

Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2016 Annual Report



Name of Candidate Hank Zuster
 Address 429 Hanley Rd County _____
 Telephone 228-875-1041 Fax 228-875-4966
 Office Sought State House Email Address hzuster@house.ms.gov

☐ Check here if above is different from previous report

☒ January 31, 2017 Annual Report (January 1, 2016 through December 31, 2016).....Mandatory
 All candidates, excluding judicial candidates on the November 2016 General Election ballot.

____ Termination Report (Candidate will no longer accept contributions, make Expenditures, has no outstanding debt obligation and zero cash on hand balance.)

Required to terminate reporting obligations

IMPORTANT

- (1) Annual Reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and expenditures during the reporting period.
- (2) Until a Candidate files a Termination Report, all campaign finance disclosure reports must be filed in accordance with the applicable schedule set forth by Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (3) 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. Reports may be faxed or emailed.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Non-itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$50,535 + \$2,702	\$53,237	\$ same (calendar year to date reporting)
Total amount of disbursements	\$42,920.87 + \$957.84	\$43,878.71	\$ "
Total amount of cash on hand		\$110,670.54	

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

Signature of Candidate [Signature]

Date 1/31/17

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

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

SEND TO:

1. Candidates for statewide, state-district, or legislative office file all required reports with the Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39205 or fax to (601) 576-2545.
2. Candidates for county or county-district office file all required reports with the County Circuit Clerk's Office.
3. Candidates for municipal office file all required report with the Municipal Clerk's Office.

Name of Candidate or Committee

Hank Zuber

Reporting period

1-1-16

through

12-31-16

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>OS Baseball Bowdr Club</u>	<u>2/12/16</u>	\$ <u>300</u>
Mailing Address		
<u>1 Government Street</u>	<u>2/12/16</u>	\$ <u>300</u>
City, State, Zip Code		
<u>Ocean Springs, MS 39564</u>	<u>2/12/16</u>	\$ <u>300</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u>Community Support (High School 11)</u>		\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Howe Republican Caucus</u>	<u>7/18/16</u>	\$ <u>5,000</u>
Mailing Address		
<u>1615 S. Bilal St.</u>	<u>7/18/16</u>	\$ <u>5,000</u>
City, State, Zip Code		
<u>Jackson, MS 39201</u>	<u>7/18/16</u>	\$ <u>5,000</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u></u>		\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Leadership PAC</u>	<u>7/18/16</u>	\$ <u>30,000</u>
Mailing Address		
<u>6904 Chatham</u>	<u>7/18/16</u>	\$ <u>30,000</u>
City, State, Zip Code		
<u>Ocean Springs, MS 39565</u>	<u>7/18/16</u>	\$ <u>30,000</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u></u>		\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>OS Rotary</u>	<u>8/15/16</u>	\$ <u>250</u>
Mailing Address		
<u>100 Front Beach</u>	<u>8/15/16</u>	\$ <u>250</u>
City, State, Zip Code		
<u>Ocean Springs, MS 39564</u>	<u>8/15/16</u>	\$ <u>250</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u></u>		\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>OS Education Foundation</u>	<u>8/15/16</u>	\$ <u>250</u>
Mailing Address		
<u>1 Government St.</u>	<u>8/15/16</u>	\$ <u>250</u>
City, State, Zip Code		
<u>Ocean Springs, MS 39564</u>	<u>8/15/16</u>	\$ <u>250</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u></u>		\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Robert Huff Sign</u>	<u>8/13/16</u>	\$ <u>215</u>
Mailing Address		
<u>1268 1st Street 39042</u>	<u>8/13/16</u>	\$ <u>215</u>
City, State, Zip Code		
<u>Branton, MS</u>	<u>8/13/16</u>	\$ <u>215</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u></u>		\$

Name of Candidate or Committee

Harrell Zuber

Reporting period

1-1-16

through

12-31-16

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Troy Ross Campaign</u>	<u>9/25/16</u>	\$ <u>400</u>
Mailing Address		
<u>P.O. Box 998 39563</u>		
City, State, Zip Code		
<u>Pascagoula, MS</u>	<u> / / </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Mimi Taylor</u>	<u>11/14/16</u>	\$ <u>1,000</u>
Mailing Address		
<u>P.O. Box 956</u>		
City, State, Zip Code		
<u>Jackson, MS 39205</u>	<u> / / </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>A&Z Printing</u>	<u>11/14/16</u>	\$ <u>423.01</u>
Mailing Address		
<u>2125 Tr Rd</u>		
City, State, Zip Code		
<u>Jackson, MS 39209</u>	<u> / / </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>ManShip</u>	<u>11/14/16</u>	\$ <u>832.86</u>
Mailing Address		
<u>1200 N. State</u>		
City, State, Zip Code		
<u>Jackson, MS 39202</u>	<u> / / </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Donnie McClair</u>	<u>11/24/16</u>	\$ <u>250</u>
Mailing Address		
<u>2514 Harvard</u>		
City, State, Zip Code		
<u>Ocean Springs, MS 39564</u>	<u> / / </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>O.S. Touchdown Club</u>	<u>11/30/16</u>	\$ <u>1,500</u>
Mailing Address		
<u>Ocean Springs High School - 1000 600 St.</u>		
City, State, Zip Code		
<u>Ocean Springs, MS 39564</u>	<u> / / </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

Name of Candidate or Committee

Hank Zuber

Reporting period

1-1-16

through

12-31-16

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mimi Taylor	12/15/16	\$ 2,000
Mailing Address		
P.O. Box 450		
City, State, Zip Code		
Jackson, MS 39205		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 3000
B. 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	\$
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	\$

Name of Candidate or Committee Frank ZuberReporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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>Express Rehab</u>	<u>11/18/16</u>	\$ <u>1000</u>
Mailing Address <u>2901 Village Circle</u>	<u>11/18/16</u>	\$ <u>1000</u>
City, State, Zip Code <u>Ocean Springs, MS 39564</u>	<u>11/18/16</u>	\$ <u>1000</u>
Name of Employer (Required) <u>N/A</u>	<u>11/18/16</u>	\$ <u>1000</u>
Occupation (Required) <u>Medical</u>	Aggregate year-to-date	\$ <u>1000</u>
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>Well Care</u>	<u>11/19/16</u>	\$ <u>250</u>
Mailing Address <u>8725 Henderson Road</u>	<u>11/19/16</u>	\$ <u>250</u>
City, State, Zip Code <u>Tampa, FL 33634</u>	<u>11/19/16</u>	\$ <u>250</u>
Name of Employer (Required) <u>N/A</u>	<u>11/19/16</u>	\$ <u>250</u>
Occupation (Required) <u>Medical</u>	Aggregate year-to-date	\$ <u>250</u>
C. 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>Anbauer Busch</u>	<u>9/28/16</u>	\$ <u>1,000</u>
Mailing Address <u>1 Busch Place</u>	<u>9/28/16</u>	\$ <u>1,000</u>
City, State, Zip Code <u>St. Louis, MO 63118</u>	<u>9/28/16</u>	\$ <u>1,000</u>
Name of Employer (Required) <u>N/A</u>	<u>9/28/16</u>	\$ <u>1,000</u>
Occupation (Required) <u>Consumer goods/Manufacturing</u>	Aggregate year-to-date	\$ <u>1,000</u>
D. 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>Advance America</u>	<u>10/17/16</u>	\$ <u>1,000</u>
Mailing Address <u>135 N. Church</u>	<u>10/17/16</u>	\$ <u>1,000</u>
City, State, Zip Code <u>Spartanburg, SC 29306</u>	<u>10/17/16</u>	\$ <u>1,000</u>
Name of Employer (Required) <u>N/A</u>	<u>10/17/16</u>	\$ <u>1,000</u>
Occupation (Required) <u>Financial Services</u>	Aggregate year-to-date	\$ <u>1,000</u>

Name of Candidate or Committee Hank ZuberReporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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>Cherron</u>		<u>10/27/16</u>	\$ <u>1,000</u>
Mailing Address <u>6061 Bollinger Canyon Rd</u>		<u>1/1/16</u>	\$ _____
City, State, Zip Code <u>San Ramon, CA 94583</u>		<u>1/1/16</u>	\$ _____
Name of Employer (Required) <u>N/A</u>		<u>1/1/16</u>	\$ _____
Occupation (Required) <u>Energy</u>		Aggregate year-to-date	\$ _____
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>AIST</u>		<u>11/21/16</u>	\$ <u>250</u>
Mailing Address <u>208 S. Acorn</u>		<u>1/1/16</u>	\$ _____
City, State, Zip Code <u>Dallas, TX 75202</u>		<u>1/1/16</u>	\$ _____
Name of Employer (Required) <u>N/A</u>		<u>1/1/16</u>	\$ _____
Occupation (Required) <u>TELECOMMUNICATIONS</u>		Aggregate year-to-date	\$ _____
C. 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>WALMART</u>		<u>11/28/16</u>	\$ <u>1000</u>
Mailing Address <u>702 S.W. 8th St.</u>		<u>1/1/16</u>	\$ _____
City, State, Zip Code <u>Brentsville, AR 72716</u>		<u>1/1/16</u>	\$ _____
Name of Employer (Required) <u>N/A</u>		<u>1/1/16</u>	\$ _____
Occupation (Required) <u>Retail</u>		Aggregate year-to-date	\$ _____
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Joe Gill</u>		<u>12/5/16</u>	\$ <u>250</u>
Mailing Address <u>103 Park St.</u>		<u>1/1/16</u>	\$ _____
City, State, Zip Code <u>Ocean Springs, NJ 39504</u>		<u>1/1/16</u>	\$ _____
Name of Employer (Required) <u>N/A</u>		<u>1/1/16</u>	\$ _____
Occupation (Required) <u>Retired</u>		Aggregate year-to-date	\$ _____

Name of Candidate or Committee Paul ZuberReporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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>ENOVA</u>		<u>12/15/16</u>	\$ <u>1,000</u>
Mailing Address <u>125 W. Jackson Blvd</u>		<u>12/15/16</u>	\$ _____
City, State, Zip Code <u>Chicago, IL 60604</u>		<u>12/15/16</u>	\$ _____
Name of Employer (Required) _____		<u>12/15/16</u>	\$ _____
Occupation (Required) <u>Financier</u>		Aggregate year-to-date	\$ _____
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>Denbury</u>		<u>12/14/16</u>	\$ <u>500</u>
Mailing Address <u>3320 Legacy Drive</u>		<u>12/14/16</u>	\$ _____
City, State, Zip Code <u>Plano, TX 75204</u>		<u>12/14/16</u>	\$ _____
Name of Employer (Required) <u>N/A</u>		<u>12/14/16</u>	\$ _____
Occupation (Required) <u>Oil</u>		Aggregate year-to-date	\$ _____
C. 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>E Software</u>		<u>12/14/16</u>	\$ <u>1,000</u>
Mailing Address <u>405 Legacy Park</u>		<u>12/14/16</u>	\$ _____
City, State, Zip Code <u>Ridgeland, MS 39157</u>		<u>12/14/16</u>	\$ _____
Name of Employer (Required) <u>N/A</u>		<u>12/14/16</u>	\$ _____
Occupation (Required) <u>Software</u>		Aggregate year-to-date	\$ _____
D. 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>Baker Donaldson</u>		<u>12/16/16</u>	\$ <u>500</u>
Mailing Address <u>100 Vision Drive</u>		<u>12/16/16</u>	\$ _____
City, State, Zip Code <u>Jackson, MS 39210</u>		<u>12/16/16</u>	\$ _____
Name of Employer (Required) <u>N/A</u>		<u>12/16/16</u>	\$ _____
Occupation (Required) <u>Legal</u>		Aggregate year-to-date	\$ _____

Name of Candidate or Committee Harri Zuber
 Reporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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>Dental PAC</u>	<u>12/27/16</u>	\$ <u>500</u>
Mailing Address <u>1000 B Parkway</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Wideland, MS 39157</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>N/A</u>	Aggregate year-to-date	\$ <u> </u>
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>Jones Waller</u>	<u>12/30/16</u>	\$ <u>500</u>
Mailing Address <u>190 E. Capitol</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Jackson, MS 39201</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Legat</u>	Aggregate year-to-date	\$ <u> </u>
C. 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>Clean Environment</u>	<u>12/30/16</u>	\$ <u>300</u>
Mailing Address <u>1615 S. Gellatin</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Jackson, MS 39201</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>N/A</u>	Aggregate year-to-date	\$ <u> </u>
D. 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>MAE PAC</u>	<u>12/31/16</u>	\$ <u>500</u>
Mailing Address <u>4358 E. P.O. Box</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Brandon, MS 39047</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>N/A</u>	Aggregate year-to-date	\$ <u> </u>

Name of Candidate or Committee HANIL ZUBER
 Reporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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>MTA PAC</u>	<u>12/16/16</u>	\$ <u>1,000</u>
Mailing Address <u>P.O. Box 12307</u>	<u>12/16/16</u>	\$ _____
City, State, Zip Code <u>Jackson MS 39036</u>	<u>12/16/16</u>	\$ _____
Name of Employer (Required) <u>N/A</u>	<u>12/16/16</u>	\$ _____
Occupation (Required) <u>N/A - Lobbying</u>	Aggregate year-to-date	\$ _____
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>Pinnacle</u>	<u>12/13/16</u>	\$ <u>1,000</u>
Mailing Address <u>1 Peter Road</u>	<u>12/13/16</u>	\$ _____
City, State, Zip Code <u>Vicksburg MS 39016</u>	<u>12/13/16</u>	\$ _____
Name of Employer (Required) <u>N/A</u>	<u>12/13/16</u>	\$ _____
Occupation (Required) <u>Owner</u>	Aggregate year-to-date	\$ _____
C. 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>Norfolk Southern RR</u>	<u>12/13/16</u>	\$ <u>250</u>
Mailing Address <u>3 Commercial Place</u>	<u>12/13/16</u>	\$ _____
City, State, Zip Code <u>Norfolk VA 23510</u>	<u>12/13/16</u>	\$ _____
Name of Employer (Required) <u>N/A</u>	<u>12/13/16</u>	\$ _____
Occupation (Required) <u>Transportation</u>	Aggregate year-to-date	\$ _____
D. Source: <input 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>12/13/16</u>	\$ _____
Mailing Address _____	<u>12/13/16</u>	\$ _____
City, State, Zip Code _____	<u>12/13/16</u>	\$ _____
Name of Employer (Required) _____	<u>12/13/16</u>	\$ _____
Occupation (Required) _____	Aggregate year-to-date	\$ _____

Name of Candidate or Committee Hank ZuberReporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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>Clark J. Levi</u>		<u>12/16/16</u>	\$ <u>2000.00</u>
Mailing Address <u>996 N. Halstead</u>		<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Ocean Springs, MS 39564</u>		<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>Self</u>		<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>pharmacist</u>		Aggregate year-to-date	\$ <u>2000.00</u>
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>Wells Fargo & Co Employee PAC</u>		<u>12/16/16</u>	\$ <u>1000.00</u>
Mailing Address <u>90 South 7th Street - 16th Floor</u>		<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Minneapolis, MN 55402-3903</u>		<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>		<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Banking</u>		Aggregate year-to-date	\$ <u> </u>
C. 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>Prosperity PAC LLC</u>		<u>12/16/16</u>	\$ <u>1000.00</u>
Mailing Address <u>P.O. Box 1869</u>		<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Brandon, MS 39043-1869</u>		<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>		<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Lobbying</u>		Aggregate year-to-date	\$ <u>1000.00</u>
D. 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>Check Into Cash of Mississippi, Inc</u>		<u>12/16/16</u>	\$ <u>1000.00</u>
Mailing Address <u>201 Keith Street SW, Suite 80</u>		<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Cleveland, TN 37311</u>		<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>		<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Finance</u>		Aggregate year-to-date	\$ <u>1000.00</u>

Name of Candidate or Committee Hank ZuberReporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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>CHH Consulting Inc.</u>	<u>12/16/16</u>	\$ <u>1000.00</u>
Mailing Address <u>575 Johnstone Drive</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Madison, MS 39110</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Consulting</u>	Aggregate year-to-date	\$ <u>1000.00</u>
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>MS Prawnbrokers PAC</u>	<u>12/16/16</u>	\$ <u>1000.00</u>
Mailing Address <u>1425 Terry Rd.</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Jackson, MS 39204</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>FINANCIAL</u>	Aggregate year-to-date	\$ <u>1000.00</u>
C. 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>Partnership</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Adams and Reese LLP</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u>1000.00</u>
Mailing Address <u>4500 One Shell Square</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>New Orleans, LA</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Legal</u>	Aggregate year-to-date	\$ <u>1000.00</u>
D. 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>LHC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>First Heritage Credit, LLC</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u>1000.00</u>
Mailing Address <u>605 Crescent Blvd. Ste 101</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Ridgeland, MS 39157</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>FINANCIAL</u>	Aggregate year-to-date	\$ <u>1,000.00</u>

Name of Candidate or Committee Hank Zuber
 Reporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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 Assn. of Realtors PAC</u>	<u>12/16/16</u>	\$ <u>3000.00</u>
Mailing Address <u>P.O. Box 321000</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Flowood, MS 39232</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Lobby</u>	Aggregate year-to-date	\$ <u>3000.00</u>
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 Bankers Association PAC</u>	<u>12/16/16</u>	\$ <u>2500.00</u>
Mailing Address <u>P.O. Box 1091</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Jackson, MS 39205</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Banker</u>	Aggregate year-to-date	\$ <u>2500.00</u>
C. 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 Credit Union PAC</u>	<u>12/16/16</u>	\$ <u>2500.00</u>
Mailing Address <u>1400 Lakeover Road</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Jackson, MS 39213</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Banker</u>	Aggregate year-to-date	\$ <u>2500.00</u>
D. 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>Lenders PAC</u>	<u>12/16/16</u>	\$ <u>2500.00</u>
Mailing Address <u>P.O. Box 24087</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Jackson, MS 39225</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Financial</u>	Aggregate year-to-date	\$ <u>2500.00</u>

Name of Candidate or Committee Hank ZuberReporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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>Republic Finance, LLC</u>	<u>12/16/16</u>	\$ <u>1000⁰⁰</u>
Mailing Address <u>P.O. Box 15429</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Baton Rouge, LA 70895</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Finan</u>	Aggregate year-to-date	\$ <u>1000⁰⁰</u>
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) <u> </u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>1st Franklin Financial</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u>1000⁰⁰</u>
Mailing Address <u>P.O. Box 880</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Toccoa, GA 30577</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Finan</u>	Aggregate year-to-date	\$ <u>1000⁰⁰</u>
C. 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>Affordable Lending Group LLC</u>	<u>12/16/16</u>	\$ <u>500⁰⁰</u>
Mailing Address <u>589 Northpark Dr. Ste D</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Ridgeland, MS 39157</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Finan</u>	Aggregate year-to-date	\$ <u>500⁰⁰</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <u> </u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Ray Hutcheson</u>	<u>12/16/16</u>	\$ <u>750⁰⁰</u>
Mailing Address <u>1904 Roseberry Drive</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Scottsboro, AL 35769</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>Self</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>retired</u>	Aggregate year-to-date	\$ <u>750</u>

Name of Candidate or Committee Hank Zuber
 Reporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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>The Clay Firm</u>	<u>12/16/16</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. Box 217</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Jackson, MS 39205</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>Self</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Legal</u>	Aggregate year-to-date	\$ <u>300.00</u>
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>Shelter Insurance MS PAC</u>	<u>12/16/16</u>	\$ <u>500.00</u>
Mailing Address <u>1817 W Broadway</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Columbia MO 65218</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Insurance</u>	Aggregate year-to-date	\$ <u>500.00</u>
C. 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>MMHA-PAC</u>	<u>12/16/16</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. Box 320369</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Flowood, MS 39232</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Lobbyist</u>	Aggregate year-to-date	\$ <u>500.00</u>
D. 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>Stephen Simmons</u>	<u>12/16/16</u>	\$ <u>250.00</u>
Mailing Address <u>108 Fountains Blvd.</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Brandon, MS 39047</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>Self</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Lobbyist</u>	Aggregate year-to-date	\$ <u>250.00</u>

Name of Candidate or Committee Hank ZuberReporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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>Ray A. Hutcheson Jr.</u>	<u>12/16/16</u>	\$ <u>250.00</u>
Mailing Address <u>102 Clinton Ave W Suite 601</u>	<u>12/16/16</u>	\$ _____
City, State, Zip Code <u>Huntsville, AL 35801</u>	<u>12/16/16</u>	\$ _____
Name of Employer (Required) <u>Self</u>	<u>12/16/16</u>	\$ _____
Occupation (Required) <u>Financial</u>	Aggregate year-to-date	\$ <u>250.00</u>
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>Ricky Brown</u>	<u>12/16/16</u>	\$ <u>250.00</u>
Mailing Address <u>P.O. Box 1132</u>	<u>12/16/16</u>	\$ _____
City, State, Zip Code <u>Jackson, MS 39215</u>	<u>12/16/16</u>	\$ _____
Name of Employer (Required) <u>Mississippi Beer Distributors Assn.</u>	<u>12/16/16</u>	\$ _____
Occupation (Required) <u>President</u>	Aggregate year-to-date	\$ <u>250.00</u>
C. 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>Gulf Guaranty Life Insurance Co.</u>	<u>12/16/16</u>	\$ <u>250.00</u>
Mailing Address <u>P.O. Box 12409</u>	<u>12/16/16</u>	\$ _____
City, State, Zip Code <u>Jackson, MS 39236-2409</u>	<u>12/16/16</u>	\$ _____
Name of Employer (Required) <u>NA</u>	<u>12/16/16</u>	\$ _____
Occupation (Required) <u>Insurance</u>	Aggregate year-to-date	\$ <u>250.00</u>
D. 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>Gerald Blessey Law Firm</u>	<u>12/16/16</u>	\$ <u>250.00</u>
Mailing Address <u>P.O. Box 4648</u>	<u>12/16/16</u>	\$ _____
City, State, Zip Code <u>Biloxi, MS 39535</u>	<u>12/16/16</u>	\$ _____
Name of Employer (Required) <u>Self</u>	<u>12/16/16</u>	\$ _____
Occupation (Required) <u>Legal</u>	Aggregate year-to-date	\$ <u>250.00</u>

Name of Candidate or Committee Hank ZuberReporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. Source: <input 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>Liles B. Williams</u>	<u>12/16/16</u>	\$ <u>250.00</u>
Mailing Address <u>17160 Seaton Road</u>	<u>12/16/16</u>	\$ _____
City, State, Zip Code <u>Raymond MS 39154</u>	<u>12/16/16</u>	\$ _____
Name of Employer (Required) <u>Self</u>	<u>12/16/16</u>	\$ _____
Occupation (Required) <u>Retiree</u>	Aggregate year-to-date	\$ <u>250.00</u>
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Tower Loan of Mississippi, LLC</u>	<u>12/16/16</u>	\$ <u>1000.00</u>
Mailing Address <u>P.O. Box 320001</u>	<u>12/16/16</u>	\$ _____
City, State, Zip Code <u>Flowood MS 39232</u>	<u>12/16/16</u>	\$ _____
Name of Employer (Required) <u>N/A</u>	<u>12/16/16</u>	\$ _____
Occupation (Required) <u>Lending</u>	Aggregate year-to-date	\$ <u>1000.00</u>
C. Source: <input 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>Third Union Finance, Inc.</u>	<u>12/16/16</u>	\$ <u>1000.00</u>
Mailing Address <u>P.O. Box 400</u>	<u>12/16/16</u>	\$ _____
City, State, Zip Code <u>Olive Branch, MS 38654</u>	<u>12/16/16</u>	\$ _____
Name of Employer (Required) <u>N/A</u>	<u>12/16/16</u>	\$ _____
Occupation (Required) <u>Banker</u>	Aggregate year-to-date	\$ <u>1000.00</u>
D. 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>Liberty Finance Company Inc.</u>	<u>12/16/16</u>	\$ <u>250.00</u>
Mailing Address <u>134 Southhakes Drive</u>	<u>12/16/16</u>	\$ _____
City, State, Zip Code <u>Grenada MS 38901</u>	<u>12/16/16</u>	\$ _____
Name of Employer (Required) <u>N/A</u>	<u>12/16/16</u>	\$ _____
Occupation (Required) <u>Finance</u>	Aggregate year-to-date	\$ <u>250.00</u>

Name of Candidate or Committee Hank ZuberReporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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>Ackerman Finance Inc.</u>	<u>12/16/16</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. Box 915</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Ackerman, MS 39735</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Finance</u>	Aggregate year-to-date	\$ <u>500.00</u>
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>Money Now Hattiesburg</u>	<u>12/16/16</u>	\$ <u>575.00</u>
Mailing Address <u>P.O. Box 2928</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Meridian, MS 39302</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Finance</u>	Aggregate year-to-date	\$ <u>575.00</u>
C. 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>Speedee Cash Natchez MS Office</u>	<u>12/16/16</u>	\$ <u>660.00</u>
Mailing Address <u>412 Hwy 61 North</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Natchez, MS 39120</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Finance</u>	Aggregate year-to-date	\$ <u>660.00</u>
D. 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>Montgomery Enterprises Inc.</u>	<u>12/16/16</u>	\$ <u>1000.00</u>
Mailing Address <u>P.O. Box 37</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Fulton, MS 38843</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Entrepreneur</u>	Aggregate year-to-date	\$ <u>1000.00</u>

Name of Candidate or Committee Hank ZuberReporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Deweese Payroll Advance, LLC</u>	<u>12/16/16</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. Box 30</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Starkville, MS 39760</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Payroll Financing</u>	Aggregate year-to-date	\$ <u>500.00</u>
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>East McComb Check Cash, Inc.</u>	<u>12/16/16</u>	\$ <u>250.00</u>
Mailing Address <u>P.O. Box 1683</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>McComb, MS 39649</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Financing</u>	Aggregate year-to-date	\$ <u>250.00</u>
C. 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>Chasemark, Inc</u>	<u>12/16/16</u>	\$ <u>250.00</u>
Mailing Address <u>134 Southlakes Drive</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Grenada, MS 38901</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Credit</u>	Aggregate year-to-date	\$ <u>250.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Cash Money LLC</u>	<u>12/16/16</u>	\$ <u>250.00</u>
Mailing Address <u>8838 Timberlake Circle</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Meridian, MS 39305</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Credit</u>	Aggregate year-to-date	\$ <u>250.00</u>

Name of Candidate or Committee Hank ZuberReporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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>Eddie McKinney</u>	<u>12/17/16</u>	\$ <u>1500.00</u>
Mailing Address <u>15 County Road 459</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Corinth MS 38834</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Self</u>	Aggregate year-to-date	\$ <u>1500.00</u>
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Select Management Resources, LLC</u>	<u>12/16/16</u>	\$ <u>1000.00</u>
Mailing Address <u>3440 Preston Ridge Rd Ste. 500</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Alpharetta, GA 30005</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Consulting</u>	Aggregate year-to-date	\$ <u>1000.00</u>
C. 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>Gulf Islands Credit, Inc.</u>	<u>12/16/16</u>	\$ <u>250.00</u>
Mailing Address <u>1115 Pass Road</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Gulfport, MS 39501</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Credit</u>	Aggregate year-to-date	\$ <u>250.00</u>
D. 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>Mississippi Medical PAC</u>	<u>12/16/16</u>	\$ <u>1000.00</u>
Mailing Address <u>P.O. Box 2548</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Ridgeland, MS 39158</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>PAC Lobby - Medical</u>	Aggregate year-to-date	\$ <u>1000.00</u>

Name of Candidate or Committee Hank ZuberReporting period 1-1-16 through 12-31-16

ITEMIZED RECEIPTS

A. 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>Bank Plus PAC</u>	<u>12/16/16</u>	\$ <u>1000.00</u>
Mailing Address <u>1068 Highland Colony Pkwy</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Ridgeland, MS 39157</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Bank</u>	Aggregate year-to-date	\$ <u>1000.00</u>
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>Huntington Ingalls</u>	<u>12/16/16</u>	\$ <u>1000.00</u>
Mailing Address <u>P.O. Box 749</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Pascagoula, MS 39568</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>shipbuilder</u>	Aggregate year-to-date	\$ <u>1000.00</u>
C. 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>MTPA, PAC</u>	<u>12/30/16</u>	\$ <u>1000.00</u>
Mailing Address <u>345 Hwy 6 W.</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Batesville, MS 38606</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Lobbyist</u>	Aggregate year-to-date	\$ <u>1000.00</u>
D. 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>MS Bankers Association (INKIND)</u>	<u>11/14/16</u>	\$ <u>500</u> INKIND
Mailing Address <u>640 North State Street</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Jackson, MS 39202</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>N/A</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Banker</u>	Aggregate year-to-date	\$ <u>500.00</u>