2023 ELECTION CYCLE

Michael Watson SECRETARY OF STATE

# REPORT OF RECEIPTS AND DISBURSEMENTS 2023 Election

OF MISS

#### **RECEIVED**

By Secretary of State Elections Division at 10:16 am, Jul 10, 2023

Name of Candidate Brent Bailey for MPSC	
	Conton MS 20046
Address 107 Cedar Ridge Drive	City/Zip Canton, MS 39046
Telephone (Work) 601-961-5430 (Home)	(Fax) 601-961-5824
Contact Name Brent Bailey Email Address	ss brent@brentbailey4psc.com
Office Sought Public Service Commissioner Political Part	ty (if any)_Republican
☐ Check here if above is different from previous report	
May 10, 2023 Periodic Report (January 1, 2023 through April 30, 2	(2023)
June 9, 2023 Periodic Report (May 1, 2023 through May 31, 2023)	
X July 10, 2023 Periodic Report (June 1, 2023 through June 30, 2023	)Mandatory
August 1, 2023 Primary Pre-Election Report (July 1, 2023 through	h July 29, 2023)
August 22, 2023 Primary Pre-Runoff Report (July 30, 2023 through	gh August 19, 2023)Runoff Candidates Only
October 10, 2023 Periodic Report (July 1, 2023 through September	r 30, 2023)
October 31, 2023 Pre-Election Report (October 1, 2023 through O	ctober 29, 2023)
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 Decen	nber 31, 2023)
Termination Report (Committee will no longer accept contribution expenditures, has no outstanding campaign d	

#### **IMPORTANT**

- (1) All candidates for office shall file periodic reports in the year in which they are to be elected.
- (2) Periodic Reports are mandatory, even if no expenditures were made during the period. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and/or expenditures during this period. Pre-Election Reports are mandatory if the candidate is opposed.
- (3) Until a candidate files a Termination Report, annual reports must be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (4) Beginning on Jan. 1, 2018, candidates and officeholders may not "personally use" campaign contributions. Section 23-15-821, Miss. Code Ann., sets forth 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 reports by 5:00 p.m. on the deadline. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day *before* the deadline.

#### REPORTED CONTRIBUTIONS AND DISBURSEMENTS FROM CAMPAIGN CONTRIBUTIONS ACCUMULATED PRIOR TO JANUARY 1, 2018

JAN. 1, 2023 CASH ON HAND BALANCE				\$
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$	\$	\$	\$
TOTAL AMT OF DISBURSEMENTS	\$	\$	\$	\$
CASH ON HAND BALANCE			\$	

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

JAN. 1, 2023 CASH ON HAND BALANCE			\$	
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$30590.00	\$199.00	\$9499.00	\$40089.00
TOTAL AMT OF DISBURSEMENTS	\$ 12160.70	\$0	\$265.43	\$12426.13
CASH ON HAND BALANCE			\$37,181.84	
IN-KIND CONTRIBUTIONS			\$0	

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

Brent Bailey	07/10/2023
Signature of Candidate	Date

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

Penalties: A candidate who fails to file, or fails to timely file, required reports in accordance with the statutory deadline cannot be certified as elected to office unless and until he files all reports due as of the date of certification. No candidate who is elected to office shall receive any salary or other remuneration for the office unless and until he files all reports required by statute. Failure to submit required reports in accordance with applicable statutes may result in the imposition of civil penalties of \$50 per day for a maximum of ten (10) calendar days and/or prosecution. Miss. Code Ann. §§ 23-15-811 and 813 (1972).

Candidates for Statewide, State District or Legislative Office file this Report with the Secretary of State to 401 Mississippi Street, Jackson, MS; P. O. Box 136, Jackson, MS 39205; fax (601) 576-2545; or email <a href="mailto:campaignFinance@sos.ms.gov"><u>CampaignFinance@sos.ms.gov</u></a>.

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

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Name of Candidate or Committee Brent Bailey

Reporting period 06/01/2023

through 06/30/2023

#### ITEMIZED RECEIPTS

A. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Dennis Koen	<u>06</u> / <u>21</u> / <u>23</u>	<sup>\$</sup> 300.00
Mailing Address 13275 Riverwalk Circle	//	\$
City, State, Zip Code D'Iberville, MS 39532	//	\$
Name of Employer (Required) Retired	//	\$
Occupation (Required) Retired	Aggregate vear_to-date	\$300.00
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Harry Dendy	06/28/22	<sup>\$</sup> 300.00
Mailing Address 134 Northshore Way	//	\$
City, State, Zip Code Madison, MS 39110	//	\$
Name of Employer (Required) Capitol Ag Services, Inc	//	\$
Occupation (Required) Retired	Aggregate vear_to-date	\$300.00
C. Source: OCorporation OPAC Individual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Matthew McDonald	<u>06</u> / <u>28</u> / <u>23</u>	<sup>\$</sup> 2500.00
Mailing Address 4625 Friars Circle	//	\$
City, State, Zip Code Jackson, MS 39211	//	\$
Name of Employer (Required) Attorney	//	\$
Occupation (Required) Attorney	Aggregate year–to-date	\$2500.00
D. Source: Corporation PAC Individual Loan Other (please specify) Non-Profit Organization	Date (Mo., Day, Year)	Amount of each receipt
Full name American Clean Power Association	06,27,23	\$ 1000.00
Mailing Address 1501 M Street NW, Ste 900	//	\$
City, State, Zip Code Washington, DC 20005	//	\$
Name of Employer (Required) Organization		\$
Occupation (Required)	Aggregate year–to-date	\$1000.00

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Name of Candidate or Committee Brent Bailey

Reporting period 06/01/2023

through 06/30/2023

## ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or	On or After Ja	anuary 1, 2018
A. Full name MSU Alumni Association	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box AA	6 / 17 / 23	\$ 250.00
City, State, Zip Code Mississippi State, MS 39762	/	\$
Purpose of Disbursement (Optional) Sponsorship of the Maroon Golf Classic for student scholarships	Aggregate Year-to-date	\$
B. Full name PayPal	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 1056858	06/21/23	\$ 9.16
City, State, Zip Code Atlanta, GA 30348	06/28/23	\$ 6.27
Purpose of Disbursement (Optional) Paypal Fee	Aggregate Year-to-date	\$ 26.53
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	//	\$
City, State, Zip Code	//	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	//	\$
City, State, Zip Code	//	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	//	\$
City, State, Zip Code	//	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	//	\$
City, State, Zip Code	//	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

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Reporting period 06/01/2023

through 06/30/2023

## ITEMIZED RECEIPTS

A. Source: Corporation PAC Individual Loan Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Southern Spirit Transmission LLC	06/27/23	\$5000.00
Mailing Address 1088 Sansome Street	//	\$
City, State, Zip Code San Francisco, CA 94111	//	\$
Name of Employer (Required) LLC	//	\$
Occupation (Required) LLC	Aggregate year_to-date	<sup>\$</sup> 5000.00
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
EMVEnergy Solutions, LLC	<u>06</u> / <u>28</u> / <u>2</u>	<sup>\$</sup> 200.00
Mailing Address 2820 Woodlawn Drive	//	\$
City, State, Zip Code Nashville, TN 37215	//	\$
Name of Employer (Required) LLC	//	\$
Occupation (Required) LLC	Aggregate year–to-date	\$200.00
C. Source: Ocorporation OPAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	//	\$
Mailing Address	//	\$
City, State, Zip Code	//	\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year–to-date	\$
D. Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	//	\$
Mailing Address	///	\$
City, State, Zip Code	//	\$
Name of Employer (Required)	/	\$
Occupation (Required)	Aggregate year–to-date	\$