Address 6320 Timber Oaks Dr.		
City, State, Zip Code Olive Branch, MS 38654-6934		
Name of Employer (Required) Century 21 #1, Realty Group, LLC		
Occupation (Required) Real Estate	<b>Aggregate Year-to-date</b>	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cannon Cleary McGraw LLC	10/16/2023	\$5,000.00
Mailing Address 800 College Hill Road #5101		
City, State, Zip Code Oxford, MS 38655-2780		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wade Litton	10/10/2023	\$1,000.00
Mailing Address 110 E Wilson Avenue		
City, State, Zip Code Greenwood, MS 38930-2351		
Name of Employer (Required) Wade Incorporated		
Occupation (Required) CEO	<b>Aggregate Year-to-date</b>	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Adam Breerwood	10/11/2023	\$1,500.00
Mailing Address 712 West North St.		
City, State, Zip Code Poplarville, MS 39470-7469		
Name of Employer (Required) PRCC		
Occupation (Required) President	<b>Aggregate Year-to-date</b>	\$1,500.00

Name of Candidate or Committee Tate for GovernorReporting Period 10/01/2023 through 10/29/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank W. Phillips	10/12/2023	\$300.00
Mailing Address 9164 Ashburn Lane		
City, State, Zip Code Gulfport, MS 39503-6125		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Merit Health Madison	10/04/2023	\$2,775.00
Mailing Address PO Box 5006		
City, State, Zip Code Antioch, TN 37011-5006		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,775.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William V Cork	10/02/2023	\$260.00
Mailing Address 304 Ballentine St		
City, State, Zip Code Bay Saint Louis, MS 39520-3902		
Name of Employer (Required) State of Mississippi		
Occupation (Required) Administration	Aggregate Year-to-date	\$510.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kenneth E Russell	10/12/2023	\$5,000.00
Mailing Address 123 Post Oak		
City, State, Zip Code Oxford, MS 38655-2799		
Name of Employer (Required) Cite Armored Inc		
Occupation (Required) Owner	Aggregate Year-to-date	\$5,000.00

Name of Candidate or Committee

Tate for Governor

Reporting Period

10/01/2023

through

10/29/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Candidate Campaign Committee</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Philip Moran Campaign Fund	10/11/2023	\$5,000.00
Mailing Address 18516 Old Joe Moran Rd		
City, State, Zip Code Kiln, MS 39556-8219		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Billy R. Folkes	10/06/2023	\$200.00
Mailing Address 63 Herbert Trigg Rd		
City, State, Zip Code Seminary, MS 39479-4352		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William D. Dennis	10/12/2023	\$2,000.00
Mailing Address P.O. Box 6181		
City, State, Zip Code Gulfport, MS 39506-6181		
Name of Employer (Required) Specialty Contractors & Associates, Inc.		
Occupation (Required) Owner	Aggregate Year-to-date	\$4,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Deviney Brothers, Inc.	10/25/2023	\$1,000.00
Mailing Address PO Box 6717		
City, State, Zip Code Jackson, MS 39282-6717		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00



Name of Candidate or Committee

Tate for Governor

Reporting Period

10/01/2023

through

10/29/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anne Hall Brashier	10/24/2023	\$2,500.00
Mailing Address 179 Harper St.		
City, State, Zip Code Ridgeland, MS 39157-8675		
Name of Employer (Required) State of Mississippi		
Occupation (Required) State of Mississippi	Aggregate Year-to-date	\$2,500.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brown's Main Street Pharmacy Inc.	10/11/2023	\$250.00
Mailing Address 1685 South Main St.		
City, State, Zip Code Greenville, MS 38701-7326		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Mahoney's, Inc.	10/19/2023	\$1,000.00
Mailing Address P.O. Box 436		
City, State, Zip Code Biloxi, MS 39533-0436		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Merit Health River Region	10/04/2023	\$2,800.00
Mailing Address PO Box 5006		
City, State, Zip Code Antioch, TN 37011-5006		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,800.00

Name of Candidate or Committee Tate for Governor  
 Reporting Period 10/01/2023 through 10/29/2023

## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
Full Name <u>Enova</u>	10/23/2023	\$1,000.00
Mailing Address <u>175 W. Jackson Blvd STE 1000</u>		
City, State, Zip Code <u>Chicago, IL 60604-2863</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
Full Name <u>Kirk Kinard</u>	10/14/2023	\$5,000.00
Mailing Address <u>3824 MAJESTIC OAKS DR</u>		
City, State, Zip Code <u>Oxford, MS 38655-8143</u>		
Name of Employer (Required) <u>Willow Pain and Wellness, LLC</u>		
Occupation (Required) <u>Doctor</u>	<b>Aggregate Year-to-date</b>	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
Full Name <u>Ronald Aguzzi</u>	10/11/2023	\$250.00
Mailing Address <u>431 Yale Street Extension</u>		
City, State, Zip Code <u>Cleveland, MS 38732-9565</u>		
Name of Employer (Required) <u>Self</u>		
Occupation (Required) <u>Farmer</u>	<b>Aggregate Year-to-date</b>	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	<b>Date</b> (Mo., Day, Year)	<b>Amount of each receipt this period</b>
Full Name <u>Terry W. Green</u>	10/12/2023	\$2,500.00
Mailing Address <u>29 Windermere Ln</u>		
City, State, Zip Code <u>Houston, TX 77063-1409</u>		
Name of Employer (Required) <u>Island View Casino Resort</u>		
Occupation (Required) <u>Owner</u>	<b>Aggregate Year-to-date</b>	\$20,000.00

Name of Candidate or Committee Tate for Governor  
 Reporting Period 10/01/2023 through 10/29/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Terry W. Green	10/12/2023	\$2,500.00
Mailing Address 29 Windermere Ln		
City, State, Zip Code Houston, TX 77063-1409		
Name of Employer (Required) Island View Casino Resort		
Occupation (Required) Owner	<b>Aggregate Year-to-date</b>	\$22,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wiley Cooper	10/03/2023	\$7,500.00
Mailing Address 26 Spring St.		
City, State, Zip Code Mountain Brk, AL 35213-3020		
Name of Employer (Required) AmWins Group		
Occupation (Required) Executive	<b>Aggregate Year-to-date</b>	\$7,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Philip Chamblee	10/12/2023	\$500.00
Mailing Address PO Drawer 3859		
City, State, Zip Code Jackson, MS 39207-3859		
Name of Employer (Required) MS Petroleum Marketers & Convenience Stores A:		
Occupation (Required) Government Relations	<b>Aggregate Year-to-date</b>	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stan King	10/19/2023	\$1,000.00
Mailing Address 333 Brookhaven St		
City, State, Zip Code Brookhaven, MS 39601-3680		
Name of Employer (Required) Stan King GM Superstore		
Occupation (Required) Owner	<b>Aggregate Year-to-date</b>	\$1,000.00



Name of Candidate or Committee

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through

10/29/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi Forest Sustainability PAC	10/06/2023	\$10,000.00
Mailing Address 6311 Ridgewood Rd Ste W405		
City, State, Zip Code Jackson, MS 39211-2035		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anne Ceranti	10/17/2023	\$2,500.00
Mailing Address PO Box 5339		
City, State, Zip Code Greenville, MS 38704-5339		
Name of Employer (Required) N/A		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael A. Bradshaw	10/18/2023	\$2,000.00
Mailing Address 327 Tatum Camp Rd		
City, State, Zip Code Purvis, MS 39475-3301		
Name of Employer (Required) M.A.A.J. Investments, LLC		
Occupation (Required) Manager One	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Todd A. Williams	10/01/2023	\$1,500.00
Mailing Address 3889 Maple Ave STE 350		
City, State, Zip Code Dallas, TX 75219-3923		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$1,500.00

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Tate for Governor

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10/01/2023

through

10/29/2023**ITEMIZED RECEIPTS**

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Merit Health Rankin	10/04/2023	\$2,775.00
Mailing Address PO Box 5006		
City, State, Zip Code Antioch, TN 37011-5006		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,775.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald A. White	10/25/2023	\$500.00
Mailing Address 211 Ridge Dr		
City, State, Zip Code Jackson, MS 39216-4112		
Name of Employer (Required) White Realty Inc		
Occupation (Required) Real Estate	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bruce Deviney	10/25/2023	\$3,000.00
Mailing Address PO Box 7179		
City, State, Zip Code Jackson, MS 39282-7179		
Name of Employer (Required) Deviney Equipment/Rental & Supply		
Occupation (Required) Owner	Aggregate Year-to-date	\$3,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Deviney Construction Company, Inc.	10/25/2023	\$1,000.00
Mailing Address PO Box 6717		
City, State, Zip Code Jackson, MS 39282-6717		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David B. Blackburn	10/02/2023	\$5,000.00
Mailing Address 114 Pin Oak Dr		
City, State, Zip Code Oxford, MS 38655-6052		
Name of Employer (Required) The Blackburn Group, LLC		
Occupation (Required) CEO	Aggregate Year-to-date	\$6,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Merit Health Womens Hospital	10/04/2023	\$2,775.00
Mailing Address PO Box 5006		
City, State, Zip Code Antioch, TN 37011-5006		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,775.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name B. Bryan Jones III	10/03/2023	\$500.00
Mailing Address 134 Hidden Heights		
City, State, Zip Code Ridgeland, MS 39157-8626		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Baker Donelson Mississippi PAC	10/18/2023	\$15,000.00
Mailing Address PO Box 14167		
City, State, Zip Code Jackson, MS 39236-4167		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$15,000.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name CR Fuels LLC	10/18/2023	\$1,000.00
Mailing Address PO Box 505		
City, State, Zip Code Laurel, MS 39441-0505		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Holman	10/10/2023	\$2,500.00
Mailing Address 408 Hancock St.		
City, State, Zip Code Bay Saint Louis, MS 39520-4314		
Name of Employer (Required) Ranchland Tractor & ATV, LLC		
Occupation (Required) Executive	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Douglas Moody	10/11/2023	\$1,000.00
Mailing Address 13200 Westminister Blvd		
City, State, Zip Code Gulfport, MS 39503-4386		
Name of Employer (Required) Insurance		
Occupation (Required) VP	Aggregate Year-to-date	\$1,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Douglas Moody	10/12/2023	\$1,000.00
Mailing Address 13200 Westminister Blvd		
City, State, Zip Code Gulfport, MS 39503-4386		
Name of Employer (Required) Insurance		
Occupation (Required) VP	Aggregate Year-to-date	\$2,250.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Douglas Moody	10/12/2023	\$300.00
Mailing Address 13200 Westminister Blvd		
City, State, Zip Code Gulfport, MS 39503-4386		
Name of Employer (Required) Insurance		
Occupation (Required) VP	Aggregate Year-to-date	\$2,550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alexander Joseph Kiamie III	10/16/2023	\$5,000.00
Mailing Address PO Box 1055		
City, State, Zip Code Oxford, MS 38655-1055		
Name of Employer (Required) Self		
Occupation (Required) Business	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name WalMart Inc. PAC for Responsible Government	10/06/2023	\$5,000.00
Mailing Address 702 SW 8th St		
City, State, Zip Code Bentonville, AR 72716-6209		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLP	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Adams & Reese LLP	10/19/2023	\$1,000.00
Mailing Address 4500 One Shell Square		
City, State, Zip Code New Orleans, LA 70139		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Dean Jr.	10/06/2023	\$1,000.00
Mailing Address PO Box 272		
City, State, Zip Code Leland, MS 38756-0272		
Name of Employer (Required) Dean Land & Reality Company		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Merit Health Wesley	10/04/2023	\$2,775.00
Mailing Address PO Box 5006		
City, State, Zip Code Antioch, TN 37011-5006		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,775.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joseph A. Hollingsworth Jr.	10/10/2023	\$10,000.00
Mailing Address 1 Rockytop Lane		
City, State, Zip Code Clinton, TN 37716-4204		
Name of Employer (Required) Self		
Occupation (Required) The Hollingsworth Companies	Aggregate Year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name South Alabama PAC For Higher Education	10/19/2023	\$500.00
Mailing Address 307 N University Blvd U1121		
City, State, Zip Code Mobile, AL 36688-3053		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Benjamin Hinton	10/02/2023	\$250.00
Mailing Address 2532 Parc Monceau Dr. E		
City, State, Zip Code Tupelo, MS 38804-1051		
Name of Employer (Required) NMHS		
Occupation (Required) Physician	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Marlowe	10/09/2023	\$1,000.00
Mailing Address 121 Waveland Ave		
City, State, Zip Code Waveland, MS 39576-3949		
Name of Employer (Required) JEM Mechanical Services		
Occupation (Required) Mechanical Contractor	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name International Paper PAC	10/04/2023	\$2,000.00
Mailing Address 1101 Pennsylvania Avenue NW Suite 200		
City, State, Zip Code Washington, DC 20004-2514		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$4,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Rodgers Brashier	10/12/2023	\$7,500.00
Mailing Address 28 Eureka Plantation Road		
City, State, Zip Code Indianola, MS 38751-2387		
Name of Employer (Required) Self		
Occupation (Required) Farmer	Aggregate Year-to-date	\$7,500.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Scott W. Pedigo</u>	10/24/2023	\$200.00
Mailing Address <u>104 Glenwood Lane</u>		
City, State, Zip Code <u>Madison, MS 39110-6570</u>		
Name of Employer (Required) <u>Baker Donelson</u>		
Occupation (Required) <u>Attorney</u>	<b>Aggregate Year-to-date</b>	<b>\$400.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Hopewell Farms LLC</u>	10/09/2023	\$5,000.00
Mailing Address <u>PO Box 7</u>		
City, State, Zip Code <u>Clinton, MS 39060-0007</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$5,000.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Louis Zemek</u>	10/02/2023	\$150.00
Mailing Address <u>418 County Road 177</u>		
City, State, Zip Code <u>Bruce, MS 38915-9744</u>		
Name of Employer (Required) <u>N/A</u>		
Occupation (Required) <u>Retired</u>	<b>Aggregate Year-to-date</b>	<b>\$1,650.00</b>
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>MAR-CAL, Inc.</u>	10/06/2023	\$1,000.00
Mailing Address <u>951 Cato Road</u>		
City, State, Zip Code <u>Mendenhall, MS 39114-4450</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$1,000.00</b>

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Alias Jr.	10/27/2023	\$5,000.00
Mailing Address PO Box 1544		
City, State, Zip Code Oxford, MS 38655-1544		
Name of Employer (Required) Security Holdings, LLC		
Occupation (Required) Owner	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John W. Shinn	10/06/2023	\$1,000.00
Mailing Address 1886 Courtney Ln		
City, State, Zip Code Biloxi, MS 39532-5324		
Name of Employer (Required) Saint Stanislaus		
Occupation (Required) Marketing Director	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lucius M. Lampton	10/05/2023	\$2,000.00
Mailing Address 111 Magnolia Street		
City, State, Zip Code Magnolia, MS 39652-2825		
Name of Employer (Required) Memorial Hospital		
Occupation (Required) Doctor	Aggregate Year-to-date	\$3,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Canfor Southern Pine	10/03/2023	\$1,000.00
Mailing Address 101 Dauphin St.		
City, State, Zip Code Mobile, AL 36602-3209		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Kuebler	10/25/2023	\$1,000.00
Mailing Address 108 Bradford Green		
City, State, Zip Code Madison, MS 39110-9074		
Name of Employer (Required) Self		
Occupation (Required) Physician	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sapphire Companies LLC	10/12/2023	\$5,000.00
Mailing Address PO Box 1909		
City, State, Zip Code Biloxi, MS 39533-1909		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$25,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jason Shifflett	10/03/2023	\$5,000.00
Mailing Address PO Box 236		
City, State, Zip Code Olive Branch, MS 38654-0236		
Name of Employer (Required) Self		
Occupation (Required) Business	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Clarke Reed	10/11/2023	\$1,000.00
Mailing Address PO Box 894		
City, State, Zip Code Greenville, MS 38702-0894		
Name of Employer (Required) Reed & Joseph		
Occupation (Required) Owner	Aggregate Year-to-date	\$2,500.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark King	10/04/2023	\$1,000.00
Mailing Address PO Box 521		
City, State, Zip Code Leland, MS 38756-0521		
Name of Employer (Required) Boone Funeral Home, Inc		
Occupation (Required) Funeral Director	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name W.C. Deviney Jr.	10/25/2023	\$1,000.00
Mailing Address PO Box 6717		
City, State, Zip Code Jackson, MS 39282-6717		
Name of Employer (Required) Deviney Construction Company, Inc.		
Occupation (Required) CEO	Aggregate Year-to-date	\$6,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name W.C. Deviney Jr.	10/25/2023	\$5,000.00
Mailing Address PO Box 6717		
City, State, Zip Code Jackson, MS 39282-6717		
Name of Employer (Required) Deviney Construction Company, Inc.		
Occupation (Required) CEO	Aggregate Year-to-date	\$5,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ag Asset Services, Inc.	10/23/2023	\$1,000.00
Mailing Address PO Box 32		
City, State, Zip Code Leland, MS 38756-0032		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name MGM Resorts International	10/05/2023	\$1,000.00
Mailing Address P.O. Box 77123		
City, State, Zip Code Las Vegas, NV 89177-7123		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marvin Cochran	10/17/2023	\$2,500.00
Mailing Address 200 Arthurs Ct.		
City, State, Zip Code Brandon, MS 39047-7349		
Name of Employer (Required) Self		
Occupation (Required) Farmer	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Haslam	10/10/2023	\$5,000.00
Mailing Address PO Box 10528		
City, State, Zip Code Knoxville, TN 37939-0528		
Name of Employer (Required) RIVR Media		
Occupation (Required) Film Director	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Candidate Campaign Committee</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Friends of Jay McKnight	10/11/2023	\$250.00
Mailing Address 22160 Highway 53		
City, State, Zip Code Gulfport, MS 39503-8777		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Windham	10/18/2023	\$1,500.00
Mailing Address PO Box 4132		
City, State, Zip Code Laurel, MS 39441-4132		
Name of Employer (Required) Robinson Tire Co		
Occupation (Required) Executive	Aggregate Year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brian K. Johnson	10/05/2023	\$5,000.00
Mailing Address 113 Rosedowne Dr.		
City, State, Zip Code Madison, MS 39110-4757		
Name of Employer (Required) Trustmark National Bank		
Occupation (Required) Insurance Consultant	Aggregate Year-to-date	\$7,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark S. Bounds	10/17/2023	\$250.00
Mailing Address PO Box 1753		
City, State, Zip Code Madison, MS 39130-1753		
Name of Employer (Required) Mark S. Bounds Realty Partners		
Occupation (Required) Real Estate Broker	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name DVA Holding Company PAC	10/18/2023	\$10,000.00
Mailing Address PO Box 7434		
City, State, Zip Code Mobile, AL 36670-0434		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$10,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name RDC Holding LLC	10/18/2023	\$1,000.00
Mailing Address 79 Marais Ridge		
City, State, Zip Code Hattiesburg, MS 39402-7954		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Graham	10/12/2023	\$2,500.00
Mailing Address PO Box 1600		
City, State, Zip Code Gulfport, MS 39502-1600		
Name of Employer (Required) Business		
Occupation (Required) Administration	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sara Whelan Morgan	10/18/2023	\$500.00
Mailing Address 2204 Culleywood Rd		
City, State, Zip Code Jackson, MS 39211-5815		
Name of Employer (Required) Self Employed		
Occupation (Required) Accountant	Aggregate Year-to-date	\$500.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi Lumber Manufacturers Association	10/06/2023	\$1,000.00
Mailing Address PO Box 5241		
City, State, Zip Code Jackson, MS 39296-5241		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Tate for GovernorReporting Period 10/01/2023 through 10/29/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rea Montjoy	10/12/2023	\$1,000.00
Mailing Address 355 Main St		
City, State, Zip Code Bay Saint Louis, MS 39520-4411		
Name of Employer (Required) SAS		
Occupation (Required) Administration	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Merit Health River Oaks	10/04/2023	\$2,775.00
Mailing Address PO Box 5006		
City, State, Zip Code Antioch, TN 37011-5006		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,775.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marcia R. Swetman	10/09/2023	\$1,000.00
Mailing Address 1210 Beach Boulevard		
City, State, Zip Code Biloxi, MS 39530-3633		
Name of Employer (Required) N/A		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$1,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert R. Kane	10/03/2023	\$1,000.00
Mailing Address 202 S Toulme Street		
City, State, Zip Code Bay St Louis, MS 39520-4444		
Name of Employer (Required) Self		
Occupation (Required) Business	Aggregate Year-to-date	\$1,200.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Limited Partnership</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Waverly Partners L.P.	10/06/2023	\$1,000.00
Mailing Address One Magnolia Dr.		
City, State, Zip Code West Point, MS 39773-9148		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hue Townsend	10/15/2023	\$1,000.00
Mailing Address 400 Lee Ave		
City, State, Zip Code Belzoni, MS 39038-3708		
Name of Employer (Required) Guaranty Bank And Trust		
Occupation (Required) Banker	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John W McPherson Jr.	10/17/2023	\$2,500.00
Mailing Address PO Box 690		
City, State, Zip Code Indianola, MS 38751-0690		
Name of Employer (Required) Double Quick Inc		
Occupation (Required) VP	Aggregate Year-to-date	\$0.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ross Perot Jr.	10/13/2023	\$50,000.00
Mailing Address 3000 Turtle Creek Blvd		
City, State, Zip Code Dallas, TX 75219-6268		
Name of Employer (Required) Hillwood		
Occupation (Required) Chairman	Aggregate Year-to-date	\$50,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Pace Auto Sales LLC</u>	<u>10/18/2023</u>	<u>\$1,000.00</u>
Mailing Address <u>6812 Hwy 98W</u>		
City, State, Zip Code <u>Hattiesburg, MS 39402</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	<u>\$1,000.00</u>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Fredrick Aden Ballard</u>	<u>10/03/2023</u>	<u>\$250.00</u>
Mailing Address <u>3392 Old Highway 61 S</u>		
City, State, Zip Code <u>Leland, MS 38756-9796</u>		
Name of Employer (Required) <u>N/A</u>		
Occupation (Required) <u>Retired farmer</u>	Aggregate Year-to-date	<u>\$250.00</u>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Thomas G. Gresham</u>	<u>10/17/2023</u>	<u>\$2,500.00</u>
Mailing Address <u>105 E Gresham Street</u>		
City, State, Zip Code <u>Indianola, MS 38751-2422</u>		
Name of Employer (Required) <u>Double Quick Inc</u>		
Occupation (Required) <u>CEO</u>	Aggregate Year-to-date	<u>\$2,500.00</u>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>John Archer</u>	<u>10/10/2023</u>	<u>\$400.00</u>
Mailing Address <u>357 West Reed Rd</u>		
City, State, Zip Code <u>Greenville, MS 38701-6967</u>		
Name of Employer (Required) <u>Archer Alarms &amp; Telephones</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	<u>\$400.00</u>

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Kentray Hairston</u>	10/07/2023	\$500.00
Mailing Address <u>108 Seville Way</u>		
City, State, Zip Code <u>Madison, MS 39110-8170</u>		
Name of Employer (Required) <u>Butler Snow</u>		
Occupation (Required) <u>Attorney</u>	<b>Aggregate Year-to-date</b>	<b>\$500.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Gulf Coast Sands LLC</u>	10/10/2023	\$2,500.00
Mailing Address <u>406 Hemphill St</u>		
City, State, Zip Code <u>Hattiesburg, MS 39401-3809</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$2,500.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>William S. Ayres Jr.</u>	10/17/2023	\$1,000.00
Mailing Address <u>755 S. Washington Ave.</u>		
City, State, Zip Code <u>Greenville, MS 38701-5832</u>		
Name of Employer (Required) <u>Self</u>		
Occupation (Required) <u>Farmer</u>	<b>Aggregate Year-to-date</b>	<b>\$1,000.00</b>
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Thompson Engineering Inc.</u>	10/18/2023	\$1,000.00
Mailing Address <u>2970 Cottage Hill Road Suite 190</u>		
City, State, Zip Code <u>Mobile, AL 36606-4749</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$1,000.00</b>



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James H. Lipscomb III	10/06/2023	\$1,000.00
Mailing Address PO Box 636		
City, State, Zip Code Greenville, MS 38702-0636		
Name of Employer (Required) Lipscomb Oil Company		
Occupation (Required) President	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <i>refined, over corporate limit</i>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name BKS, Inc	10/25/2023	(\$1,000.00)
Mailing Address 7048 U.S. Hwy 49 N		
City, State, Zip Code Hattiesburg, MS 39402-9159		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name BKS, Inc	10/13/2023	\$1,000.00
Mailing Address 7048 U.S. Hwy 49 N		
City, State, Zip Code Hattiesburg, MS 39402-9159		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name W. W. Gresham III	10/17/2023	\$2,500.00
Mailing Address PO Box 690		
City, State, Zip Code Indianola, MS 38751-0690		
Name of Employer (Required) Gresham Petroleum Co		
Occupation (Required) Owner	Aggregate Year-to-date	\$2,500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brad Gatlin	10/19/2023	\$255.00
Mailing Address 1010 Highland Colony Pkwy		
City, State, Zip Code Ridgeland, MS 39157-8719		
Name of Employer (Required) Bankplus		
Occupation (Required) Banking	Aggregate Year-to-date	\$255.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Regan Kane	10/11/2023	\$250.00
Mailing Address 504 N Beach Blvd		
City, State, Zip Code Bay Saint Louis, MS 39520-4603		
Name of Employer (Required) John McDonald Realty		
Occupation (Required) Broker	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles C. Blalack	10/03/2023	\$5,000.00
Mailing Address 10187 Waterside Dr		
City, State, Zip Code Gulfport, MS 39503		
Name of Employer (Required) Kare-In-Home		
Occupation (Required) CEO	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gibson Steele IV	10/12/2023	\$1,000.00
Mailing Address 40 Riverside Rd		
City, State, Zip Code Hollandale, MS 38748-9743		
Name of Employer (Required) Self		
Occupation (Required) Farmer	Aggregate Year-to-date	\$1,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Seemann Composites, LLC</u>	10/12/2023	\$3,000.00
Mailing Address <u>PO Box 3449</u>		
City, State, Zip Code <u>Gulfport, MS 39505-3449</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$9,000.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Kendall Marquar</u>	10/12/2023	\$3,000.00
Mailing Address <u>5268 Pleasure St.</u>		
City, State, Zip Code <u>Bay Saint Louis, MS 39520-9588</u>		
Name of Employer (Required) <u>Self</u>		
Occupation (Required) <u>Business</u>	<b>Aggregate Year-to-date</b>	<b>\$3,000.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Pat Fore III</u>	10/12/2023	\$5,000.00
Mailing Address <u>10868 Channelside Dr.</u>		
City, State, Zip Code <u>Gulfport, MS 39503-6066</u>		
Name of Employer (Required) <u>Design Precast &amp; Pipe</u>		
Occupation (Required) <u>Executive</u>	<b>Aggregate Year-to-date</b>	<b>\$5,000.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Gloster Forest Products LLC</u>	10/13/2023	\$1,000.00
Mailing Address <u>PO Box 5327</u>		
City, State, Zip Code <u>Jackson, MS 39296-5327</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$6,000.00</b>



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gloster Forest Products LLC	10/06/2023	\$2,500.00
Mailing Address PO Box 5327		
City, State, Zip Code Jackson, MS 39296-5327		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Candidate Campaign Committee</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David McRae Campaign	10/20/2023	\$25,000.00
Mailing Address PO Box 24357		
City, State, Zip Code Jackson, MS 39225-4357		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$25,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Josiah R. Bonner Jr.	10/19/2023	\$500.00
Mailing Address PO Box 832		
City, State, Zip Code Montrose, AL 36559-0832		
Name of Employer (Required) University of South AL		
Occupation (Required) President	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Loren L. Monroe	10/12/2023	\$5,000.00
Mailing Address 1513 Highwood Drive		
City, State, Zip Code Mc Lean, VA 22101-5800		
Name of Employer (Required) BGR Group		
Occupation (Required) Principal	Aggregate Year-to-date	\$5,000.00

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Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jackson Truck Center, Inc.	10/25/2023	\$1,000.00
Mailing Address P.O. Box 7179		
City, State, Zip Code Jackson, MS 39282-7179		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Griffith	10/12/2023	\$1,000.00
Mailing Address 11388 Palm Valley Cove		
City, State, Zip Code Gulfport, MS 39503-7911		
Name of Employer (Required) EEP		
Occupation (Required) Executive	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mollie Reed	10/17/2023	\$250.00
Mailing Address 818 N Agency Lane		
City, State, Zip Code Ridgeland, MS 39157-9485		
Name of Employer (Required) K Noel Reed Jr.		
Occupation (Required) Accountant	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Benjamin J Spraggins	10/23/2023	\$500.00
Mailing Address 12114 Kent Avenue		
City, State, Zip Code Gulfport, MS 39503-2604		
Name of Employer (Required) Mississippi Department of Marine Resources		
Occupation (Required) Executive Director	Aggregate Year-to-date	\$1,250.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Candidate Campaign Committee</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Mandy For Mississippi</u>	10/10/2023	\$2,946.37
Mailing Address <u>1300 Pleasant Dr</u>		
City, State, Zip Code <u>Oxford, MS 38655-2964</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$2,946.37</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>political committee</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Hancock County Republican Executive Committee</u>	10/10/2023	\$250.00
Mailing Address <u>305 Reese St</u>		
City, State, Zip Code <u>Bay Saint Louis, MS 39520-2823</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$250.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Surya Gunasekara</u>	10/10/2023	\$2,053.36
Mailing Address <u>1300 Pleasant Dr.</u>		
City, State, Zip Code <u>Oxford, MS 38655-2964</u>		
Name of Employer (Required) <u>Self</u>		
Occupation (Required) <u>Attorney</u>	<b>Aggregate Year-to-date</b>	<b>\$2,053.36</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Sandra Maggio</u>	10/11/2023	\$500.00
Mailing Address <u>2201 24th Ave</u>		
City, State, Zip Code <u>Gulfport, MS 39501-4604</u>		
Name of Employer (Required) <u>N/A</u>		
Occupation (Required) <u>Homemaker</u>	<b>Aggregate Year-to-date</b>	<b>\$500.00</b>



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Keith Davis	10/12/2023	\$1,000.00
Mailing Address 13156 Alpine Dr.		
City, State, Zip Code Biloxi, MS 39532-5540		
Name of Employer (Required) State of Mississippi		
Occupation (Required) Administration DPS	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <u>refund over corporate limit</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hooker Engineering Services	10/25/2023	(\$500.00)
Mailing Address 1000 Washington Ave		
City, State, Zip Code Greenville, MS 38701-3730		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Hooker Engineering Services	10/17/2023	\$1,500.00
Mailing Address 1000 Washington Ave		
City, State, Zip Code Greenville, MS 38701-3730		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Trust</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert John Siragusa Trust	10/12/2023	\$1,000.00
Mailing Address 8515 Surf Drive Unit 1		
City, State, Zip Code Panama City, FL 32408-8703		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Advanced Design And Construction LLC	10/06/2023	\$20,000.00
Mailing Address PO Box 1490		
City, State, Zip Code Magee, MS 39111-1490		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$20,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gwen Azar	10/09/2023	\$1,000.00
Mailing Address 2043 Audubon Place		
City, State, Zip Code Greenville, MS 38701		
Name of Employer (Required) Self		
Occupation (Required) Business	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Joe Cannon	10/14/2023	\$5,000.00
Mailing Address 1009 Hayes Ave		
City, State, Zip Code Oxford, MS 38655-4617		
Name of Employer (Required) Cannon Motors		
Occupation (Required) Owner	Aggregate Year-to-date	\$7,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Greenville HEM-ONC PC	10/17/2023	\$1,000.00
Mailing Address 1556 Bellewood Dr.		
City, State, Zip Code Greenville, MS 38701-6970		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Tate for Governor  
 Reporting Period 10/01/2023 through 10/29/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Adkerson	10/02/2023	\$25,000.00
Mailing Address 333 N Central Ave		
City, State, Zip Code Phoenix, AZ 85004-2189		
Name of Employer (Required) Freeport-McMoRan Copper & Gold, Inc.		
Occupation (Required) President and CEO	<b>Aggregate Year-to-date</b>	<b>\$25,000.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kelly Smith III	10/10/2023	\$250.00
Mailing Address 1729 Pinewood Drive		
City, State, Zip Code Greenville, MS 38701-7641		
Name of Employer (Required) Retired		
Occupation (Required) Retired	<b>Aggregate Year-to-date</b>	<b>\$250.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ralph Owens	10/12/2023	\$250.00
Mailing Address Po Box 100		
City, State, Zip Code Metcalfe, MS 38760-0100		
Name of Employer (Required) Retired		
Occupation (Required) Retired	<b>Aggregate Year-to-date</b>	<b>\$250.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Demetrio Q Batol	10/19/2023	\$250.00
Mailing Address 3 Windsor Place		
City, State, Zip Code Long Beach, MS 39560-3326		
Name of Employer (Required) N/A		
Occupation (Required) Retired	<b>Aggregate Year-to-date</b>	<b>\$250.00</b>



Name of Candidate or Committee Tate for Governor  
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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Ares Group LLC</u>	10/18/2023	\$500.00
Mailing Address <u>54 Montclair</u>		
City, State, Zip Code <u>Hattiesburg, MS 39402-8164</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$500.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Paul Hollis</u>	10/17/2023	\$1,000.00
Mailing Address <u>301 Holland St. PO Box 240</u>		
City, State, Zip Code <u>Anguilla, MS 38721-0240</u>		
Name of Employer (Required) <u>Hollis Farms</u>		
Occupation (Required) <u>Owner</u>	<b>Aggregate Year-to-date</b>	<b>\$1,000.00</b>
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Build Mississippi PAC</u>	10/24/2023	\$20,000.00
Mailing Address <u>4209 Lakeland Dr # 214</u>		
City, State, Zip Code <u>Flowood, MS 39232-9212</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$60,000.00</b>
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Build Mississippi PAC</u>	10/11/2023	\$10,000.00
Mailing Address <u>4209 Lakeland Dr # 214</u>		
City, State, Zip Code <u>Flowood, MS 39232-9212</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$40,000.00</b>

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Drew Bryant</u>	10/18/2023	\$1,005.00
Mailing Address <u>4276 Lakeland Dr</u>		
City, State, Zip Code <u>Flowood, MS 39232-8804</u>		
Name of Employer (Required) <u>JFM Incorporated</u>		
Occupation (Required) <u>President</u>	<b>Aggregate Year-to-date</b>	<b>\$1,005.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Glenn A. Mueller</u>	10/11/2023	\$255.00
Mailing Address <u>15384 5th St</u>		
City, State, Zip Code <u>Gulfport, MS 39503-3184</u>		
Name of Employer (Required) <u>RPM Pizza</u>		
Occupation (Required) <u>President &amp; CEO</u>	<b>Aggregate Year-to-date</b>	<b>\$255.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Lawrence C. Long</u>	10/10/2023	\$250.00
Mailing Address <u>65 Holly Ridge Rd</u>		
City, State, Zip Code <u>Indianola, MS 38751-9691</u>		
Name of Employer (Required) <u>Saint Rest Planting Co.</u>		
Occupation (Required) <u>Partner</u>	<b>Aggregate Year-to-date</b>	<b>\$250.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>James H. Clayton</u>	10/15/2023	\$500.00
Mailing Address <u>103 E Gresham Street</u>		
City, State, Zip Code <u>Indianola, MS 38751-2422</u>		
Name of Employer (Required) <u>Planters Bank</u>		
Occupation (Required) <u>Banker</u>	<b>Aggregate Year-to-date</b>	<b>\$500.00</b>

Name of Candidate or Committee Tate for Governor  
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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Noble	10/10/2023	\$250.00
Mailing Address 104 Seymour Dr.		
City, State, Zip Code Indianola, MS 38751-2616		
Name of Employer (Required) Self		
Occupation (Required) Attorney	<b>Aggregate Year-to-date</b>	<b>\$250.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard H McNeel	10/25/2023	\$1,005.00
Mailing Address 2566 Lake Circle		
City, State, Zip Code Jackson, MS 39211-6624		
Name of Employer (Required) JBHM Architects, P.A.		
Occupation (Required) Principal Architect	<b>Aggregate Year-to-date</b>	<b>\$2,005.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Oliver	10/18/2023	\$1,005.00
Mailing Address 41 Canebrake Blvd		
City, State, Zip Code Hattiesburg, MS 39402-8710		
Name of Employer (Required) Greenbrier Properties		
Occupation (Required) Real Estate	<b>Aggregate Year-to-date</b>	<b>\$1,005.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Alexander	10/16/2023	\$1,000.00
Mailing Address PO Box 507		
City, State, Zip Code Bay Springs, MS 39422-0507		
Name of Employer (Required) Alexander Hardware Company		
Occupation (Required) Executive	<b>Aggregate Year-to-date</b>	<b>\$1,000.00</b>



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jason Chiniche	10/16/2023	\$1,000.00
Mailing Address 725 Old Spanish Trail		
City, State, Zip Code Bay Saint Louis, MS 39520-2507		
Name of Employer (Required) James J. Chiniche P.A. Inc.		
Occupation (Required) Engineer	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi Power Company State PAC	10/19/2023	\$15,000.00
Mailing Address PO Box 4079		
City, State, Zip Code Gulfport, MS 39502-4079		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$30,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Buck Hobbs	10/06/2023	\$1,000.00
Mailing Address 2479 Highway 309 S		
City, State, Zip Code Byhalia, MS 38611-8343		
Name of Employer (Required) Forestry		
Occupation (Required) Forestry	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David R. Leard	10/02/2023	\$500.00
Mailing Address 108 West Market St.		
City, State, Zip Code Greenwood, MS 38930-4432		
Name of Employer (Required) Johnson McAdams		
Occupation (Required) Engineer	Aggregate Year-to-date	\$500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mac Properties Holdings LLC	10/12/2023	\$1,000.00
Mailing Address 840 Osprey Cove		
City, State, Zip Code Biloxi, MS 39532-4648		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <u>refund, over corporate limit</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Evergreen Industries, Inc.	10/25/2023	(\$1,500.00)
Mailing Address PO Box 526		
City, State, Zip Code Liberty, MS 39645-0526		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Evergreen Industries, Inc.	10/20/2023	\$2,500.00
Mailing Address PO Box 526		
City, State, Zip Code Liberty, MS 39645-0526		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi Chiropractors PAC	10/25/2023	\$1,000.00
Mailing Address 4294 Lakeland Dr Ste 100		
City, State, Zip Code Flowood, MS 39232-9510		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$6,000.00

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## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lowndes Farm Supply	10/23/2023	\$500.00
Mailing Address 69 Co-Op Road		
City, State, Zip Code Columbus, MS 39705-8145		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nell Frisbie	10/11/2023	\$100.00
Mailing Address 24 Chapel Hill Rd		
City, State, Zip Code Bay Saint Louis, MS 39520-4607		
Name of Employer (Required) Coldwell Banker Alfonso Realty		
Occupation (Required) Realtor	Aggregate Year-to-date	\$455.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Capitol Advocacy Group, PAC	10/16/2023	\$2,500.00
Mailing Address PO Box 217		
City, State, Zip Code Jackson, MS 39205-0217		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Magnolia Utility Services, LLC	10/25/2023	\$1,000.00
Mailing Address PO Box 6717		
City, State, Zip Code Jackson, MS 39282-6717		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Duhe	10/11/2023	\$1,000.00
Mailing Address 1600 18th Ave		
City, State, Zip Code Gulfport, MS 39501-2130		
Name of Employer (Required) Balch & Bingham LLP		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,250.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Management & Training Corp PAC	10/26/2023	\$5,000.00
Mailing Address PO Box 10		
City, State, Zip Code Centerville, UT 84014-0010		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bradley Hathaway Sr.	10/17/2023	\$250.00
Mailing Address PO Box 1856		
City, State, Zip Code Greenville, MS 38702-1856		
Name of Employer (Required) Campbell Delong LLP		
Occupation (Required) Attorney	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donna Roberts	10/11/2023	\$5,000.00
Mailing Address 503 N Lamar Boulevard		
City, State, Zip Code Oxford, MS 38655-3205		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$7,500.00

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## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name The Bailey Group Inc.	10/12/2023	\$1,000.00
Mailing Address 234 Davis Ave.		
City, State, Zip Code Pass Christian, MS 39571-4506		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Aimee Dunn	10/16/2023	\$1,000.00
Mailing Address 9347 County Road 142		
City, State, Zip Code Itta Bena, MS 38941-2761		
Name of Employer (Required) Sims Realty & Development		
Occupation (Required) Realtor	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Allen	10/10/2023	\$2,500.00
Mailing Address 100 Arbor Lane		
City, State, Zip Code Indianola, MS 38751-2520		
Name of Employer (Required) Consolidated Catfish Producers		
Occupation (Required) US Catfish	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippi Manufacturers Association PAC	10/20/2023	\$10,000.00
Mailing Address 720 N President St		
City, State, Zip Code Jackson, MS 39202-3004		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$35,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eluse Roberts	10/12/2023	\$1,000.00
Mailing Address PO Box 3333		
City, State, Zip Code Gulfport, MS 39505-3333		
Name of Employer (Required) Self		
Occupation (Required) E&B Enterprise LLC	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Merit Health Central	10/04/2023	\$2,775.00
Mailing Address PO Box 5006		
City, State, Zip Code Antioch, TN 37011-5006		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,775.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Gilbow	10/10/2023	\$1,000.00
Mailing Address 1209 Bayou Dr.		
City, State, Zip Code Indianola, MS 38751-2901		
Name of Employer (Required) NSMC Pharmacy		
Occupation (Required) Pharmacist	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kent Nicaud	10/12/2023	\$5,000.00
Mailing Address 849 E Scenic Dr		
City, State, Zip Code Pass Christian, MS 39571-4624		
Name of Employer (Required) Gulfport Memorial Hospital		
Occupation (Required) COO	Aggregate Year-to-date	\$30,000.00



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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name J. Kenneth Austin	10/06/2023	\$500.00
Mailing Address 126 Fleitas Ave		
City, State, Zip Code Pass Christian, MS 39571-4507		
Name of Employer (Required) Coast Realty		
Occupation (Required) Realtor	<b>Aggregate Year-to-date</b>	<b>\$1,000.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name The Jacobs Financial Group LLC	10/12/2023	\$1,000.00
Mailing Address 1956 Pass Road		
City, State, Zip Code Biloxi, MS 39531-4100		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$1,000.00</b>
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mississippians for Self-Insurance PAC	10/15/2023	\$1,000.00
Mailing Address 825 N President St		
City, State, Zip Code Jackson, MS 39202-2561		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$1,000.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Van Devender	10/19/2023	\$500.00
Mailing Address PO Box 5327		
City, State, Zip Code Jackson, MS 39296-5327		
Name of Employer (Required) Claw Forestry Services LLC		
Occupation (Required) CEO	<b>Aggregate Year-to-date</b>	<b>\$500.00</b>

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Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Nicaud Bunch	10/11/2023	\$250.00
Mailing Address PO Box 141		
City, State, Zip Code Perkinston, MS 39573-0003		
Name of Employer (Required) John McDonald Realty		
Occupation (Required) Realtor	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Dane III	10/13/2023	\$5,000.00
Mailing Address 11638 Bluff Lane		
City, State, Zip Code Gulfport, MS 39503-6151		
Name of Employer (Required) United States Marine, Inc.		
Occupation (Required) Chairman	Aggregate Year-to-date	\$7,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wirt Yerger III	10/24/2023	\$5,000.00
Mailing Address 300 Concourse Blvd. Suite 101		
City, State, Zip Code Ridgeland, MS 39157-2091		
Name of Employer (Required) Glacier Holdings, LLC		
Occupation (Required) Manager	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edward Hosp	10/22/2023	\$1,000.00
Mailing Address 9806 Wyncrest Circle		
City, State, Zip Code Montgomery, AL 36117-7406		
Name of Employer (Required) BCBS AL		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00

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# ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name GuidePoint LLC	10/07/2023	\$10,000.00
Mailing Address 1037 Lake Village Cir STE A		
City, State, Zip Code Brandon, MS 39047-6725		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$12,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paige Plash	10/13/2023	\$1,000.00
Mailing Address 57 McGregor Ave South		
City, State, Zip Code Mobile, AL 36608-1823		
Name of Employer (Required) Encore Rehab		
Occupation (Required) Physical Therapist	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John W McCurdy II	10/15/2023	\$5,000.00
Mailing Address PO Box 2038		
City, State, Zip Code Oxford, MS 38655-8038		
Name of Employer (Required) Self		
Occupation (Required) Construction	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Merit Health Biloxi	10/04/2023	\$2,775.00
Mailing Address PO Box 5006		
City, State, Zip Code Antioch, TN 37011-5006		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,775.00



Name of Candidate or Committee

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Fairbanks	10/12/2023	\$100.00
Mailing Address 107 Front St. STE 2134		
City, State, Zip Code Vidalia, LA 71373-2834		
Name of Employer (Required) Self		
Occupation (Required) Surgeon	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Fairbanks	10/12/2023	\$100.00
Mailing Address 107 Front St. STE 2134		
City, State, Zip Code Vidalia, LA 71373-2834		
Name of Employer (Required) Self		
Occupation (Required) Surgeon	Aggregate Year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elevance Health PAC	10/18/2023	\$25,000.00
Mailing Address 1001 Pennsylvania Ave NW Ste 710		
City, State, Zip Code Washington, DC 20004-2513		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$25,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William F. Bridgforth II	10/18/2023	\$250.00
Mailing Address 2817 Fox Road		
City, State, Zip Code Vaughan, MS 39179-9786		
Name of Employer (Required) Bridgforth Farms		
Occupation (Required) Owner	Aggregate Year-to-date	\$250.00

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# ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name A. Wettlin Treppendahl Jr.	10/20/2023	\$500.00
Mailing Address PO Box 1215		
City, State, Zip Code Woodville, MS 39669-1215		
Name of Employer (Required) Treppendahl Super Foods		
Occupation (Required) Owner	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gainwell Holding Corp PAC	10/20/2023	\$5,000.00
Mailing Address 355 Ledgelawn Dr		
City, State, Zip Code Conway, AR 72034-9501		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James D Tharpe	10/10/2023	\$100.00
Mailing Address 609 Rolling Oaks Dr.		
City, State, Zip Code Grenada, MS 38901-9285		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James A. Haslam III	10/10/2023	\$5,000.00
Mailing Address PO Box 10528		
City, State, Zip Code Knoxville, TN 37939-0528		
Name of Employer (Required) Pilot Oil		
Occupation (Required) Owner	Aggregate Year-to-date	\$5,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Terry Murrell	10/10/2023	\$250.00
Mailing Address PO Box 5		
City, State, Zip Code Avon, MS 38723-0005		
Name of Employer (Required) Self		
Occupation (Required) Farmer	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Brannon	10/10/2023	\$255.00
Mailing Address 145 Sea Oaks Blvd		
City, State, Zip Code Long Beach, MS 39560-5842		
Name of Employer (Required) NOARC		
Occupation (Required) President	Aggregate Year-to-date	\$755.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Robertson Jr.	10/13/2023	\$250.00
Mailing Address 65 Holly Ridge Road		
City, State, Zip Code Indianola, MS 38751-9691		
Name of Employer (Required) Self		
Occupation (Required) Farmer	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mark Cumbest	10/24/2023	\$800.00
Mailing Address 17725 MS-63		
City, State, Zip Code Moss Point, MS 39562		
Name of Employer (Required) Cumbest Realty Inc.		
Occupation (Required) Owner	Aggregate Year-to-date	\$2,500.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Clark PAC	10/24/2023	\$5,000.00
Mailing Address 300 Oakland Flatrock Rd		
City, State, Zip Code Oakland, KY 42159-9766		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roger Bacon	10/07/2023	\$250.00
Mailing Address 2295 Sunset Blvd		
City, State, Zip Code Slidell, LA 70461-5605		
Name of Employer (Required) Mossy of Picayune		
Occupation (Required) Auto Dealer	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Salloum	10/24/2023	\$500.00
Mailing Address PO Box 460		
City, State, Zip Code Gulfport, MS 39502-0460		
Name of Employer (Required) Franke & Salloum LLP		
Occupation (Required) Attorney	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Peyton Self III	10/14/2023	\$2,500.00
Mailing Address PO Box 367		
City, State, Zip Code Marks, MS 38646-0367		
Name of Employer (Required) Citizens Bank & Trust Co		
Occupation (Required) Banker	Aggregate Year-to-date	\$2,500.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Progressive Medical Enterprise LLC</u>	10/16/2023	\$2,000.00
Mailing Address <u>628 N 14th St.</u>		
City, State, Zip Code <u>Oxford, MS 38655-3220</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$5,000.00</b>
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Mississippi Strong</u>	10/18/2023	\$500,000.00
Mailing Address <u>1747 Pennsylvania Ave NW Ste 250</u>		
City, State, Zip Code <u>Washington, DC 20006-4643</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$1,000,000.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Carl Liberty</u>	10/09/2023	\$250.00
Mailing Address <u>1301 Martin Luther Kind Blvd</u>		
City, State, Zip Code <u>Picayune, MS 39466-5426</u>		
Name of Employer (Required) <u>Power Dynamics Innovations LLC</u>		
Occupation (Required) <u>Executive</u>	<b>Aggregate Year-to-date</b>	<b>\$250.00</b>
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Tenax Aerospace, LLC</u>	10/19/2023	\$5,000.00
Mailing Address <u>124 One Madison Plaza STE 2100</u>		
City, State, Zip Code <u>Madison, MS 39110-2021</u>		
Name of Employer (Required)		
Occupation (Required)	<b>Aggregate Year-to-date</b>	<b>\$5,000.00</b>

Name of Candidate or Committee

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sara Garcia	10/11/2023	\$250.00
Mailing Address 7418 Turnberry Ct.		
City, State, Zip Code Diamondhead, MS 39525-4298		
Name of Employer (Required) Self		
Occupation (Required) Business	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cindy Stevens	10/17/2023	\$500.00
Mailing Address 888 Blvd of the Arts Unit 306		
City, State, Zip Code Sarasota, FL 34236-4828		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John D Calhoun	10/18/2023	\$2,000.00
Mailing Address 126 Amite Street		
City, State, Zip Code Jackson, MS 39201-2101		
Name of Employer (Required) IMS Engineers		
Occupation (Required) CEO	Aggregate Year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Nowell	10/17/2023	\$1,000.00
Mailing Address 406 Norman Circle		
City, State, Zip Code Cleveland, MS 38732-8714		
Name of Employer (Required) Partnership Properties		
Occupation (Required) Realtor	Aggregate Year-to-date	\$1,250.00



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## ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Baker Services	10/25/2023	\$1,000.00
Mailing Address PO Box 6717		
City, State, Zip Code Jackson, MS 39282-6717		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rebecca Ivison	10/05/2023	\$5,000.00
Mailing Address 2631 Lake Circle		
City, State, Zip Code Jackson, MS 39211-6743		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bill Rosamond	10/13/2023	\$2,005.00
Mailing Address 4 Miller Pkwy Apt 9103		
City, State, Zip Code Jackson, MS 39211-1839		
Name of Employer (Required) State of MS		
Occupation (Required) Attorney	Aggregate Year-to-date	\$2,005.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name J. Rick Carter Sr.	10/12/2023	\$2,500.00
Mailing Address PO Box 1600		
City, State, Zip Code Gulfport, MS 39502-1600		
Name of Employer (Required) Island View Casino Resort		
Occupation (Required) Owner	Aggregate Year-to-date	\$20,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Judith Bonner	10/16/2023	\$500.00
Mailing Address PO Box 379		
City, State, Zip Code Point Clear, AL 36564-0379		
Name of Employer (Required) N/A		
Occupation (Required) Retired	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Baxter	10/12/2023	\$250.00
Mailing Address 133 Carroll Ave		
City, State, Zip Code Bay Saint Louis, MS 39520-4503		
Name of Employer (Required) Wealth Management		
Occupation (Required) SVP	Aggregate Year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Katie Howard	10/18/2023	\$2,500.00
Mailing Address 20 Pine Villa		
City, State, Zip Code Ellisville, MS 39437-8782		
Name of Employer (Required) N/A		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Larry W. Clark	10/11/2023	\$5,000.00
Mailing Address PO Box 789		
City, State, Zip Code Amory, MS 38821-0789		
Name of Employer (Required) Larry Clark Chevrolet-Cadillac, Inc.		
Occupation (Required) Owner	Aggregate Year-to-date	\$5,000.00

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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Arthur Fokakis	10/12/2023	\$50.00
Mailing Address 120 Wildwood Trace		
City, State, Zip Code Hattiesburg, MS 39402-2350		
Name of Employer (Required) Retired		
Occupation (Required) Physician	Aggregate Year-to-date	\$300.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Weyerhaeuser NR Company	10/25/2023	\$1,000.00
Mailing Address 220 Occidental Ave S		
City, State, Zip Code Seattle, WA 98104-3120		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name George L. Vanlandingham	10/17/2023	\$2,500.00
Mailing Address 44 Brown Rd.		
City, State, Zip Code Leland, MS 38756-9489		
Name of Employer (Required) Self Employed		
Occupation (Required) Farmer	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Donnell III	10/18/2023	\$1,000.00
Mailing Address 8 Town Center Sq		
City, State, Zip Code Hattiesburg, MS 39402		
Name of Employer (Required) Self		
Occupation (Required) CPA	Aggregate Year-to-date	\$2,000.00



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## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert John Siragusa	10/12/2023	\$1,000.00
Mailing Address 8515 Surf Drive Unit 1		
City, State, Zip Code Panama City, FL 32408-8703		
Name of Employer (Required) Self		
Occupation (Required) Business	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Vicksburg Forest Products LLC	10/13/2023	\$1,000.00
Mailing Address PO Box 5327		
City, State, Zip Code Jackson, MS 39296-5327		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$6,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Vicksburg Forest Products LLC	10/06/2023	\$2,500.00
Mailing Address PO Box 5327		
City, State, Zip Code Jackson, MS 39296-5327		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Jay Trapani	10/11/2023	\$250.00
Mailing Address 219 N Beach Blvd		
City, State, Zip Code Waveland, MS 39576-4204		
Name of Employer (Required) City of Waveland		
Occupation (Required) Mayor	Aggregate Year-to-date	\$250.00

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# ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Merit Health Natchez	10/04/2023	\$2,775.00
Mailing Address PO Box 5006		
City, State, Zip Code Antioch, TN 37011-5006		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,775.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David B. Hall	10/06/2023	\$500.00
Mailing Address PO Box 3727		
City, State, Zip Code Meridian, MS 39303-3727		
Name of Employer (Required) Hall Timberlands		
Occupation (Required) CEO	Aggregate Year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Luke Chamblee	10/02/2023	\$5,055.00
Mailing Address 3837 Majestic Oaks Dr.		
City, State, Zip Code Oxford, MS 38655-8153		
Name of Employer (Required) Self		
Occupation (Required) Real Estate	Aggregate Year-to-date	\$6,110.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Scott Huskey	10/26/2023	\$500.00
Mailing Address 620 Muirwood Cr.		
City, State, Zip Code Ridgeland, MS 39157-3624		
Name of Employer (Required) Brandon		
Occupation (Required) Teacher	Aggregate Year-to-date	\$700.00

Name of Candidate or Committee

Tate for Governor

Reporting Period 10/01/2023through 10/29/2023

## ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steve Downing	10/16/2023	\$5,000.00
Mailing Address 309 Fazio Dr.		
City, State, Zip Code Oxford, MS 38655-2326		
Name of Employer (Required) Providence Assisted Living		
Occupation (Required) Executive	Aggregate Year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Denchfield	10/24/2023	\$1,000.00
Mailing Address 8910 Mohawk Lane		
City, State, Zip Code Bethesda, MD 20817-3520		
Name of Employer (Required) Williams & Connolly		
Occupation (Required) Associate	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name C. Douglas Simmons III	10/15/2023	\$2,500.00
Mailing Address PO Box 65		
City, State, Zip Code Arcola, MS 38722-0065		
Name of Employer (Required) Self		
Occupation (Required) Farmer	Aggregate Year-to-date	\$2,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kristi Thomas	10/20/2023	\$500.00
Mailing Address 725 Danforth Dr.		
City, State, Zip Code Madison, MS 39110-6300		
Name of Employer (Required) N/A		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$500.00





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## ITEMIZED DISBURSEMENTS

Full Name	Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursement this period
Hudson Hohn	10/17/2023	\$30.00
Mailing Address 13904 Florida St.		
City, State, Zip Code Vanceleave, MS 39565-6421		
Purpose of Disbursement (Optional) Payroll Expense	Aggregate Year-to-date	\$240.00
Hederman Brothers	10/10/2023	\$192.63
Mailing Address P.O. Box 1036		
City, State, Zip Code Madison, MS 39130-1036		
Purpose of Disbursement (Optional) Printing Services	Aggregate Year-to-date	\$84,723.15
Grand Centennial Hotel	10/12/2023	\$109.88
Mailing Address 200 E Beach Blvd		
City, State, Zip Code Gulfport, MS 39507-1200		
Purpose of Disbursement (Optional) Travel Expense	Aggregate Year-to-date	\$109.88
OnMessage, Inc.	10/13/2023	\$249,156.93
Mailing Address 705 Melvin Ave #105		
City, State, Zip Code Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional) Media Buy	Aggregate Year-to-date	\$7,110,615.44
OnMessage, Inc.	10/04/2023	\$10,000.00
Mailing Address 705 Melvin Ave #105		
City, State, Zip Code Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional) Consulting	Aggregate Year-to-date	\$5,468,304.00
Snapshot Publishing LLC	10/05/2023	\$262.50
Mailing Address P.O. Box 320925		
City, State, Zip Code Flowood, MS 39232-0925		
Purpose of Disbursement (Optional) Design Services	Aggregate Year-to-date	\$3,630.60

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## ITEMIZED DISBURSEMENTS

Full Name	Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursement this period
OnMessage, Inc.	10/26/2023	\$893,832.92
Mailing Address 705 Melvin Ave #105		
City, State, Zip Code Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional) Media Buy	Aggregate Year-to-date	\$8,728,105.36
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hederman Brothers	10/26/2023	\$74.90
Mailing Address P.O. Box 1036		
City, State, Zip Code Madison, MS 39130-1036		
Purpose of Disbursement (Optional) Printing Services	Aggregate Year-to-date	\$92,289.97
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
OnMessage, Inc.	10/27/2023	\$19,996.00
Mailing Address 705 Melvin Ave #105		
City, State, Zip Code Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional) Media Buy	Aggregate Year-to-date	\$8,748,101.36
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Houston Harkins	10/04/2023	\$90.00
Mailing Address 8787 Sundown Lane		
City, State, Zip Code Gulfport, MS 39503-5641		
Purpose of Disbursement (Optional) Payroll Expense	Aggregate Year-to-date	\$90.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
OnMessage, Inc.	10/11/2023	\$570,965.00
Mailing Address 705 Melvin Ave #105		
City, State, Zip Code Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional) Media Buy	Aggregate Year-to-date	\$6,861,458.51
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
OnMessage, Inc.	10/27/2023	\$74,000.00
Mailing Address 705 Melvin Ave #105		
City, State, Zip Code Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional) Research	Aggregate Year-to-date	\$8,822,101.36



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## ITEMIZED DISBURSEMENTS

Full Name		Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursement this period
Wendi Barrett		10/04/2023	\$210.00
Mailing Address 12301 Tiffany Lane			
City, State, Zip Code Biloxi, MS 39532-9292			
Purpose of Disbursement (Optional) Payroll Expense		Aggregate Year-to-date	\$210.00
Full Name The Ups Store		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4209 Lakeland Dr.		10/25/2023	\$27.36
City, State, Zip Code Flowood, MS 39232-9212			
Purpose of Disbursement (Optional) Postage		Aggregate Year-to-date	\$306.83
Full Name Hilton Garden Inn Tupelo		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 363 E Main St		10/02/2023	\$157.91
City, State, Zip Code Tupelo, MS 38804-4025			
Purpose of Disbursement (Optional) Travel Expense		Aggregate Year-to-date	\$393.99
Full Name John Peyton Kyle		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2110 Legends Drive		10/04/2023	\$193.88
City, State, Zip Code Nesbit, MS 38651-8335			
Purpose of Disbursement (Optional) Expense reimbursement		Aggregate Year-to-date	\$8,651.48
Full Name Dennis Tynes		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 15601 Ridge Court		10/04/2023	\$375.00
City, State, Zip Code Biloxi, MS 39532-4395			
Purpose of Disbursement (Optional) Payroll Expense		Aggregate Year-to-date	\$375.00
Full Name OnMessage, Inc.		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 705 Melvin Ave #105		10/06/2023	\$97,502.93
City, State, Zip Code Annapolis, MD 21401-1534			
Purpose of Disbursement (Optional) Media Buy		Aggregate Year-to-date	\$6,269,795.93

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## ITEMIZED DISBURSEMENTS

		Aggregate Total Running	
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
The Ups Store			
Mailing Address	4209 Lakeland Dr.	10/06/2023	\$64.26
City, State, Zip Code	Flowood, MS 39232-9212		
Purpose of Disbursement (Optional)	Postage	Aggregate Year-to-date	\$172.93
Hederman Brothers			
Mailing Address	P.O. Box 1036	10/04/2023	\$1,661.39
City, State, Zip Code	Madison, MS 39130-1036		
Purpose of Disbursement (Optional)	Printing Services	Aggregate Year-to-date	\$80,154.27
Houston Harkins			
Mailing Address	8787 Sundown Lane	10/17/2023	\$120.00
City, State, Zip Code	Gulfport, MS 39503-5641		
Purpose of Disbursement (Optional)	Payroll Expense	Aggregate Year-to-date	\$210.00
Butler Snow			
Mailing Address	P.O. Box 6010	10/17/2023	\$5,625.00
City, State, Zip Code	Ridgeland, MS 39158-6010		
Purpose of Disbursement (Optional)	Legal Fees	Aggregate Year-to-date	\$32,233.00
Jackson Harkins			
Mailing Address	8787 Sundown Lane	10/17/2023	\$105.00
City, State, Zip Code	Gulfport, MS 39503-5641		
Purpose of Disbursement (Optional)	Payroll Expense	Aggregate Year-to-date	\$247.50
OnMessage, Inc.			
Mailing Address	705 Melvin Ave #105	10/04/2023	\$657,684.00
City, State, Zip Code	Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional)	Media Buy	Aggregate Year-to-date	\$6,125,988.00

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## ITEMIZED DISBURSEMENTS

Full Name		Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursement this period
Cooper Restaurant		10/20/2023	\$472.56
Mailing Address 118 N Royal St.			
City, State, Zip Code Mobile, AL 36602-3603			
Purpose of Disbursement (Optional) Event Expense		Aggregate Year-to-date	\$472.56
Full Name Erica Morgan		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 102		10/11/2023	\$5.63
City, State, Zip Code Saltillo, MS 38866-0102			
Purpose of Disbursement (Optional) Reimbursement		Aggregate Year-to-date	\$917.81
Full Name PT Strategy LLC		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1223 Aldebraran Dr.		10/01/2023	\$5,000.00
City, State, Zip Code Mc Lean, VA 22101-2304			
Purpose of Disbursement (Optional) Consulting Services		Aggregate Year-to-date	\$39,723.02
Full Name Brantley Muse		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 297 Barnes Road		10/18/2023	\$90.00
City, State, Zip Code Florence, MS 39073-8065			
Purpose of Disbursement (Optional) Payroll Expense		Aggregate Year-to-date	\$232.50
Full Name Mr. Jackie's		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 E Beach Blvd		10/16/2023	\$291.00
City, State, Zip Code Gulfport, MS 39507-1200			
Purpose of Disbursement (Optional) Event Expense		Aggregate Year-to-date	\$291.00
Full Name Scott County Federation of Republican Women		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 400 Fairchilds Road		10/09/2023	\$250.00
City, State, Zip Code Morton, MS 39117-8529			
Purpose of Disbursement (Optional) Advertising, Event Sponsorship		Aggregate Year-to-date	\$250.00



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10/29/2023**ITEMIZED DISBURSEMENTS**

		Aggregate Total Running	
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
Baylor Barrett		10/04/2023	\$90.00
Mailing Address	12301 Tiffany Lane		
City, State, Zip Code	Biloxi, MS 39532-9292		
Purpose of Disbursement (Optional)	Payroll Expense	Aggregate Year-to-date	\$90.00
Full Name	Mississippi Republican Party	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	P.O. Box 60	10/02/2023	\$2,050.00
City, State, Zip Code	Jackson, MS 39205-0060		
Purpose of Disbursement (Optional)	Rent for office space	Aggregate Year-to-date	\$27,400.00
Full Name	OnMessage, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	705 Melvin Ave #105	10/27/2023	\$9,458.50
City, State, Zip Code	Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional)	Production	Aggregate Year-to-date	\$8,831,559.86
Full Name	Hederman Brothers	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	P.O. Box 1036	10/11/2023	\$1,812.05
City, State, Zip Code	Madison, MS 39130-1036		
Purpose of Disbursement (Optional)	Printing Services	Aggregate Year-to-date	\$86,535.20
Full Name	Hotel Indigo	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	103 South 30th Ave.	10/02/2023	\$173.63
City, State, Zip Code	Hattiesburg, MS 39401		
Purpose of Disbursement (Optional)	Travel Expense	Aggregate Year-to-date	\$674.08
Full Name	Hudson Hohn	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	13904 Florida St.	10/04/2023	\$210.00
City, State, Zip Code	Vanceleave, MS 39565-6421		
Purpose of Disbursement (Optional)	Payroll Expense	Aggregate Year-to-date	\$210.00

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## ITEMIZED DISBURSEMENTS

Full Name		Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursement this period
The Ups Store		10/06/2023	\$12.05
Mailing Address 4209 Lakeland Dr.			
City, State, Zip Code Flowood, MS 39232-9212			
Purpose of Disbursement (Optional) Postage		Aggregate Year-to-date	\$184.98
Full Name OnMessage, Inc.		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 705 Melvin Ave #105		10/27/2023	\$33,580.00
City, State, Zip Code Annapolis, MD 21401-1534			
Purpose of Disbursement (Optional) Production		Aggregate Year-to-date	\$8,865,139.86
Full Name OnMessage, Inc.		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 705 Melvin Ave #105		10/27/2023	\$500,000.00
City, State, Zip Code Annapolis, MD 21401-1534			
Purpose of Disbursement (Optional) Media Buy		Aggregate Year-to-date	\$9,365,139.86
Full Name Klaudi-ann Carlisle		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 10750 Road 733		10/04/2023	\$210.00
City, State, Zip Code Philadelphia, MS 39350-5647			
Purpose of Disbursement (Optional) Payroll Expense		Aggregate Year-to-date	\$210.00
Full Name Google Gsuite		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1600 Amphitheater Parkway Mountain View		10/02/2023	\$60.00
City, State, Zip Code Mountain View, CA 94043			
Purpose of Disbursement (Optional) Email and Data Services		Aggregate Year-to-date	\$542.00
Full Name Dennis Tynes		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 15601 Ridge Court		10/17/2023	\$30.00
City, State, Zip Code Biloxi, MS 39532-4395			
Purpose of Disbursement (Optional) Payroll Expense		Aggregate Year-to-date	\$405.00

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## ITEMIZED DISBURSEMENTS

Full Name	Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursement this period
Willow Blu Florist	10/02/2023	\$219.12
Mailing Address 1201 Hwy 49 S STE 16		
City, State, Zip Code Richland, MS 39218		
Purpose of Disbursement (Optional) Event Expense	Aggregate Year-to-date	\$296.12
Full Name Brantley Muse	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 297 Barnes Road	10/04/2023	\$142.50
City, State, Zip Code Florence, MS 39073-8065		
Purpose of Disbursement (Optional) Payroll Expense	Aggregate Year-to-date	\$142.50
Full Name Sheraton Flowood Refuge Hotel and Conference Center	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2200 Refuge Blvd	10/26/2023	\$7,000.00
City, State, Zip Code Flowood, MS 39232-2203		
Purpose of Disbursement (Optional) Event Expense	Aggregate Year-to-date	\$7,000.00
Full Name Grand Centennial Hotel	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 E Beach Blvd	10/16/2023	\$152.66
City, State, Zip Code Gulfport, MS 39507-1200		
Purpose of Disbursement (Optional) Travel Expense	Aggregate Year-to-date	\$262.54
Full Name C Spire	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P.O. Box 519	10/16/2023	\$1,089.52
City, State, Zip Code Meadville, MS 39653-0519		
Purpose of Disbursement (Optional) Wireless Services, IT Services	Aggregate Year-to-date	\$20,422.32
Full Name Blaise Meadow	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 7000 Ocean Springs Road	10/17/2023	\$322.50
City, State, Zip Code Ocean Springs, MS 39564-8226		
Purpose of Disbursement (Optional) Payroll Expense	Aggregate Year-to-date	\$322.50



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10/29/2023**ITEMIZED DISBURSEMENTS**

		Aggregate Total Running	
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
Hederman Group LLC		10/05/2023	\$78,522.73
Mailing Address	3825 Redbud Road		
City, State, Zip Code	Jackson, MS 39211-6712		
Purpose of Disbursement (Optional)	Consulting Services	Aggregate Year-to-date	\$78,522.73
Baylor Barrett		10/17/2023	\$255.00
Mailing Address	12301 Tiffany Lane		
City, State, Zip Code	Biloxi, MS 39532-9292		
Purpose of Disbursement (Optional)	Payroll Expense	Aggregate Year-to-date	\$345.00
Storagemax		10/03/2023	\$608.00
Mailing Address	4600 Lakeland Drive		
City, State, Zip Code	Flowood, MS 39232-8978		
Purpose of Disbursement (Optional)	Storage Fees	Aggregate Year-to-date	\$6,020.00
OnMessage, Inc.		10/17/2023	\$22,680.00
Mailing Address	705 Melvin Ave #105		
City, State, Zip Code	Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional)	Production	Aggregate Year-to-date	\$7,133,295.44
All Signs		10/25/2023	\$405.69
Mailing Address	PO Box 6265		
City, State, Zip Code	Gulfport, MS 39506-6265		
Purpose of Disbursement (Optional)	Printed Materials	Aggregate Year-to-date	\$405.69
OnMessage, Inc.		10/27/2023	\$35,866.59
Mailing Address	705 Melvin Ave #105		
City, State, Zip Code	Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional)	Post Production	Aggregate Year-to-date	\$9,401,006.45

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## ITEMIZED DISBURSEMENTS

		Aggregate Total Running	
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
Clay's Print Shop Inc.		10/26/2023	\$770.40
Mailing Address	1513 24 Ave.		
City, State, Zip Code	Gulfport, MS 39501-2070		
Purpose of Disbursement (Optional)	Printing Services	Aggregate Year-to-date	\$770.40
Full Name	River Hills	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	3600 Ridgewood Road	10/03/2023	\$4,513.69
City, State, Zip Code	Jackson, MS 39211-6448		
Purpose of Disbursement (Optional)	Event Expenses	Aggregate Year-to-date	\$4,513.69
Full Name	i360, LLC	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	29374 Network Place	10/11/2023	\$150.00
City, State, Zip Code	Chicago, IL 60673-1293		
Purpose of Disbursement (Optional)	Data Services	Aggregate Year-to-date	\$1,500.00
Full Name	Harrison County MS Republican Club	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	P.O. Box 4317	10/17/2023	\$300.00
City, State, Zip Code	Biloxi, MS 39535-4317		
Purpose of Disbursement (Optional)	Advertising, Sponsorship for event	Aggregate Year-to-date	\$300.00
Full Name	Erica Morgan	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 102	10/23/2023	\$53.13
City, State, Zip Code	Saltillo, MS 38866-0102		
Purpose of Disbursement (Optional)	Reimbursement and event expenses	Aggregate Year-to-date	\$1,142.34
Full Name	Hederman Brothers	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	P.O. Box 1036	10/04/2023	\$4,376.25
City, State, Zip Code	Madison, MS 39130-1036		
Purpose of Disbursement (Optional)	Printing Services	Aggregate Year-to-date	\$84,530.52

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10/29/2023**ITEMIZED DISBURSEMENTS**

		Aggregate Total Running	
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
The Ups Store			
Mailing Address	4209 Lakeland Dr.	10/19/2023	\$67.13
City, State, Zip Code	Flowood, MS 39232-9212		
Purpose of Disbursement (Optional)	Postage	Aggregate Year-to-date	\$252.11
Full Name			
Lincoln Road Package Store			
Mailing Address	2800 Lincoln Road	10/25/2023	\$993.85
City, State, Zip Code	Hattiesburg, MS 39402-3135		
Purpose of Disbursement (Optional)	Event Expense	Aggregate Year-to-date	\$993.85
Full Name			
Blake Chambers			
Mailing Address	128 Westbrier Road	10/17/2023	\$225.00
City, State, Zip Code	Saltillo, MS 38866-6508		
Purpose of Disbursement (Optional)	Payroll Expense	Aggregate Year-to-date	\$465.00
Full Name			
The Ups Store			
Mailing Address	4209 Lakeland Dr.	10/23/2023	\$27.36
City, State, Zip Code	Flowood, MS 39232-9212		
Purpose of Disbursement (Optional)	Postage	Aggregate Year-to-date	\$279.47
Full Name			
Rankin County Republican Women			
Mailing Address	PO Box 320369	10/09/2023	\$500.00
City, State, Zip Code	Flowood, MS 39232-0369		
Purpose of Disbursement (Optional)	Event Expense	Aggregate Year-to-date	\$500.00
Full Name			
Brayden Ray Barrett			
Mailing Address	12301 Tiffany Lane	10/18/2023	\$165.00
City, State, Zip Code	Biloxi, MS 39532		
Purpose of Disbursement (Optional)	Payroll Expense	Aggregate Year-to-date	\$390.00



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## ITEMIZED DISBURSEMENTS

Full Name	Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursement this period
Ryan Clanton	10/04/2023	\$5,037.50
Mailing Address PO Box 463		
City, State, Zip Code Meadville, MS 39653-0463		
Purpose of Disbursement (Optional) Consulting Services, Expense Reimbursements	Aggregate Year-to-date	\$17,653.45
Full Name London Adams	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4309 Biglin Bayou Dr.	10/17/2023	\$360.00
City, State, Zip Code Diberville, MS 39540-4601		
Purpose of Disbursement (Optional) Payroll Expense	Aggregate Year-to-date	\$360.00
Full Name Blake Chambers	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 128 Westbrier Road	10/04/2023	\$240.00
City, State, Zip Code Saltillo, MS 38866-6508		
Purpose of Disbursement (Optional) Payroll Expense	Aggregate Year-to-date	\$240.00
Full Name Hederman Group LLC	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3825 Redbud Road	10/05/2023	\$27,973.99
City, State, Zip Code Jackson, MS 39211-6712		
Purpose of Disbursement (Optional) Consulting Services	Aggregate Year-to-date	\$106,496.72
Full Name Lowe's	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 120 Ridge Way	10/17/2023	\$234.97
City, State, Zip Code Flowood, MS 39232-3302		
Purpose of Disbursement (Optional) Sign Supplies	Aggregate Year-to-date	\$1,344.80
Full Name The Vine Bistro	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 222 Howard St.	10/19/2023	\$1,350.00
City, State, Zip Code Greenwood, MS 38930-4334		
Purpose of Disbursement (Optional) Event Expenses	Aggregate Year-to-date	\$1,350.00

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## ITEMIZED DISBURSEMENTS

Full Name		Date (Mo., Day, Year)	Aggregate Total Running Amount of each disbursement this period
Brayden Ray Barrett		10/04/2023	\$225.00
Mailing Address 12301 Tiffany Lane			
City, State, Zip Code Biloxi, MS 39532			
Purpose of Disbursement (Optional) Payroll Expense		Aggregate Year-to-date	\$225.00
Full Name Erica Morgan		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 102		10/11/2023	\$171.40
City, State, Zip Code Saltillo, MS 38866-0102			
Purpose of Disbursement (Optional) Reimbursement and event expenses		Aggregate Year-to-date	\$1,089.21
Full Name ABC Signs & Shirts		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5851 Larue Steiner Road		10/04/2023	\$3,622.50
City, State, Zip Code Theodore, AL 36582			
Purpose of Disbursement (Optional) Printed Materials		Aggregate Year-to-date	\$51,702.50
Full Name Kristin C McDevitt		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 130 Eagles Nest Circle		10/09/2023	\$28.78
City, State, Zip Code Madison, MS 39110-6029			
Purpose of Disbursement (Optional) Expense reimbursement		Aggregate Year-to-date	\$721.52
Full Name C Spire		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P.O. Box 519		10/11/2023	\$117.36
City, State, Zip Code Meadville, MS 39653-0519			
Purpose of Disbursement (Optional) Wireless Services		Aggregate Year-to-date	\$19,332.80
Full Name WinRed		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 9891		10/27/2023	\$3,844.00
City, State, Zip Code Arlington, VA 22219-1891			
Purpose of Disbursement (Optional) Processing Fees		Aggregate Year-to-date	\$24,291.30

Name of Candidate or Committee

Tate for Governor

Reporting Period

10/01/2023

through

10/29/2023

## ITEMIZED DISBURSEMENTS

		Aggregate Total Running	
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
Stephens Printing, LLC		10/02/2023	\$891.31
Mailing Address	642 Hwy 469 S		
City, State, Zip Code	Florence, MS 39073-9064		
Purpose of Disbursement (Optional)	Printing Services	Aggregate Year-to-date	\$20,283.16
Full Name	Amazon	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	410 Terry Ave N.	10/23/2023	\$14.93
City, State, Zip Code	Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)	Office Supplies	Aggregate Year-to-date	\$249.65
Full Name	Hederman Brothers	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	P.O. Box 1036	10/18/2023	\$5,679.87
City, State, Zip Code	Madison, MS 39130-1036		
Purpose of Disbursement (Optional)	Printing Services	Aggregate Year-to-date	\$92,215.07
Full Name	Mailchimp	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	675 Pnce de Leon Ave	10/10/2023	\$70.09
City, State, Zip Code	Atlanta, GA 30308-1884		
Purpose of Disbursement (Optional)	Email Services	Aggregate Year-to-date	\$266.98
Full Name	Jackson Harkins	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	8787 Sundown Lane	10/04/2023	\$142.50
City, State, Zip Code	Gulfport, MS 39503-5641		
Purpose of Disbursement (Optional)	Payroll Expense	Aggregate Year-to-date	\$142.50
Full Name	OnMessage, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	705 Melvin Ave #105	10/10/2023	\$20,697.58
City, State, Zip Code	Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional)	Media Buy	Aggregate Year-to-date	\$6,290,493.51



Name of Candidate or Committee Tate for Governor

Reporting Period 10/01/2023 through 10/29/2023

## ITEMIZED DISBURSEMENTS

		Aggregate Total Running	
Full Name		Date (Mo., Day, Year)	Amount of each disbursement this period
Stephens Printing, LLC			
Mailing Address	642 Hwy 469 S	10/19/2023	\$699.78
City, State, Zip Code	Florence, MS 39073-9064		
Purpose of Disbursement (Optional)	Printing Services	Aggregate Year-to-date	\$20,982.94
Kelli Miller			
Mailing Address	950 Anniston Ave	10/04/2023	\$2,000.00
City, State, Zip Code	Gulfport, MS 39507-2731		
Purpose of Disbursement (Optional)	Consulting Services	Aggregate Year-to-date	\$12,000.00
Charles A Lindsay			
Mailing Address	PO Box 1656	10/24/2023	\$3,204.51
City, State, Zip Code	Brandon, MS 39043-1656		
Purpose of Disbursement (Optional)	Reimbursement for expenses	Aggregate Year-to-date	\$3,204.51
OnMessage, Inc.			
Mailing Address	705 Melvin Ave #105	10/04/2023	\$46,305.00
City, State, Zip Code	Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional)	Research	Aggregate Year-to-date	\$6,172,293.00
OnMessage, Inc.			
Mailing Address	705 Melvin Ave #105	10/18/2023	\$700,977.00
City, State, Zip Code	Annapolis, MD 21401-1534		
Purpose of Disbursement (Optional)	Media Buy	Aggregate Year-to-date	\$7,834,272.44
ABC Signs & Shirts			
Mailing Address	5851 Larue Steiner Road	10/10/2023	\$1,550.00
City, State, Zip Code	Theodore, AL 36582		
Purpose of Disbursement (Optional)	Printed Materials	Aggregate Year-to-date	\$53,252.50