

Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
August Rec

RECEIVED

By Secretary of State Elections Division at 4:34 pm, Oct 10, 2023

Name of Candidate Brandon Presley

Address PO Box 208

City/State/Zip Nettleton, MS 38858

Telephone (Work) _____ (Home) (202) 552-0221 (Fax) _____

Contact Name Rachel Headley Email Address info@brandonpresley.com

Office Sought Governor Political Party Democratic Party

Check here if above is different from previous report

TYPE OF REPORT

May Periodic Report Mandatory

June Periodic Report Mandatory

July Periodic Report Mandatory

Primary Pre-Election Report (..... through) Mandatory

Primary Pre-Runoff Report (..... through) Runoff Candidates Only

October Periodic Report (July 30, 2023 through September 30, 2023) Mandatory

Pre-Election Report (..... through) Mandatory

Pre-Runoff Report (..... through) Runoff Candidates Only

January Periodic Report Mandatory

Termination Report (Candidate will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation and zero cash on hand balance) **Required to terminate reporting obligations**

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 these "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 reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline.

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

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

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

JAN 1, 2023 CASH ON HAND BALANCE				\$727,532.54	
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-To-Date	
TOTAL AMT OF CONTRIBUTIONS	\$4,324,184. 20	+ \$166,450.89	\$4,490,635.09	\$7,894,418.79	
TOTAL AMT OF DISBURSEMENTS	\$4,201,446. 36	+ \$4,524.81	\$4,205,971.17	\$6,791,042.69	
CASH ON HAND BALANCE				\$1,830,908.64	

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

Brandon Presley

Signature of Candidate

10/10/2023

Date

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

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

Candidates for Statewide, State District, or Legislative Offices file this Report with the Secretary of State to 401 Mississippi Street, Jackson, MS; P.O. Box 136, Jackson, MS 39205; fax 601-576-2545; or email CampaignFinance@sos.ms.gov

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

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 Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/20/2023	\$10.00
Aggregate year-to-date		\$607.60
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 Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/30/2023	\$500.00
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 Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/10/2023	\$25.00
Aggregate year-to-date		\$748.47
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 Caleb Dana Mailing Address 103 Pinetrail Pl City, State, Zip Code Madison, MS 39110-8008 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/10/2023	\$35.00
Aggregate year-to-date		\$247.00

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 Susan McCready	09/11/2023	\$100.00
Mailing Address 112 Pine Dr		
City, State, Zip Code Ocean Springs, MS 39564-5002		
Name of Employer (Required) University of South Alabama		
Occupation (Required) Teacher	Aggregate year-to-date	\$225.00
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 Kathryn York	09/22/2023	\$500.00
Mailing Address 315 Panola St		
City, State, Zip Code Water Valley, MS 38965-2408		
Name of Employer (Required) Teach for America		
Occupation (Required) Non Profit Administrator	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 M. D. Booker	09/22/2023	\$500.00
Mailing Address 5910 Paddock Pl		
City, State, Zip Code Jackson, MS 39206-2135		
Name of Employer (Required) Cadence Bank		
Occupation (Required) Banker	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 Jane Alexander	09/02/2023	\$50.00
Mailing Address 2015 E Northside Dr		
City, State, Zip Code Jackson, MS 39211-6125		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$383.00

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 Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/12/2023	\$50.00
Aggregate year-to-date		\$2,150.00
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 Andre Ducote Mailing Address 4450 Old Canton Rd City, State, Zip Code Jackson, MS 39211-5991 Name of Employer (Required) Morgan & Morgan Occupation (Required) Attorney	08/03/2023	\$250.00
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 Ann Smith Mailing Address PO Box 1865 City, State, Zip Code Gulfport, MS 39502-1865 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/13/2023	\$10.00
Aggregate year-to-date		\$390.00
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 Latham Mailing Address 2090 Jefferson Pkwy City, State, Zip Code Hernando, MS 38632-5905 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/13/2023	\$100.00
Aggregate year-to-date		\$1,650.00

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 Beth Stoor Mailing Address 9314 SW 97th Ln City, State, Zip Code Ocala, FL 34481-7573 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/04/2023	\$15.00
Aggregate year-to-date		\$295.00
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 Fluker Mailing Address 404 Huntington Dr City, State, Zip Code Jackson, MS 39272-4486 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/25/2023	\$25.00
Aggregate year-to-date		\$275.00
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 Lucile Mccook Mailing Address 142 County Road 271 City, State, Zip Code Oxford, MS 38655-9207 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/15/2023	\$500.00
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 Larry George Mailing Address 1999 Brasher Rd City, State, Zip Code Biloxi, MS 39532-4357 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/05/2023	\$100.00
Aggregate year-to-date		\$300.00

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 Joseph Sheppard Mailing Address PO Box 327 City, State, Zip Code Cuero, TX 77954-0327 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/15/2023	\$250.00
Aggregate year-to-date		\$1,950.00
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 F. Fink Mailing Address 3439 Brae Bourn Dr City, State, Zip Code Huntingdon Vall, PA 19006-4003 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/06/2023	\$500.00
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 Robert Carroll Mailing Address 675 Beulah Grove Rd City, State, Zip Code Pontotoc, MS 38863-7704 Name of Employer (Required) Ashley Distribution Services Occupation (Required) Truck Driver	08/16/2023	\$50.00
Aggregate year-to-date		\$920.00
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 Denise Pilgrim Mailing Address 108 Bellingham Dr City, State, Zip Code Madison, MS 39110-8524 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/26/2023	\$100.00
Aggregate year-to-date		\$667.90

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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	09/06/2023	\$8.00
Aggregate year-to-date		\$602.00
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 O'Neal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic Occupation (Required) Physician	09/16/2023	\$25.00
Aggregate year-to-date		\$2,526.00
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 Diane Irvin Mailing Address 4047 Wyandot St City, State, Zip Code Denver, CO 80211-2140 Name of Employer (Required) Strategic Programs, Inc. Occupation (Required) Corporate Secretary	09/17/2023	\$25.00
Aggregate year-to-date		\$433.00
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 Lindal E. Baker Mailing Address 1068 Spring House Rd City, State, Zip Code Malvern, AR 72104-7115 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/07/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00

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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	09/18/2023	\$18.00
Aggregate year-to-date		\$602.00
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 Faye Cox Mailing Address 704 Northpointe Cv City, State, Zip Code Oxford, MS 38655-7708 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/18/2023	\$25.00
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 Smead Mailing Address 3918 Swarthmore St City, State, Zip Code Houston, TX 77005-3612 Name of Employer (Required) RBN Energy, LLC Occupation (Required) Energy Consultant	08/28/2023	\$500.00
Aggregate year-to-date		\$600.00
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 Patsy H. Johnson Mailing Address 59 County Road 7061 City, State, Zip Code Booneville, MS 38829-9591 Name of Employer (Required) PACTconsulting, LLC Occupation (Required) Business Consultant	09/29/2023	\$300.00
Aggregate year-to-date		\$500.00

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 Sullivan	08/29/2023	\$250.00
Mailing Address 253 County Road 325		
City, State, Zip Code Oxford, MS 38655-9566		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,750.00
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 Himel	09/20/2023	\$10.00
Mailing Address 5155 Madison St		
City, State, Zip Code Skokie, IL 60077-5233		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
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 Don Keim	09/30/2023	\$100.00
Mailing Address 202 S Deer Creek Dr W		
City, State, Zip Code Leland, MS 38756-3129		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00
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 Buchanan	08/11/2023	\$25.00
Mailing Address 155 Bryant St		
City, State, Zip Code Palo Alto, CA 94301-1104		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,061.50

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 Bonnie Allen	08/31/2023	\$25.00
Mailing Address 7688 Highway 19 N		
City, State, Zip Code Collinsville, MS 39325-9390		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
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 Himel	08/31/2023	\$10.00
Mailing Address 5155 Madison St		
City, State, Zip Code Skokie, IL 60077-5233		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
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 Margaret Thomas	08/31/2023	\$20.00
Mailing Address 153 Timberton Dr		
City, State, Zip Code Hattiesburg, MS 39401-8209		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$722.00
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 Alan Arendale	09/23/2023	\$25.00
Mailing Address 345 Woodstone Rd		
City, State, Zip Code Clinton, MS 39056-4948		
Name of Employer (Required) Cannon Toyota Vicksburg		
Occupation (Required) Sales Consultant	Aggregate year-to-date	\$230.00

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 Jerry Clingan <hr/> Mailing Address 28618 8th Pl S <hr/> City, State, Zip Code Federal Way, WA 98003-3118 <hr/> Name of Employer (Required) Not Employed	08/03/2023	\$250.00
Occupation (Required) Retired	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) _____		
Full Name Steven Smith <hr/> Mailing Address 1439 Briarwood Dr <hr/> City, State, Zip Code Marshfield, MO 65706-2407 <hr/> Name of Employer (Required) Not Employed	09/13/2023	\$25.00
Occupation (Required) Not Employed	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) _____		
Full Name Jerry Meadors <hr/> Mailing Address PO Box 369 <hr/> City, State, Zip Code Kiln, MS 39556-0369 <hr/> Name of Employer (Required) Not Employed	09/24/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Heather Denison <hr/> Mailing Address 104 Temple Ter <hr/> City, State, Zip Code Ocean Springs, MS 39564-5402 <hr/> Name of Employer (Required) Self Employed	09/24/2023	\$200.00
Occupation (Required) Photographer	Aggregate year-to-date	\$1,000.00

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 J Ratcliffe	08/14/2023	\$1,000.00
Mailing Address 154 Tallulah Rdg		
City, State, Zip Code Hattiesburg, MS 39402-7626		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Debra Kaufman	08/06/2023	\$12.92
Mailing Address 156 County Road 303		
City, State, Zip Code Iuka, MS 38852-7516		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$277.92
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 Christie Yoste	08/16/2023	\$250.00
Mailing Address 1514 19th Ave		
City, State, Zip Code Gulfport, MS 39501-2124		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Linda Foshee	09/16/2023	\$25.00
Mailing Address Not Employed		
City, State, Zip Code Hattiesburg, MS 39402		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$607.60

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 Claiborne Barksdale Mailing Address 917 Old Taylor Rd City, State, Zip Code Oxford, MS 38655-4637 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/17/2023	\$250.00
Aggregate year-to-date		\$1,750.00
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 G. Topp Mailing Address 16 North Pt City, State, Zip Code Hattiesburg, MS 39402-9533 Name of Employer (Required) TMH CPA and Consulting Firm Occupation (Required) Accountant	09/27/2023	\$250.00
Aggregate year-to-date		\$750.00
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 Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/07/2023	\$5.00
Aggregate year-to-date		\$607.60
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 O'Neal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic Occupation (Required) Physician	08/27/2023	\$100.00
Aggregate year-to-date		\$2,526.00

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 Stacy Callender	09/07/2023	\$100.00
Mailing Address 4047 Pine Hill Dr		
City, State, Zip Code Jackson, MS 39206-5739		
Name of Employer (Required) MS Dept of Education		
Occupation (Required) Program Coordinator	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 Ada B. Jones	08/28/2023	\$250.00
Mailing Address PO Box 964		
City, State, Zip Code Kiln, MS 39556-0964		
Name of Employer (Required) South Mississippi Regional Center		
Occupation (Required) Administrative Assistant	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 Jerutha Steptoe	09/29/2023	\$225.00
Mailing Address PO Box 1906		
City, State, Zip Code Ridgeland, MS 39158-1906		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$850.00
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 Alverson	08/09/2023	\$1,000.00
Mailing Address 24327 Rester Rd		
City, State, Zip Code Picayune, MS 39466-9398		
Name of Employer (Required) Self Employed		
Occupation (Required) AWS Engineer	Aggregate year-to-date	\$1,000.00

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 Jacqueline Amos <hr/> Mailing Address 168 Kilkenny Blvd <hr/> City, State, Zip Code Jackson, MS 39209-3744 <hr/> Name of Employer (Required) The City of Canton <hr/> Occupation (Required) City Administrator	08/29/2023	\$25.00
Aggregate year-to-date		\$305.00
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 Joanna Shows <hr/> Mailing Address 3 S Heron Cv <hr/> City, State, Zip Code Hattiesburg, MS 39402-8723 <hr/> Name of Employer (Required) Not Employed <hr/> Occupation (Required) Not Employed	09/30/2023	\$100.00
Aggregate year-to-date		\$975.00
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 Fisher <hr/> Mailing Address 1311 Webster St <hr/> City, State, Zip Code Alameda, CA 94501-3804 <hr/> Name of Employer (Required) Not Employed <hr/> Occupation (Required) Not Employed	07/30/2023	\$250.00
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 Ann Smith <hr/> Mailing Address PO Box 1865 <hr/> City, State, Zip Code Gulfport, MS 39502-1865 <hr/> Name of Employer (Required) Not Employed <hr/> Occupation (Required) Not Employed	08/20/2023	\$10.00
Aggregate year-to-date		\$390.00

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 Martha VanLandingham <hr/> Mailing Address 4830 Old West Point Rd <hr/> City, State, Zip Code Starkville, MS 39759-8190 <hr/> Name of Employer (Required) Not Employed	08/20/2023	\$50.00
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) _____		
Full Name Tor Kwembe <hr/> Mailing Address 4100 Poplar Ave <hr/> City, State, Zip Code Richton Park, IL 60471-1236 <hr/> Name of Employer (Required) Jackson State University	08/30/2023	\$25.00
Occupation (Required) Professor	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) _____		
Full Name Frank Witherspoon <hr/> Mailing Address 910 Lincoln Ave <hr/> City, State, Zip Code Oxford, MS 38655-4328 <hr/> Name of Employer (Required) Not Employed	08/11/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Judith Wiener <hr/> Mailing Address 1621 Devine St <hr/> City, State, Zip Code Jackson, MS 39202-1314 <hr/> Name of Employer (Required) Not Employed	09/22/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,200.00

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 Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required) Not Employed	08/22/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,150.00
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 Debra Kaufman Mailing Address 156 County Road 303 City, State, Zip Code Iuka, MS 38852-7516 Name of Employer (Required) Not Employed	08/22/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$277.92
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 Corliss Mailing Address 2379 Wendover Dr City, State, Zip Code Belden, MS 38826-8644 Name of Employer (Required) Not Employed	09/02/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
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 Jesse White Mailing Address 38 Mount Bolus Rd City, State, Zip Code Chapel Hill, NC 27514-2635 Name of Employer (Required) Not Employed	09/12/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00

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 Kathaleen Miller Mailing Address 13509 Circle G Ranch Rd City, State, Zip Code Picayune, MS 39466-9586 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/23/2023	\$50.00
Aggregate year-to-date		\$210.00
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 Betty D. Williams Mailing Address 254 Harding Pl City, State, Zip Code Nashville, TN 37205-3727 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/13/2023	\$100.00
Aggregate year-to-date		\$1,100.00
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 Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed Occupation (Required) Nurse Practitioner	08/03/2023	\$10.00
Aggregate year-to-date		\$335.00
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 Meadors Mailing Address PO Box 369 City, State, Zip Code Kiln, MS 39556-0369 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/13/2023	\$50.00
Aggregate year-to-date		\$285.00

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 Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed	08/23/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$478.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Johnie Seal Mailing Address 1286 John Amacker Rd City, State, Zip Code Poplarville, MS 39470-6396 Name of Employer (Required) Not Employed	09/24/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$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) _____		
Full Name Stefan Massong Mailing Address 307 Wisteria St City, State, Zip Code Ocean Springs, MS 39564-2840 Name of Employer (Required) Self Employed	09/25/2023	\$200.00
Occupation (Required) Psychologist	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name James Hudson Mailing Address 131 Park Ave City, State, Zip Code Oklahoma City, OK 73102-9051 Name of Employer (Required) Crowe & Dunlevy	08/16/2023	\$5,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$5,500.00

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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5602 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/16/2023	\$20.00
Aggregate year-to-date		\$325.00
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 Glenn Oliver Mailing Address 5642 Gibson Rd City, State, Zip Code Vicksburg, MS 39180-6320 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/28/2023	\$25.00
Aggregate year-to-date		\$280.00
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 Jim Warlick Mailing Address 100 Princess St City, State, Zip Code Alexandria, VA 22314-2325 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/08/2023	\$500.00
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 Claire Davis Mailing Address 44714 Audubon Sq City, State, Zip Code Ashburn, VA 20147-6295 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/19/2023	\$20.00
Aggregate year-to-date		\$930.00

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 Andrew Dickson Mailing Address 807 Sth 19Th Ave City, State, Zip Code Hattiesburg, MS 39401 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/09/2023	\$250.00
Aggregate year-to-date		\$2,200.00
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>Partnership</u>		
Full Name 411 FT LP Mailing Address PO Box 3948 City, State, Zip Code Albany, GA 31706-3948 Name of Employer (Required) Occupation (Required)	09/30/2023	\$1,000.00
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) _____		
Full Name Weslie Janeway Mailing Address 8 E 80th St City, State, Zip Code New York, NY 10075-0110 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/30/2023	\$5,000.00
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) _____		
Full Name John Mcinnis Mailing Address 2509 Promenade Blvd City, State, Zip Code Ocean Springs, MS 39564-8720 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/11/2023	\$1,000.00
Aggregate year-to-date		\$3,000.00

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 Debra Warner Mailing Address 502 E Lakeshore Dr City, State, Zip Code Carriere, MS 39426-7905 Name of Employer (Required) Not Employed	09/22/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
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 Sneed Mailing Address 9300 Wilshire Blvd City, State, Zip Code Beverly Hills, CA 90212-3213 Name of Employer (Required) Self Employed	09/12/2023	\$1,000.00
Occupation (Required) Actor	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 Brenda Coleman Mailing Address 4013 Pinehaven Dr City, State, Zip Code Jackson, MS 39209-9736 Name of Employer (Required) Hinds County Board of Supervisors	09/23/2023	\$50.00
Occupation (Required) Fiscal Officer	Aggregate year-to-date	\$275.00
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 Jacqueline Brown Mailing Address 516 Sweetwater Cmns City, State, Zip Code Brandon, MS 39047-7433 Name of Employer (Required) BankPlus	08/23/2023	\$1,000.00
Occupation (Required) Loan Assistant	Aggregate year-to-date	\$1,000.00

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 Garry Breland <hr/> Mailing Address 138 Jervis Mims Rd <hr/> City, State, Zip Code Hattiesburg, MS 39401-8854 <hr/> Name of Employer (Required) Not Employed	09/03/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Gary Fredericks <hr/> Mailing Address PO Box 6723 <hr/> City, State, Zip Code Gulfport, MS 39506-6723 <hr/> Name of Employer (Required) Memorial Health System <hr/> Occupation (Required) Chairman	09/14/2023	\$100.00
Occupation (Required) Chairman	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) _____		
Full Name Johnie Seal <hr/> Mailing Address 1286 John Amacker Rd <hr/> City, State, Zip Code Poplarville, MS 39470-6396 <hr/> Name of Employer (Required) Not Employed	08/04/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$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) _____		
Full Name Cherri Musser <hr/> Mailing Address 105 Piute Cir <hr/> City, State, Zip Code Loudon, TN 37774-2138 <hr/> Name of Employer (Required) Not Employed	08/24/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00

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 Patricia Sandusky <hr/> Mailing Address PO Box 119 <hr/> City, State, Zip Code Bailey, MS 39320-0119 <hr/> Name of Employer (Required) Not Employed	09/14/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Graham Slakie <hr/> Mailing Address 4706 Buckingham Dr <hr/> City, State, Zip Code Chattanooga, TN 37421-1108 <hr/> Name of Employer (Required) Regal Cinemas	09/25/2023	\$10.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,197.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Leesa Golden <hr/> Mailing Address 435 Humphries Cove Rd <hr/> City, State, Zip Code West Point, MS 39773-8212 <hr/> Name of Employer (Required) Not Employed	08/17/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John R. Bradley <hr/> Mailing Address 107 Philip Rd <hr/> City, State, Zip Code Oxford, MS 38655-2013 <hr/> Name of Employer (Required) Not Employed	09/07/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$10,260.00

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 Duncan M. Gray III <hr/> Mailing Address 110 Philip Rd <hr/> City, State, Zip Code Oxford, MS 38655-2014 <hr/> Name of Employer (Required) Nativity Episcopal Church	09/17/2023	\$50.00
Occupation (Required) Clergy	Aggregate year-to-date	\$675.00
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 Yvonne Harrison <hr/> Mailing Address 149 Acacia Ave <hr/> City, State, Zip Code Biloxi, MS 39530-3308 <hr/> Name of Employer (Required) Not Employed	09/18/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$427.00
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 Sheba Hancock <hr/> Mailing Address 8208 Trinity Rd <hr/> City, State, Zip Code Cordova, TN 38018-6758 <hr/> Name of Employer (Required) Not Employed	08/18/2023	\$1,000.00
Occupation (Required) Retired	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 Lori Karny <hr/> Mailing Address 6230 Wilshire Blvd <hr/> City, State, Zip Code Los Angeles, CA 90048-5126 <hr/> Name of Employer (Required) Self Employed	09/29/2023	\$10.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$602.00

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 Thomas Wooldridge	09/29/2023	\$1,000.00
Mailing Address 1848 Northwood Dr		
City, State, Zip Code Tupelo, MS 38804-1047		
Name of Employer (Required) Nephrology & Hypertension Associates		
Occupation (Required) Physician	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 George Butler	09/29/2023	\$50.00
Mailing Address 2110 Brackenshire Cir		
City, State, Zip Code Jackson, MS 39211-5836		
Name of Employer (Required) GranthamPoole, PLLC		
Occupation (Required) Accountant	Aggregate year-to-date	\$350.00
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 Betty Ware	08/09/2023	\$100.00
Mailing Address 941 Windsor Rd		
City, State, Zip Code Grenada, MS 38901-5027		
Name of Employer (Required) Self Employed		
Occupation (Required) Appraiser	Aggregate year-to-date	\$600.00
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 Ted Wilson	08/29/2023	\$50.00
Mailing Address 364 Whitt Rd		
City, State, Zip Code Eupora, MS 39744-2531		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00

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 Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	09/20/2023	\$35.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Nsombi Lambright Mailing Address 927 Woodville Dr City, State, Zip Code Jackson, MS 39212-3953 Name of Employer (Required) One Voice	09/30/2023	\$50.00
Occupation (Required) Non-Profit Manager	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Clarence E. Smith Mailing Address 423 W Franklin St City, State, Zip Code Tupelo, MS 38804-3821 Name of Employer (Required) Not Employed	09/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Marcy Petrini Mailing Address 950 Fairfax Cir City, State, Zip Code Jackson, MS 39211-4250 Name of Employer (Required) Not Employed	07/30/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

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 Marshall Morgan Mailing Address 281 Pat Lockett Rd City, State, Zip Code Canton, MS 39046-8952 Name of Employer (Required) Not Employed	08/10/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$303.75
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 Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	08/30/2023	\$50.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,197.00
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 Dick Ledoux Mailing Address 488 CR 1460 City, State, Zip Code Tupelo, MS 38804 Name of Employer (Required) Insource Solutions	08/30/2023	\$25.00
Occupation (Required) Client Success Advocate	Aggregate year-to-date	\$250.60
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 Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required) Not Employed	07/31/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$607.60

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 Cornelis Gispen Mailing Address 1112 S 11th St City, State, Zip Code Oxford, MS 38655-4610 Name of Employer (Required) Not Employed	08/31/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,175.00
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 Gray Mailing Address 1425 Jackson St City, State, Zip Code Corinth, MS 38834-3423 Name of Employer (Required) Self Employed	09/22/2023	\$100.00
Occupation (Required) Architect	Aggregate year-to-date	\$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 Barbara Rankin Mailing Address PO Box 219 City, State, Zip Code Braxton, MS 39044-0219 Name of Employer (Required) Not Employed	08/12/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00
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 Jackson Mailing Address 104 Bristol Way City, State, Zip Code Madison, MS 39110-5029 Name of Employer (Required) Takeda	09/12/2023	\$50.00
Occupation (Required) Sales	Aggregate year-to-date	\$300.00

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 Graham Mailing Address 520 Deer Creek Dr City, State, Zip Code Oxford, MS 38655-8559 Name of Employer (Required) Not Employed	09/24/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name E. K. Pruitt Mailing Address 4217 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3420 Name of Employer (Required) Not Employed	08/24/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Bela Chain Jr Mailing Address 243 Saint Andrews Cir City, State, Zip Code Oxford, MS 38655-2641 Name of Employer (Required) Not Employed	09/04/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Patsy R. Brumfield Mailing Address 128 Woodland Ridge Dr City, State, Zip Code Mccomb, MS 39648-6338 Name of Employer (Required) Not Employed	09/15/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$383.30

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 Gail Anderson Mailing Address 1329 Willis Rd City, State, Zip Code Carthage, MS 39051-9126 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/05/2023	\$100.00
Aggregate year-to-date		\$400.00
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 Gina Seago Mailing Address 139 Vinings Dr City, State, Zip Code Madison, MS 39110-6535 Name of Employer (Required) Baptist Premier Occupation (Required) Nurse Practitioner	08/25/2023	\$500.00
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 Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/25/2023	\$50.00
Aggregate year-to-date		\$375.00
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 McClinton Mailing Address 100 E Main St City, State, Zip Code New Albany, MS 38652-3921 Name of Employer (Required) Russell & McClinton, PA Occupation (Required) Attorney	09/19/2023	\$500.00
Aggregate year-to-date		\$500.00

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 William L. Latham <hr/> Mailing Address 513 Roses Bluff Dr <hr/> City, State, Zip Code Madison, MS 39110-7545 <hr/> Name of Employer (Required) Not Employed	09/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$335.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Cynthia Morse <hr/> Mailing Address 8601 Zimpel St <hr/> City, State, Zip Code New Orleans, LA 70118-1139 <hr/> Name of Employer (Required) Not Employed	08/09/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kevin Shirley <hr/> Mailing Address 114 Harvey St <hr/> City, State, Zip Code Belzoni, MS 39038-3112 <hr/> Name of Employer (Required) Self Employed	09/30/2023	\$50.00
Occupation (Required) It Contractor	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) _____		
Full Name Robert Hamilton <hr/> Mailing Address 3701 58th Ave <hr/> City, State, Zip Code Meridian, MS 39307-2905 <hr/> Name of Employer (Required) Self Employed	09/30/2023	\$10.00
Occupation (Required) Restaurateur	Aggregate year-to-date	\$240.00

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 Dan Webb Mailing Address PO Box 496 City, State, Zip Code Tupelo, MS 38802-0496 Name of Employer (Required) Webb Sanders Williams & Williams Occupation (Required) Attorney	08/30/2023	\$1,000.00
Aggregate year-to-date		\$11,750.00
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 Sarah West Mailing Address 634 Meadowmont Village Cir City, State, Zip Code Chapel Hill, NC 27517-7586 Name of Employer (Required) Acclaro Solutions Occupation (Required) Business Owner	09/10/2023	\$250.00
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 Virginia T. Munford Mailing Address 810 Gillespie St City, State, Zip Code Jackson, MS 39202-1714 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/21/2023	\$1,000.00
Aggregate year-to-date		\$1,150.00
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 Martha Cheney Mailing Address 3155 Pontocola Rd City, State, Zip Code Pontotoc, MS 38863-7515 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Mary Haskell Mailing Address 6 Trotting Horse Dr City, State, Zip Code Lexington, MA 02421-6339 Name of Employer (Required) Not Employed	09/22/2023	\$50.00
Occupation (Required) Not Employed	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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed	08/22/2023	\$18.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$602.00
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 Alsop Mailing Address 675 C Hale St City, State, Zip Code Beverly, MA 01915-2166 Name of Employer (Required) Alsop Louie Partners	09/13/2023	\$500.00
Occupation (Required) Venture Partner	Aggregate year-to-date	\$1,500.00
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 Stevens Law Group PLLC Mailing Address 190 Gateway Dr City, State, Zip Code Brandon, MS 39042-3137 Name of Employer (Required)	08/04/2023	\$250.00
Occupation (Required)	Aggregate year-to-date	\$250.00

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 Kelvin Butler Mailing Address 2018 Hawthorne Dr City, State, Zip Code Mccomb, MS 39648-7597 Name of Employer (Required) City of Mccomb Occupation (Required) City Administrator	09/15/2023	\$1,000.00
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 Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/15/2023	\$25.00
Aggregate year-to-date		\$748.47
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 Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/15/2023	\$34.00
Aggregate year-to-date		\$2,045.00
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 Hill Mailing Address 200 Craft St City, State, Zip Code Holly Springs, MS 38635-2912 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/26/2023	\$100.00
Aggregate year-to-date		\$300.00

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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	09/16/2023	\$16.00
Aggregate year-to-date		\$602.00
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 Anita Yarbrough Mailing Address 202 Lakeside Dr City, State, Zip Code Houston, MS 38851-7432 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$25.00
Aggregate year-to-date		\$392.50
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 Betty Ware Mailing Address 941 Windsor Rd City, State, Zip Code Grenada, MS 38901-5027 Name of Employer (Required) Self Employed Occupation (Required) Appraiser	09/08/2023	\$500.00
Aggregate year-to-date		\$600.00
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 Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/19/2023	\$25.00
Aggregate year-to-date		\$250.00

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 Jerry Smith <hr/> Mailing Address 136 St Regis Dr <hr/> City, State, Zip Code Madison, MS 39110-7798 <hr/> Name of Employer (Required) Mississippi Baptist Medical Center	09/20/2023	\$50.00
Occupation (Required) Pharmacist	Aggregate year-to-date	\$646.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Tor Kwembe <hr/> Mailing Address 4100 Poplar Ave <hr/> City, State, Zip Code Richton Park, IL 60471-1236 <hr/> Name of Employer (Required) Jackson State University	07/30/2023	\$25.00
Occupation (Required) Professor	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) _____		
Full Name Anita Yarbrough <hr/> Mailing Address 202 Lakeside Dr <hr/> City, State, Zip Code Houston, MS 38851-7432 <hr/> Name of Employer (Required) Not Employed	08/20/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$392.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jean Kuykendall <hr/> Mailing Address 681 Gaines Rd <hr/> City, State, Zip Code Hernando, MS 38632-9069 <hr/> Name of Employer (Required) Not Employed	08/30/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

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 Paul Stein Mailing Address 5703 Gulf Tech Dr City, State, Zip Code Ocean Springs, MS 39564-8238 Name of Employer (Required) Stein LTC Group Occupation (Required) CEO	08/31/2023	\$1,000.00
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 Mark C. Wallfisch Mailing Address 128 Central Park Pl City, State, Zip Code New Orleans, LA 70124-3708 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$25.00
Aggregate year-to-date		\$625.00
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 Byrd Mailing Address 701 N Fulton St City, State, Zip Code Iuka, MS 38852-2411 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/01/2023	\$10.00
Aggregate year-to-date		\$235.00
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 Brombacher Mailing Address 108 Coachmans Rd City, State, Zip Code Madison, MS 39110-9227 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/11/2023	\$50.00
Aggregate year-to-date		\$800.00

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 Ted B. Atkinson	08/03/2023	\$25.00
Mailing Address 1000 E Broad St		
City, State, Zip Code West Point, MS 39773-3236		
Name of Employer (Required) Mississippi State University		
Occupation (Required) Professor	Aggregate year-to-date	\$410.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Douglas McKenzie	08/14/2023	\$250.00
Mailing Address 18160 Cottonwood Rd		
City, State, Zip Code Sunriver, OR 97707-9317		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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) _____		
Full Name Beth Stoor	08/24/2023	\$15.00
Mailing Address 9314 SW 97th Ln		
City, State, Zip Code Ocala, FL 34481-7573		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$295.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lee Jackson	09/14/2023	\$500.00
Mailing Address 4623 47th St NW		
City, State, Zip Code Washington, DC 20016-4436		
Name of Employer (Required) James & Hoffman, PC		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00

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 Roger Byrd Mailing Address 701 N Fulton St City, State, Zip Code Iuka, MS 38852-2411 Name of Employer (Required) Not Employed	08/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$235.00
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 O'Brien Mailing Address 6007 SW 240th St City, State, Zip Code Vashon, WA 98070-7247 Name of Employer (Required) Health Net	09/26/2023	\$100.00
Occupation (Required) COO	Aggregate year-to-date	\$950.00
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 S. H. Pivnick Mailing Address PO Box 5232 City, State, Zip Code Biloxi, MS 39534-0232 Name of Employer (Required) Not Employed	09/26/2023	\$1,000.00
Occupation (Required) Not Employed	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 Bradly S. Macnealy Mailing Address 164 Gene Lester Rd City, State, Zip Code Isola, MS 38754-9239 Name of Employer (Required) Self Employed	08/26/2023	\$1,000.00
Occupation (Required) Farmer	Aggregate year-to-date	\$3,000.00

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 Vaughn Grisham Mailing Address 211 Stone Rd City, State, Zip Code Oxford, MS 38655-2021 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/17/2023	\$25.00
Aggregate year-to-date		\$210.00
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 Andrew Jenkins Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Technical Services Occupation (Required) Business Owner	08/27/2023	\$50.00
Aggregate year-to-date		\$4,850.00
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 Leslie Fye Mailing Address 5439 Ennis Rd City, State, Zip Code Starkville, MS 39759-4861 Name of Employer (Required) Self Employed Occupation (Required) Licensed Professional Counselor	09/07/2023	\$50.00
Aggregate year-to-date		\$795.00
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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	09/07/2023	\$16.00
Aggregate year-to-date		\$602.00

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 Diane Irvin Mailing Address 4047 Wyandot St City, State, Zip Code Denver, CO 80211-2140 Name of Employer (Required) Strategic Programs, Inc.	09/18/2023	\$50.00
Occupation (Required) Corporate Secretary	Aggregate year-to-date	\$433.00
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 Claire Davis Mailing Address 44714 Audubon Sq City, State, Zip Code Ashburn, VA 20147-6295 Name of Employer (Required) Not Employed	09/28/2023	\$20.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$930.00
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 Patrick J. O'Connor Mailing Address 541 E Scenic Dr City, State, Zip Code Pass Christian, MS 39571-4510 Name of Employer (Required) Self Employed	08/18/2023	\$2,500.00
Occupation (Required) Director	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 Gail Tapscott Mailing Address 1711 Anderson Rd City, State, Zip Code Oxford, MS 38655-2570 Name of Employer (Required) Not Employed	08/18/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00

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 Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/20/2023	\$25.00
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 Roxann Jackson Mailing Address 1713 Reserve Dr City, State, Zip Code Clinton, MS 39056-5667 Name of Employer (Required) Submittable Occupation (Required) Campaign Support Lead	09/20/2023	\$250.00
Aggregate year-to-date		\$650.00
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 Kaye Mailing Address 123 Nottingham Ter City, State, Zip Code Buffalo, NY 14216-3504 Name of Employer (Required) University at Buffalo Occupation (Required) Faculty	09/30/2023	\$50.00
Aggregate year-to-date		\$525.00
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 Beth Stoor Mailing Address 9314 SW 97th Ln City, State, Zip Code Ocala, FL 34481-7573 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$20.00
Aggregate year-to-date		\$295.00

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 Samuel Begley <hr/> Mailing Address 255 Brook Ct <hr/> City, State, Zip Code Jackson, MS 39208-4160 <hr/> Name of Employer (Required) Begley Law Firm	07/30/2023	\$100.00
Occupation (Required) Attorney	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) _____		
Full Name Roger McDowell <hr/> Mailing Address 1904 Fuller St <hr/> City, State, Zip Code Hattiesburg, MS 39401-7544 <hr/> Name of Employer (Required) Not Employed	08/31/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,039.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brent Buehrer <hr/> Mailing Address 3249 Pepper Ridge Dr <hr/> City, State, Zip Code Maumee, OH 43537-9697 <hr/> Name of Employer (Required) Buehrer Group Architecture & Engineering	08/31/2023	\$100.00
Occupation (Required) Architect	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joseph Ammerman <hr/> Mailing Address 2185 Longview Rd <hr/> City, State, Zip Code Starkville, MS 39759-8974 <hr/> Name of Employer (Required) Not Employed	08/31/2023	\$200.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00

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 H. Molpus Jr	09/11/2023	\$25,000.00
Mailing Address 858 North St		
City, State, Zip Code Jackson, MS 39202-3019		
Name of Employer (Required) Molpus Woodlands Group		
Occupation (Required) Chairman	Aggregate year-to-date	\$51,000.00
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 Joe Love	09/11/2023	\$100.00
Mailing Address PO Box 802		
City, State, Zip Code Summit, MS 39666-0802		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Elizabeth Jenkins-Joffe	09/22/2023	\$75.00
Mailing Address 3825 Legation St NW		
City, State, Zip Code Washington, DC 20015-2701		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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 Joyce Tubb	09/22/2023	\$100.00
Mailing Address 520 Lake Park Dr		
City, State, Zip Code Tupelo, MS 38801-8423		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00

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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5602 Name of Employer (Required) Not Employed	08/12/2023	\$20.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Howard Katz Mailing Address 114 Camden Lake Dr City, State, Zip Code Madison, MS 39110-7030 Name of Employer (Required) Gulf State	08/22/2023	\$300.00
Occupation (Required) Physician	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Charles Parrott Mailing Address 9 Abbey Nord Pl City, State, Zip Code Jackson, MS 39216-3743 Name of Employer (Required) Adams and Reese LLP	08/22/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,100.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Richard Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed	09/23/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$478.00

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 Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/03/2023	\$50.00
Aggregate year-to-date		\$3,000.00
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 Eugene Bramlett Jr Mailing Address 1123 College St City, State, Zip Code Columbus, MS 39701-5810 Name of Employer (Required) Covenant United Methodist Church Occupation (Required) Religious Worker	08/16/2023	\$25.00
Aggregate year-to-date		\$1,175.00
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 Frank Witherspoon Mailing Address 910 Lincoln Ave City, State, Zip Code Oxford, MS 38655-4328 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/26/2023	\$250.00
Aggregate year-to-date		\$2,350.00
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 Dennis Truax Mailing Address 913 Southgate Dr City, State, Zip Code Starkville, MS 39759-9434 Name of Employer (Required) Self Employed Occupation (Required) Engineer	09/16/2023	\$25.00
Aggregate year-to-date		\$1,671.00

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 Lisa Percy Mailing Address 134 Bayou Rd City, State, Zip Code Greenville, MS 38701-7725 Name of Employer (Required) Not Employed	09/27/2023	\$1,000.00
Occupation (Required) Retired	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 Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed	09/27/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,045.00
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 Suzanne H. Robinson Mailing Address 206 Wood St City, State, Zip Code Water Valley, MS 38965-2603 Name of Employer (Required) Not Employed	08/07/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,425.00
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 Andy Rosemore Mailing Address 5516 Cavendish Ct City, State, Zip Code Plano, TX 75093-4231 Name of Employer (Required) Not Employed	08/07/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$250.00

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 Mikhail Prudnikov Mailing Address 965 Folsom St City, State, Zip Code San Francisco, CA 94107-1079 Name of Employer (Required) Not Employed Occupation (Required) University Student	09/28/2023	\$250.00
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 Dental Concepts Mailing Address 209 Lameuse St City, State, Zip Code Biloxi, MS 39530-3107 Name of Employer (Required) Occupation (Required)	09/18/2023	\$500.00
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 James P P. Coleman Mailing Address 7357 Savannah Dr City, State, Zip Code Marion, MS 39342-9004 Name of Employer (Required) Vulcan Imaging Associates Occupation (Required) Diagnostic Radiologist	08/18/2023	\$250.00
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 Carla Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Mississippi Humanities Council Occupation (Required) Prison Education Coordinator	09/08/2023	\$50.00
Aggregate year-to-date		\$350.00

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 William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	09/08/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
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 Willy Cherry Mailing Address 116 Colonial Dr City, State, Zip Code Cleveland, MS 38732-2804 Name of Employer (Required) HealthCare Plus	08/09/2023	\$25.00
Occupation (Required) Administrator	Aggregate year-to-date	\$275.00
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 Frankie Blount Mailing Address 4876 Brookwood Pl City, State, Zip Code Jackson, MS 39272-5706 Name of Employer (Required) Not Employed	09/30/2023	\$35.71
Occupation (Required) Not Employed	Aggregate year-to-date	\$278.55
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 Brombacher Mailing Address 108 Coachmans Rd City, State, Zip Code Madison, MS 39110-9227 Name of Employer (Required) Not Employed	07/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$800.00

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 Randall Engle <hr/> Mailing Address 609 Spring Camp Rd <hr/> City, State, Zip Code Ellijay, GA 30536-8557 <hr/> Name of Employer (Required) Georgia Institute of Technology	08/31/2023	\$100.00
Occupation (Required) Professor	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Sidney Whitehurst <hr/> Mailing Address PO Box 966 <hr/> City, State, Zip Code Iuka, MS 38852-0966 <hr/> Name of Employer (Required) Not Employed	08/22/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Adrienne Turner <hr/> Mailing Address 2022 Petit Bois St S <hr/> City, State, Zip Code Jackson, MS 39211-6709 <hr/> Name of Employer (Required) Not Employed	08/23/2023	\$500.00
Occupation (Required) Not Employed	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) _____		
Full Name Alan Saleski <hr/> Mailing Address 2116 Harrison St <hr/> City, State, Zip Code Evanston, IL 60201-2223 <hr/> Name of Employer (Required) Loyola University Chicago	09/13/2023	\$50.00
Occupation (Required) Professor	Aggregate year-to-date	\$250.00

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 Karen Smith	08/25/2023	\$7.50
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Henley	09/15/2023	\$500.00
Mailing Address 700 Harris St		
City, State, Zip Code Charlottesville, VA 22903-4584		
Name of Employer (Required) Self Employed		
Occupation (Required) Musician	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 Randy Patterson	09/26/2023	\$15.00
Mailing Address 1603 Sycamore St		
City, State, Zip Code Murray, KY 42071-2223		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.00
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 Gerald A. Mumford, PLLC	09/06/2023	\$250.00
Mailing Address 820 North St		
City, State, Zip Code Jackson, MS 39202-3019		
Name of Employer (Required) _____		
Occupation (Required) _____	Aggregate year-to-date	\$250.00

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 Linda Cox	09/27/2023	\$50.00
Mailing Address 12 Estate Dr		
City, State, Zip Code Long Beach, MS 39560-3912		
Name of Employer (Required) Veterans Health Administration		
Occupation (Required) Psychologist	Aggregate year-to-date	\$675.00
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 Graham Slakie	08/27/2023	\$6.00
Mailing Address 4706 Buckingham Dr		
City, State, Zip Code Chattanooga, TN 37421-1108		
Name of Employer (Required) Regal Cinemas		
Occupation (Required) Usher	Aggregate year-to-date	\$1,197.00
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 Smead	09/28/2023	\$100.00
Mailing Address 3918 Swarthmore St		
City, State, Zip Code Houston, TX 77005-3612		
Name of Employer (Required) RBN Energy, LLC		
Occupation (Required) Energy Consultant	Aggregate year-to-date	\$600.00
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 Diane Irvin	09/28/2023	\$10.00
Mailing Address 4047 Wyandot St		
City, State, Zip Code Denver, CO 80211-2140		
Name of Employer (Required) Strategic Programs, Inc.		
Occupation (Required) Corporate Secretary	Aggregate year-to-date	\$433.00

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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/08/2023	\$25.00
Aggregate year-to-date		\$833.50
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 Denotee Martin Mailing Address 1009 County Road 65 City, State, Zip Code New Albany, MS 38652-8923 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/18/2023	\$100.00
Aggregate year-to-date		\$532.50
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. Bryan Mailing Address PO Box 636 City, State, Zip Code West Point, MS 39773-0636 Name of Employer (Required) Prairie Wildlife Preserve Occupation (Required) Business Owner	08/08/2023	\$500.00
Aggregate year-to-date		\$1,900.00
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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/09/2023	\$50.00
Aggregate year-to-date		\$880.00

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 Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/09/2023	\$50.00
Aggregate year-to-date		\$3,000.00
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 Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/09/2023	\$10.00
Aggregate year-to-date		\$285.00
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 Feeley Mailing Address 7371 N Aberdeen Dr City, State, Zip Code Pass Christian, MS 39571-7012 Name of Employer (Required) Self Employed Occupation (Required) Engineer	08/10/2023	\$50.00
Aggregate year-to-date		\$300.00
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 Carol Taff Mailing Address 1705 Myrtle St City, State, Zip Code Jackson, MS 39202-1336 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/21/2023	\$50.00
Aggregate year-to-date		\$1,530.00

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 Janice Walker Mailing Address 5950 B N Colony Blvd City, State, Zip Code Jackson, MS 39206-2404 Name of Employer (Required) Federal Emergency Management Agency	08/31/2023	\$100.00
Occupation (Required) Administrative Support Specialist	Aggregate year-to-date	\$625.00
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 Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	08/31/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$748.47
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 Lacavera Mailing Address 1459 Forbes Dr City, State, Zip Code Byram, MS 39272-9459 Name of Employer (Required) Eastpointe	09/23/2023	\$50.00
Occupation (Required) Utilization Management	Aggregate year-to-date	\$375.00
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 Latham Mailing Address 2090 Jefferson Pkwy City, State, Zip Code Hernando, MS 38632-5905 Name of Employer (Required) Not Employed	08/03/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,650.00

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 Moore Mailing Address 292 Highway 2 NE City, State, Zip Code Corinth, MS 38834-6906 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/03/2023	\$250.00
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 Curtis Gray Mailing Address 37 County Road 317 City, State, Zip Code Heidelberg, MS 39439-3679 Name of Employer (Required) Jasper Occupation (Required) County Supervisor	09/24/2023	\$50.00
Aggregate year-to-date		\$235.00
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 Mendelson Mailing Address 627 N Cherokee Ave City, State, Zip Code Los Angeles, CA 90004-1008 Name of Employer (Required) Seyfarth Shaw LLP Occupation (Required) Attorney	08/04/2023	\$1,000.00
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 Ed Hargett Mailing Address 1007 Hargett Dr City, State, Zip Code Charleston, MS 38921-9726 Name of Employer (Required) Self Employed Occupation (Required) Corrections	08/14/2023	\$1,000.00
Aggregate year-to-date		\$1,200.00

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 Bruce Bellande Mailing Address 318 N 16th St City, State, Zip Code Oxford, MS 38655-3712 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/24/2023	\$100.00
Aggregate year-to-date		\$300.00
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 Eugene Bramlett Jr Mailing Address 1123 College St City, State, Zip Code Columbus, MS 39701-5810 Name of Employer (Required) Covenant United Methodist Church Occupation (Required) Religious Worker	08/05/2023	\$50.00
Aggregate year-to-date		\$1,175.00
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 Ann Duke Mailing Address 4025 Dunsinane St City, State, Zip Code Ocean Springs, MS 39564-3444 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/26/2023	\$200.00
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 Hines Hall Mailing Address 117 County Road 259 City, State, Zip Code Iuka, MS 38852-8542 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/06/2023	\$250.00
Aggregate year-to-date		\$1,000.00

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 Maury Lutin Mailing Address 5025 Wayneland Dr City, State, Zip Code Jackson, MS 39211-4431 Name of Employer (Required) Not Employed	09/06/2023	\$1,000.00
Occupation (Required) Not Employed	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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	09/16/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
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 Goldhor Mailing Address 45 B Museum St City, State, Zip Code Cambridge, MA 02138-1921 Name of Employer (Required) Not Employed	09/27/2023	\$1,000.00
Occupation (Required) Not Employed	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 Ted Wilson Mailing Address 364 Whitt Rd City, State, Zip Code Eupora, MS 39744-2531 Name of Employer (Required) Not Employed	09/28/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00

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 Price Mailing Address 7777 Fay Ave City, State, Zip Code La Jolla, CA 92037-4327 Name of Employer (Required) Pricesmart Inc.	08/08/2023	\$5,000.00
Occupation (Required) Chairman	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 N. Butts Mailing Address 703 N 7th Ave City, State, Zip Code Laurel, MS 39440-3468 Name of Employer (Required) Sanderson Farms	08/28/2023	\$500.00
Occupation (Required) Manager	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 John Rogers Mailing Address 831 Cedar Lake Rd City, State, Zip Code Biloxi, MS 39532-4671 Name of Employer (Required) Not Employed	08/28/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,200.00
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 Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required) Not Employed	08/28/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,150.00

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 E. Brevard Mailing Address 805 Oak Grove Rd City, State, Zip Code Tupelo, MS 38804-2031 Name of Employer (Required) B & B Concrete Co., Inc.	09/29/2023	\$1,000.00
Occupation (Required) President	Aggregate year-to-date	\$2,700.00
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 Bud Coley Mailing Address PO Box 3068 City, State, Zip Code Tupelo, MS 38803-3068 Name of Employer (Required) Bud Coley Trucking	09/19/2023	\$1,000.00
Occupation (Required) Business 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 Kelly Coleman Mailing Address 66 Grandview Cir City, State, Zip Code Brandon, MS 39047-7398 Name of Employer (Required) Not Employed	09/30/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,100.00
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 Lillie Randolph Mailing Address 117 Harris St City, State, Zip Code Nettleton, MS 38858-5964 Name of Employer (Required) Not Employed	09/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$215.00

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 Sarah S. Landry <hr/> Mailing Address 17251 Coventry Estates Blvd <hr/> City, State, Zip Code Diberville, MS 39540-3317 <hr/> Name of Employer (Required) Not Employed	08/01/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert Baler <hr/> Mailing Address 3000 Pineland Dr <hr/> City, State, Zip Code Gulfport, MS 39501-6239 <hr/> Name of Employer (Required) Not Employed	08/11/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$270.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Tomie Green <hr/> Mailing Address 114 Pine Island Dr <hr/> City, State, Zip Code Jackson, MS 39206-3234 <hr/> Name of Employer (Required) Not Employed	08/21/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$665.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Dorsey R. Carson Jr <hr/> Mailing Address 2431 Lake Cir <hr/> City, State, Zip Code Jackson, MS 39211-6622 <hr/> Name of Employer (Required) Carson Law Group	08/31/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$6,500.00

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 Lana Richardson Mailing Address 10611 County Road 500 City, State, Zip Code Ripley, MS 38663-9199 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/22/2023	\$50.00
Aggregate year-to-date		\$655.00
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 Mary Macwade Mailing Address 4234 Brussels Dr City, State, Zip Code Jackson, MS 39211-6105 Name of Employer (Required) St. Philip's Episcopal Church Occupation (Required) Episcopal Priest	09/22/2023	\$1,000.00
Aggregate year-to-date		\$3,500.00
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 Neilson Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/02/2023	\$275.00
Aggregate year-to-date		\$425.00
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 L. Levin Mailing Address 451 Bordeaux Cv City, State, Zip Code Biloxi, MS 39531-2296 Name of Employer (Required) Memorial Health Group Occupation (Required) Physician	09/02/2023	\$10.00
Aggregate year-to-date		\$260.00

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 Elizabeth West Mailing Address PO Box 40 City, State, Zip Code Pickwick Dam, TN 38365-0040 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/12/2023	\$50.00
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 Suzanne Walsh Mailing Address 2725 White Wing Ln City, State, Zip Code West Palm Beach, FL 33409-2032 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/23/2023	\$10.00
Aggregate year-to-date		\$203.00
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 Dannie Ball Mailing Address 104 Bay View Ct City, State, Zip Code Bay Saint Louis, MS 39520-4602 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/03/2023	\$25.00
Aggregate year-to-date		\$220.00
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. Dudley Butler Mailing Address 499 Breakwater Dr City, State, Zip Code Benton, MS 39039-9000 Name of Employer (Required) Butler Farm & Ranch Law Group Occupation (Required) Attorney	08/03/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Janis Shibata Mailing Address 10433 Larwin Ave City, State, Zip Code Chatsworth, CA 91311-2059 Name of Employer (Required) Self Employed Occupation (Required) Insurance Broker	08/05/2023	\$50.00
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 Sumati Thomas Mailing Address 4146 Crestview Pl City, State, Zip Code Jackson, MS 39211-6404 Name of Employer (Required) Change Research Occupation (Required) Analyst	08/15/2023	\$10.00
Aggregate year-to-date		\$388.60
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 Bethany Theilman Mailing Address 131 Redbud Trl City, State, Zip Code Brandon, MS 39047-6402 Name of Employer (Required) Diabetes Foundation of MS Occupation (Required) Secretary	08/25/2023	\$25.00
Aggregate year-to-date		\$217.10
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 Eric Beamon Mailing Address 15055 Swan Lake Blvd City, State, Zip Code Gulfport, MS 39503-8613 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/05/2023	\$10.00
Aggregate year-to-date		\$260.00

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 Barbara H. Criswell	09/06/2023	\$200.00
Mailing Address 201 Glen Haven Dr		
City, State, Zip Code Columbus, MS 39705-1616		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$350.00
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 Denotee Martin	09/16/2023	\$25.00
Mailing Address 1009 County Road 65		
City, State, Zip Code New Albany, MS 38652-8923		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$532.50
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 Nan Shiverdecker	08/07/2023	\$100.00
Mailing Address 306 Alabama St		
City, State, Zip Code New Albany, MS 38652-4137		
Name of Employer (Required) NEMiss.News		
Occupation (Required) Writer	Aggregate year-to-date	\$650.00
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 Mary Gamble	09/07/2023	\$500.00
Mailing Address 2010 Merlin Ct		
City, State, Zip Code Naples, FL 34105-8517		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$500.00

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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5602 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$50.00
Aggregate year-to-date		\$325.00
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 Owen Fairbank Mailing Address 815 Van Buren St City, State, Zip Code Port Townsend, WA 98368-8052 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/28/2023	\$250.00
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 Paige Lawrence Mailing Address 23213 MS-19 City, State, Zip Code Kosciusko, MS 39090 Name of Employer (Required) University of Mississippi Medical Center Occupation (Required) Registered Nurse	09/29/2023	\$100.00
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 P. Sullivan Mailing Address 1239 Winwood Cv City, State, Zip Code Tupelo, MS 38801-6472 Name of Employer (Required) Sullivan Insurance Solutions Occupation (Required) Business Owner	09/29/2023	\$500.00
Aggregate year-to-date		\$1,000.00

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 Kathryn J. Irby	08/09/2023	\$50.00
Mailing Address 730 Tegarden Rd		
City, State, Zip Code Gulfport, MS 39507-2625		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$468.25
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 Jacqueline Amos	08/29/2023	\$25.00
Mailing Address 168 Kilkenny Blvd		
City, State, Zip Code Jackson, MS 39209-3744		
Name of Employer (Required) The City of Canton		
Occupation (Required) City Administrator	Aggregate year-to-date	\$305.00
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 Mary Vi Risser	09/30/2023	\$100.00
Mailing Address 377 County Road 653B		
City, State, Zip Code Saltillo, MS 38866-5716		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,400.00
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 Long	08/30/2023	\$50.00
Mailing Address 1496 W Lakeshore Dr		
City, State, Zip Code Starkville, MS 39759-6343		
Name of Employer (Required) Mississippi State University		
Occupation (Required) Professor	Aggregate year-to-date	\$360.00

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 Cornelis Gispen Mailing Address 1112 S 11th St City, State, Zip Code Oxford, MS 38655-4610 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/01/2023	\$100.00
Aggregate year-to-date		\$2,175.00
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$25.00
Aggregate year-to-date		\$833.50
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 Kathy Olsen Mailing Address 4416 Sunnybrook Dr City, State, Zip Code Nashville, TN 37205-3860 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/22/2023	\$10,000.00
Aggregate year-to-date		\$105,000.00
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 Patterson Mailing Address 203 Jefferson Rdg City, State, Zip Code Ridgeland, MS 39157-9100 Name of Employer (Required) Jackson Hinds Comprehensive Health Center Occupation (Required) Dentist	09/22/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Barbara Austin Mailing Address 1435 Saint Ann St City, State, Zip Code Jackson, MS 39202-1847 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/12/2023	\$50.00
Aggregate year-to-date		\$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 Andrea Walker Mailing Address 1041 County Road 202 City, State, Zip Code Abbeville, MS 38601-9700 Name of Employer (Required) American Addiction Center Occupation (Required) Registered Nurse	09/12/2023	\$25.00
Aggregate year-to-date		\$225.00
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/03/2023	\$40.00
Aggregate year-to-date		\$833.50
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 Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/03/2023	\$10.00
Aggregate year-to-date		\$796.00

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 Bruce Bellande Mailing Address 318 N 16th St City, State, Zip Code Oxford, MS 38655-3712 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/24/2023	\$100.00
Aggregate year-to-date		\$300.00
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 Gregory E. Brock Mailing Address 208 W Marion Ave City, State, Zip Code Crystal Springs, MS 39059-2714 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/24/2023	\$1,000.00
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 R. Bradley Mailing Address 107 Philip Rd City, State, Zip Code Oxford, MS 38655-2013 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/14/2023	\$1,000.00
Aggregate year-to-date		\$10,260.00
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. J. Jones Mailing Address PO Box 23 City, State, Zip Code Coahoma, MS 38617-0023 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/04/2023	\$25.00
Aggregate year-to-date		\$225.00

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 Louise Cole Mailing Address 518 N Church St City, State, Zip Code Okolona, MS 38860-1017 Name of Employer (Required) Brandon Presley for Governor	09/25/2023	\$25.00
Occupation (Required) Field Organizer	Aggregate year-to-date	\$535.00
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 S. Allan Alexander Mailing Address 526 N 11th St City, State, Zip Code Oxford, MS 38655-3108 Name of Employer (Required) Not Employed	09/15/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,100.00
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 Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed	08/16/2023	\$10.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$335.00
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 Rogers Mailing Address 831 Cedar Lake Rd City, State, Zip Code Biloxi, MS 39532-4671 Name of Employer (Required) Not Employed	08/16/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,200.00

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 Linda J. Davis Mailing Address 179 Little Sawmill Rd City, State, Zip Code Laurel, MS 39443-9157 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/26/2023	\$25.00
Aggregate year-to-date		\$600.00
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 B. Atkins Mailing Address 11 County Road 3064 City, State, Zip Code Oxford, MS 38655-8354 Name of Employer (Required) University of Mississippi Occupation (Required) Professor	09/06/2023	\$200.00
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 Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/16/2023	\$25.00
Aggregate year-to-date		\$680.50
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 Doug Hill Mailing Address 136 Courtland Dr City, State, Zip Code Saltillo, MS 38866-6007 Name of Employer (Required) Cardiology Associates Occupation (Required) Physician	09/27/2023	\$250.00
Aggregate year-to-date		\$750.00

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 Leslie Fye	08/07/2023	\$50.00
Mailing Address 5439 Ennis Rd		
City, State, Zip Code Starkville, MS 39759-4861		
Name of Employer (Required) Self Employed		
Occupation (Required) Licensed Professional Counselor	Aggregate year-to-date	\$795.00
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 Lee Carson	08/27/2023	\$100.00
Mailing Address 2288 Waggoner Rd		
City, State, Zip Code Carthage, MS 39051-9303		
Name of Employer (Required) N. L. Carson Construction Co.		
Occupation (Required) Construction	Aggregate year-to-date	\$2,700.00
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 Staci Morgan	09/07/2023	\$100.00
Mailing Address 6946 Weir Panhandle Rd		
City, State, Zip Code Weir, MS 39772		
Name of Employer (Required) Self Employed		
Occupation (Required) Conference Director	Aggregate year-to-date	\$1,339.15
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 T. Mark Sledge	08/28/2023	\$1,000.00
Mailing Address 587 Highland Colony Pkwy		
City, State, Zip Code Ridgeland, MS 39157-8784		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$2,000.00

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 Hugh B. Jones Jr Mailing Address PO Box 1408 City, State, Zip Code Ridgeland, MS 39158-1408 Name of Employer (Required) Not Employed	09/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Allan Benglen Mailing Address 1725 Forrest Hill Dr City, State, Zip Code Columbus, MS 39701-3530 Name of Employer (Required) Not Employed	08/09/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,550.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kathleen Coward Mailing Address 6245 Woodland Cir City, State, Zip Code Meridian, MS 39305-9082 Name of Employer (Required) Not Employed	08/29/2023	\$35.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elizabeth Jenkins-Joffe Mailing Address 3825 Legation St NW City, State, Zip Code Washington, DC 20015-2701 Name of Employer (Required) Not Employed	09/20/2023	\$75.00
Occupation (Required) Retired	Aggregate year-to-date	\$510.00

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 Jane D. Thomley Mailing Address 18 Bridgewater Dr City, State, Zip Code Hattiesburg, MS 39402-1667 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	07/30/2023	\$250.00
Aggregate year-to-date		\$400.00
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 T. Edge Mailing Address 913 S 11th St City, State, Zip Code Oxford, MS 38655-4315 Name of Employer (Required) University of Mississippi Occupation (Required) Teacher	08/10/2023	\$250.00
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 Joey Dumas Mailing Address 14239 Perdido Key Dr City, State, Zip Code Pensacola, FL 32507-5236 Name of Employer (Required) Dumas Law Firm, LLC Occupation (Required) Attorney	08/20/2023	\$5,000.00
Aggregate year-to-date		\$17,500.00
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 Eugene Perrier Mailing Address 5540 Gibson Rd City, State, Zip Code Vicksburg, MS 39180-6318 Name of Employer (Required) Self Employed Occupation (Required) Attorney	07/31/2023	\$25.00
Aggregate year-to-date		\$300.00

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 Susan Weatherholt Mailing Address 207 Greenfield Pl City, State, Zip Code Brandon, MS 39047-9007 Name of Employer (Required) Not Employed	09/22/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$265.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Michael T. Kayes Mailing Address 510 Evergreen Dr City, State, Zip Code Long Beach, MS 39560-3228 Name of Employer (Required) Not Employed	09/22/2023	\$200.00
Occupation (Required) Not Employed	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) _____		
Full Name E. K. Pruitt Mailing Address 4217 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3420 Name of Employer (Required) Not Employed	08/22/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	08/22/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$748.47

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 Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy	09/02/2023	\$25.00
Aggregate year-to-date		\$780.00
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 Suzanne H. Robinson Mailing Address 206 Wood St City, State, Zip Code Water Valley, MS 38965-2603 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/12/2023	\$10.00
Aggregate year-to-date		\$1,425.00
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 Dave Cooley Mailing Address 6751 Quiet Ln City, State, Zip Code Brentwood, TN 37027-8308 Name of Employer (Required) Cooley Public Strategies Occupation (Required) Consultant	09/12/2023	\$250.00
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 Robbie D. Fisher Mailing Address 723 W Lee St City, State, Zip Code Water Valley, MS 38965-1413 Name of Employer (Required) Fisher Productions, LLC Occupation (Required) Business Owner	09/13/2023	\$100.00
Aggregate year-to-date		\$750.00

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 Jonathan Harris Mailing Address 9 Marie Ave City, State, Zip Code Cambridge, MA 02139-1002 Name of Employer (Required) Tufts University	09/24/2023	\$10.00
Occupation (Required) Researcher	Aggregate year-to-date	\$247.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Daniel Leist Mailing Address 7 Paul Rd City, State, Zip Code Medford, MA 02155-2514 Name of Employer (Required) Not Employed	09/24/2023	\$500.00
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) _____		
Full Name Jonathan Hamilton Mailing Address 4100 Warren St NW City, State, Zip Code Washington, DC 20016-2136 Name of Employer (Required) White & Case LLP	08/24/2023	\$2,500.00
Occupation (Required) Attorney	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) _____		
Full Name Gary Thompson Mailing Address 4742 5th Ave City, State, Zip Code Meridian, MS 39305-2823 Name of Employer (Required) Not Employed	09/25/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

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 Eugene Bramlett Jr Mailing Address 1123 College St City, State, Zip Code Columbus, MS 39701-5810 Name of Employer (Required) Covenant United Methodist Church	09/16/2023	\$25.00
Occupation (Required) Religious Worker	Aggregate year-to-date	\$1,175.00
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 Regina Quinn Mailing Address 728 N Congress St City, State, Zip Code Jackson, MS 39202-3008 Name of Employer (Required) Self Employed	08/07/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$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 Dorsey R. Carson Jr Mailing Address 2431 Lake Cir City, State, Zip Code Jackson, MS 39211-6622 Name of Employer (Required) Carson Law Group	09/18/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$6,500.00
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 Nancy Groninger Mailing Address 5361 Saratoga St City, State, Zip Code Yorba Linda, CA 92886-4825 Name of Employer (Required) Not Employed	09/28/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$255.00

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 Rozier Mailing Address 303 Woodland Hills Dr City, State, Zip Code Oxford, MS 38655-8429 Name of Employer (Required) MGC Law	08/18/2023	\$1,000.00
Occupation (Required) Attorney	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 John Brombacher Mailing Address 108 Coachmans Rd City, State, Zip Code Madison, MS 39110-9227 Name of Employer (Required) Not Employed	08/29/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$800.00
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 R. Bradley Mailing Address 107 Philip Rd City, State, Zip Code Oxford, MS 38655-2013 Name of Employer (Required) Not Employed	09/30/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$10,260.00
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 O'Brien Mailing Address 6007 SW 240th St City, State, Zip Code Vashon, WA 98070-7247 Name of Employer (Required) Health Net	07/30/2023	\$100.00
Occupation (Required) COO	Aggregate year-to-date	\$950.00

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 Dianne Martin	08/30/2023	\$100.00
Mailing Address 211 Pebble Brook Dr		
City, State, Zip Code Clinton, MS 39056-5819		
Name of Employer (Required) State of Mississippi		
Occupation (Required) Developer	Aggregate year-to-date	\$654.30
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Sarah S. Landry	08/30/2023	\$25.00
Mailing Address 17251 Coventry Estates Blvd		
City, State, Zip Code Diberville, MS 39540-3317		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Theresa Guthrie	09/10/2023	\$5.00
Mailing Address 661 Arm Rd		
City, State, Zip Code Silver Creek, MS 39663-2423		
Name of Employer (Required) Harrell & Nowak, LLC		
Occupation (Required) Office Manager	Aggregate year-to-date	\$236.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Larry Or Vaughn	08/31/2023	\$100.00
Mailing Address 259 Odom Rd		
City, State, Zip Code Steens, MS 39766-9687		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00

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 Beth Stoor Mailing Address 9314 SW 97th Ln City, State, Zip Code Ocala, FL 34481-7573 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$20.00
Aggregate year-to-date		\$295.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Barry Powell Mailing Address 600 S Pear Orchard Rd City, State, Zip Code Ridgeland, MS 39157-4225 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/22/2023	\$500.00
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) _____ Full Name Faye Cox Mailing Address 704 Northpointe Cv City, State, Zip Code Oxford, MS 38655-7708 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/12/2023	\$25.00
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) _____ Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/02/2023	\$25.00
Aggregate year-to-date		\$833.50

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 W. R. Pinkston Mailing Address 1132 Windsor Rd City, State, Zip Code Teaneck, NJ 07666-2724 Name of Employer (Required) Morgan State University Occupation (Required) Educator	09/12/2023	\$250.00
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 Michael Ubertini Mailing Address 11 Helen Ln City, State, Zip Code Walpole, MA 02081-2046 Name of Employer (Required) Long and Foster Occupation (Required) Recruiter	08/13/2023	\$5.00
Aggregate year-to-date		\$285.00
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 Dennis Truax Mailing Address 913 Southgate Dr City, State, Zip Code Starkville, MS 39759-9434 Name of Employer (Required) Self Employed Occupation (Required) Engineer	09/24/2023	\$50.00
Aggregate year-to-date		\$1,671.00
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 Jopling Mailing Address 276 Santini St City, State, Zip Code Biloxi, MS 39530-2946 Name of Employer (Required) MS Center for Justice Occupation (Required) Attorney	09/14/2023	\$500.00
Aggregate year-to-date		\$2,450.00

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 Alma Walls	08/04/2023	\$100.00
Mailing Address 3887 Kenton Dr		
City, State, Zip Code Southaven, MS 38672-7225		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$3,400.00
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 Kevin Jarvis	08/04/2023	\$250.00
Mailing Address 15504 Stanley Rd		
City, State, Zip Code Vancleave, MS 39565-7759		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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 Sean Gallagher	09/25/2023	\$500.00
Mailing Address 805 Contra Costa Ave		
City, State, Zip Code Berkeley, CA 94707-1919		
Name of Employer (Required) Solar Energy Industries Association		
Occupation (Required) Solar Energy	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 Elise Gillespie	09/25/2023	\$100.00
Mailing Address 1013 S Lamar Blvd		
City, State, Zip Code Oxford, MS 38655-4739		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$575.00

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 Mari Harris <hr/> Mailing Address 330 Easterbrook St <hr/> City, State, Zip Code Bay Saint Louis, MS 39520-4449 <hr/> Name of Employer (Required) Not Employed	08/05/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$203.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Edson Griswold <hr/> Mailing Address 1699 S Trenton St <hr/> City, State, Zip Code Denver, CO 80231-5694 <hr/> Name of Employer (Required) Not Employed	08/06/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$833.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Debbie Hall <hr/> Mailing Address 127 Sesame Rd <hr/> City, State, Zip Code Tupelo, MS 38801-8615 <hr/> Name of Employer (Required) University of Mississippi	09/16/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$537.40
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Andrew Jenkins <hr/> Mailing Address 116 Highland Meadow Rd <hr/> City, State, Zip Code Flora, MS 39071-9553 <hr/> Name of Employer (Required) AJA Management & Technical Services	09/18/2023	\$1,000.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$4,850.00

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 Glen Davidson Jr Mailing Address 1123 Quail Creek Cv City, State, Zip Code Tupelo, MS 38801-7257 Name of Employer (Required) Not Employed	08/18/2023	\$33.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$258.00
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 Colby Langston Mailing Address 129 Marcie Dr City, State, Zip Code Long Beach, MS 39560-5714 Name of Employer (Required) Self Employed	08/18/2023	\$500.00
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 Ronald Janis Mailing Address 225 W 83rd St City, State, Zip Code New York, NY 10024-4952 Name of Employer (Required) Not Employed	09/08/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,250.00
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 Virginia Wilson Mailing Address 3696 High Point Dr City, State, Zip Code Memphis, TN 38122-3752 Name of Employer (Required) Epstein Becker Green	09/29/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$205.00

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 Ron Coleman <hr/> Mailing Address 316 Quail Creek Dr <hr/> City, State, Zip Code Oxford, MS 38655-6108 <hr/> Name of Employer (Required) Not Employed	09/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
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 McCready <hr/> Mailing Address 112 Pine Dr <hr/> City, State, Zip Code Ocean Springs, MS 39564-5002 <hr/> Name of Employer (Required) University of South Alabama <hr/> Occupation (Required) Teacher	09/29/2023	\$100.00
Occupation (Required) Teacher	Aggregate year-to-date	\$225.00
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 Long <hr/> Mailing Address 1496 W Lakeshore Dr <hr/> City, State, Zip Code Starkville, MS 39759-6343 <hr/> Name of Employer (Required) Mississippi State University <hr/> Occupation (Required) Professor	09/30/2023	\$50.00
Occupation (Required) Professor	Aggregate year-to-date	\$360.00
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 Bailey <hr/> Mailing Address 140 Chickasaw Dr <hr/> City, State, Zip Code West Point, MS 39773-3270 <hr/> Name of Employer (Required) Not Employed <hr/> Occupation (Required) Not Employed	07/30/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,250.00

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 Suzanne Baer Mailing Address 1000 Riverview Dr City, State, Zip Code Biloxi, MS 39532-3319 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$500.00
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 Reita E. Schmidtling Mailing Address 102 Driftwood Dr City, State, Zip Code Long Beach, MS 39560-5811 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/10/2023	\$25.00
Aggregate year-to-date		\$325.00
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 Mary Geoghegan Mailing Address 227 Greenfield Pl City, State, Zip Code Brandon, MS 39047-9007 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/21/2023	\$150.00
Aggregate year-to-date		\$950.00
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 H. Hooker Jr Mailing Address 1204 Saint Ann St City, State, Zip Code Jackson, MS 39202-2148 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/21/2023	\$500.00
Aggregate year-to-date		\$525.00

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 Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$250.00
Aggregate year-to-date		\$3,000.00
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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/22/2023	\$10.00
Aggregate year-to-date		\$880.00
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 Diane Cockrum Mailing Address 600 County Road 515 City, State, Zip Code Ripley, MS 38663-8347 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/12/2023	\$25.00
Aggregate year-to-date		\$275.00
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 Bernell McGehee Mailing Address PO Box 410 City, State, Zip Code Liberty, MS 39645-0410 Name of Employer (Required) Self Employed Occupation (Required) Accountant	09/23/2023	\$100.00
Aggregate year-to-date		\$500.00

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 Watt Bishop Mailing Address 714 N 14th St City, State, Zip Code Oxford, MS 38655-3222 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/13/2023	\$50.00
Aggregate year-to-date		\$600.00
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 Carla Kirkland Mailing Address 137 Herons Bay Cir City, State, Zip Code Madison, MS 39110-1103 Name of Employer (Required) The Kirkland Group Occupation (Required) CEO	09/13/2023	\$1,000.00
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 Benjamin Griffith Mailing Address PO Box 2248 City, State, Zip Code Oxford, MS 38655-7248 Name of Employer (Required) Griffith Law Firm Occupation (Required) Attorney	09/24/2023	\$50.00
Aggregate year-to-date		\$1,025.00
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 Kathy Davis Mailing Address 777 Shady Oaks Cir City, State, Zip Code Oxford, MS 38655-5450 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/04/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Darryl Gibbs Mailing Address 128 Livingston Dr City, State, Zip Code Madison, MS 39110-2000 Name of Employer (Required) Chhabra & Gibbs, P.A. Occupation (Required) Attorney	09/25/2023	\$250.00
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 Harold D. Copeland Mailing Address PO Box 631145 City, State, Zip Code Houston, TX 77263-1145 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/25/2023	\$25.00
Aggregate year-to-date		\$297.50
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 Stauter Mailing Address 148 Seaside Dr City, State, Zip Code Ocean Springs, MS 39564-5145 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/25/2023	\$50.00
Aggregate year-to-date		\$300.00
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 Eugene Bramlett Jr Mailing Address 1123 College St City, State, Zip Code Columbus, MS 39701-5810 Name of Employer (Required) Covenant United Methodist Church Occupation (Required) Religious Worker	09/05/2023	\$50.00
Aggregate year-to-date		\$1,175.00

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 George Q. Evans Mailing Address 321 Water Garden Ter City, State, Zip Code Madison, MS 39110-6954 Name of Employer (Required) Not Employed	09/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	08/17/2023	\$22.50
Occupation (Required) Not Employed	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) _____		
Full Name Robert Rubin Mailing Address 911 Park Ave City, State, Zip Code New York, NY 10075-0385 Name of Employer (Required) Centerview Partners	08/17/2023	\$1,000.00
Occupation (Required) Senior Counselor	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) _____		
Full Name Joan Peterman Mailing Address 1224 Ridge Rd City, State, Zip Code Perkinston, MS 39573-5925 Name of Employer (Required) Not Employed	09/07/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$230.00

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 Nancy Groninger <hr/> Mailing Address 5361 Saratoga St <hr/> City, State, Zip Code Yorba Linda, CA 92886-4825 <hr/> Name of Employer (Required) Not Employed	08/18/2023	\$33.00
Occupation (Required) Not Employed	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) _____		
Full Name George Q. Evans <hr/> Mailing Address 321 Water Garden Ter <hr/> City, State, Zip Code Madison, MS 39110-6954 <hr/> Name of Employer (Required) Not Employed	09/08/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Thomas Linenberger <hr/> Mailing Address 2584 Rue Palafox <hr/> City, State, Zip Code Biloxi, MS 39531-3733 <hr/> Name of Employer (Required) Not Employed	09/19/2023	\$200.00
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) _____		
Full Name Kathy Howard <hr/> Mailing Address 1213 Huntcliff Way <hr/> City, State, Zip Code Clinton, MS 39056-3425 <hr/> Name of Employer (Required) Not Employed	09/29/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00

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 Grisham Jr Mailing Address 2777 Kirkwood Rd City, State, Zip Code Tupelo, MS 38801-5808 Name of Employer (Required) Great American RV-Tupelo Occupation (Required) Finance Manager	09/29/2023	\$1,000.00
Aggregate year-to-date		\$3,000.00
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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/09/2023	\$25.00
Aggregate year-to-date		\$880.00
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 Conwill Mailing Address 1005 County Road 357 City, State, Zip Code New Albany, MS 38652-8981 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$50.00
Aggregate year-to-date		\$400.00
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 Geneva C. Moon Mailing Address PO Box 128 City, State, Zip Code Becker, MS 38825-0128 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$500.00
Aggregate year-to-date		\$1,000.00

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 Jane Woosley Mailing Address 618 Brampton Pl City, State, Zip Code Ridgeland, MS 39157-4195 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	07/30/2023	\$50.00
Aggregate year-to-date		\$650.00
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 Pamela Pearson Mailing Address 2301 E 13th St City, State, Zip Code Austin, TX 78702-1805 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/20/2023	\$2,500.00
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 Galloway Mailing Address 18 Cedarwood Ln City, State, Zip Code Gulfport, MS 39503-6222 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/30/2023	\$250.00
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 Mari Harris Mailing Address 330 Easterbrook St City, State, Zip Code Bay Saint Louis, MS 39520-4449 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	07/31/2023	\$50.00
Aggregate year-to-date		\$203.25

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 Anonymous Anonymous	07/31/2023	\$300.00
Mailing Address 611 Pennsylvania Ave SE		
City, State, Zip Code Washington, DC 20003-4303		
Name of Employer (Required) N/A		
Occupation (Required) N/A	Aggregate year-to-date	\$2,947.00
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 Guy Edwards	08/21/2023	\$500.00
Mailing Address 222 Governors Way		
City, State, Zip Code Brentwood, TN 37027-8933		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$600.00
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 Toni D. Cooley	08/21/2023	\$1,000.00
Mailing Address 1028 Whitsett Walk		
City, State, Zip Code Jackson, MS 39206-6158		
Name of Employer (Required) Systems Electro Coating		
Occupation (Required) Business Owner	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 Benjamin Griffith	09/01/2023	\$50.00
Mailing Address PO Box 2248		
City, State, Zip Code Oxford, MS 38655-7248		
Name of Employer (Required) Griffith Law Firm		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,025.00

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 Daniel Smith Mailing Address 4404 O Leary Ave City, State, Zip Code Pascagoula, MS 39581-2353 Name of Employer (Required) Not Employed	09/22/2023	\$500.00
Occupation (Required) Not Employed	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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5602 Name of Employer (Required) Not Employed	09/22/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
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 O'Neal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic	08/12/2023	\$100.00
Occupation (Required) Physician	Aggregate year-to-date	\$2,526.00
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 Fisher Mailing Address 1445 Broadhead School Rd City, State, Zip Code Greenville, VA 24440-1908 Name of Employer (Required) Not Employed	09/23/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00

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 Irene Mason Mailing Address 235 Pine Ridge Dr City, State, Zip Code Waveland, MS 39576-3929 Name of Employer (Required) MEBA Union	09/13/2023	\$250.00
Occupation (Required) Merchant Mariner	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 Michael O'Neal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic	09/24/2023	\$100.00
Occupation (Required) Physician	Aggregate year-to-date	\$2,526.00
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 Morgan & Morgan PLLC Mailing Address 4450 Old Canton Rd City, State, Zip Code Jackson, MS 39211-5991 Name of Employer (Required)	08/04/2023	\$1,000.00
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 Safe and Sound Home Care LLC Mailing Address PO Box 2136 City, State, Zip Code Oxford, MS 38655-7136 Name of Employer (Required)	08/14/2023	\$1,500.00
Occupation (Required)	Aggregate year-to-date	\$1,500.00

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 Jerry Meadors <hr/> Mailing Address PO Box 369 <hr/> City, State, Zip Code Kiln, MS 39556-0369 <hr/> Name of Employer (Required) Not Employed	08/24/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lori Karny <hr/> Mailing Address 6230 Wilshire Blvd <hr/> City, State, Zip Code Los Angeles, CA 90048-5126 <hr/> Name of Employer (Required) Self Employed	08/24/2023	\$18.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$602.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Daryl Porter <hr/> Mailing Address PO Box 772 <hr/> City, State, Zip Code Summit, MS 39666-0772 <hr/> Name of Employer (Required) MS House of Representatives	09/15/2023	\$500.00
Occupation (Required) State Representative	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) _____		
Full Name Beckett Howorth <hr/> Mailing Address 921 Hayes Ave <hr/> City, State, Zip Code Oxford, MS 38655-4615 <hr/> Name of Employer (Required) Not Employed	09/25/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$725.00

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 Matt Holleman III <hr/> Mailing Address 310 Lake Castle Rd <hr/> City, State, Zip Code Madison, MS 39110-8603 <hr/> Name of Employer (Required) Galaxie Corp	08/05/2023	\$25.00
Occupation (Required) President	Aggregate year-to-date	\$208.00
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 Glenda Burns <hr/> Mailing Address PO Box 110 <hr/> City, State, Zip Code Okolona, MS 38860-0110 <hr/> Name of Employer (Required) Bank of Okolona	08/15/2023	\$50.00
Occupation (Required) Loan Operations Officer	Aggregate year-to-date	\$335.00
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 Miotke <hr/> Mailing Address 1626 Francisco St <hr/> City, State, Zip Code Berkeley, CA 94703-1255 <hr/> Name of Employer (Required) Self Employed	09/05/2023	\$5.00
Occupation (Required) Musician	Aggregate year-to-date	\$518.50
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 Rozier <hr/> Mailing Address 303 Woodland Hills Dr <hr/> City, State, Zip Code Oxford, MS 38655-8429 <hr/> Name of Employer (Required) MGC Law	09/15/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,000.00

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 Bailey Mailing Address 705 N Overlook Dr City, State, Zip Code Alexandria, VA 22305-1223 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/26/2023	\$100.00
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 C. Jackson Williams Mailing Address PO Box 69 City, State, Zip Code Taylor, MS 38673-0069 Name of Employer (Required) University of Mississippi Occupation (Required) Teacher	09/26/2023	\$25.00
Aggregate year-to-date		\$325.00
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 Haahr Mailing Address 4222 22nd St City, State, Zip Code San Francisco, CA 94114-3110 Name of Employer (Required) Google Occupation (Required) Programmer	08/06/2023	\$2,500.00
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 Barney McCann Mailing Address 1081 Raymond Bolton Rd City, State, Zip Code Raymond, MS 39154-9394 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/16/2023	\$25.00
Aggregate year-to-date		\$243.00

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 Ron Coleman <hr/> Mailing Address 316 Quail Creek Dr <hr/> City, State, Zip Code Oxford, MS 38655-6108 <hr/> Name of Employer (Required) Not Employed	08/07/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ouida Meruvia <hr/> Mailing Address 1 Dr Ml King Jr Ave <hr/> City, State, Zip Code Memphis, TN 38103-1766 <hr/> Name of Employer (Required) Social Security Administration	08/17/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ann Rabalais <hr/> Mailing Address 132 Sara Fox Dr <hr/> City, State, Zip Code Brandon, MS 39047-5526 <hr/> Name of Employer (Required) Not Employed	09/17/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$307.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Douglas Masterson <hr/> Mailing Address 43 Palm Tree Loop <hr/> City, State, Zip Code Petal, MS 39465-9251 <hr/> Name of Employer (Required) University of Southern Mississippi	09/28/2023	\$25.00
Occupation (Required) Chemist	Aggregate year-to-date	\$565.00

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 Karen Smith <hr/> Mailing Address 14624 S Vandalia Ave <hr/> City, State, Zip Code Bixby, OK 74008-3754 <hr/> Name of Employer (Required) Not Employed	08/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Hugh Parker <hr/> Mailing Address 113 Royal Garden Ter <hr/> City, State, Zip Code Madison, MS 39110-7635 <hr/> Name of Employer (Required) Not Employed	09/19/2023	\$2,500.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Michael Collins <hr/> Mailing Address 1826 Ray St <hr/> City, State, Zip Code Ocean Springs, MS 39564-2930 <hr/> Name of Employer (Required) Not Employed	08/19/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$950.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name James L. Barksdale <hr/> Mailing Address 800 Woodlands Pkwy <hr/> City, State, Zip Code Ridgeland, MS 39157-5200 <hr/> Name of Employer (Required) Self Employed	08/29/2023	\$10,000.00
Occupation (Required) Investor	Aggregate year-to-date	\$60,000.00

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 Lele W. Gillespie	09/20/2023	\$250.00
Mailing Address 1013 S Lamar Blvd		
City, State, Zip Code Oxford, MS 38655-4739		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Project Coordinator	Aggregate year-to-date	\$2,100.00
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 Griffith	09/30/2023	\$50.00
Mailing Address PO Box 2248		
City, State, Zip Code Oxford, MS 38655-7248		
Name of Employer (Required) Griffith Law Firm		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,025.00
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 Hamilton	09/30/2023	\$25.00
Mailing Address 707 Randolph Ave SE		
City, State, Zip Code Huntsville, AL 35801-3606		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$748.47
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 Conwill	07/30/2023	\$25.00
Mailing Address 1005 County Road 357		
City, State, Zip Code New Albany, MS 38652-8981		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00

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 William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$10.00
Aggregate year-to-date		\$285.00
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 Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$5.00
Aggregate year-to-date		\$478.00
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 Brenda J. West Mailing Address 201 Park Dr City, State, Zip Code Oxford, MS 38655-2816 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$100.00
Aggregate year-to-date		\$600.00
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 Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/30/2023	\$1,000.00
Aggregate year-to-date		\$3,400.00

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 Knox Walkup Mailing Address 3710 Richland Ave City, State, Zip Code Nashville, TN 37205-2438 Name of Employer (Required) Wyatt, Tarrant & Combs LP Occupation (Required) Attorney	09/10/2023	\$250.00
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 Derek Rusch Mailing Address 1066th St City, State, Zip Code Oakland, CA 94608 Name of Employer (Required) Self Employed Occupation (Required) Contractor	08/31/2023	\$1,000.00
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 Kyle McDaniel Mailing Address 2741 Calkins Rd City, State, Zip Code Herndon, VA 20171-2002 Name of Employer (Required) Jet Aviation Occupation (Required) Pilot	08/31/2023	\$1,000.00
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 Ethel Truly Mailing Address 414 S Rankin St City, State, Zip Code Natchez, MS 39120-3539 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/02/2023	\$50.00
Aggregate year-to-date		\$550.00

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 Lee Shelton <hr/> Mailing Address 1317 Wilson St <hr/> City, State, Zip Code Tupelo, MS 38804-6017 <hr/> Name of Employer (Required) General Services Administration	08/22/2023	\$500.00
Occupation (Required) Regional Administrator	Aggregate year-to-date	\$4,586.39
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mari Harris <hr/> Mailing Address 330 Easterbrook St <hr/> City, State, Zip Code Bay Saint Louis, MS 39520-4449 <hr/> Name of Employer (Required) Not Employed	09/24/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$203.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lori Karny <hr/> Mailing Address 6230 Wilshire Blvd <hr/> City, State, Zip Code Los Angeles, CA 90048-5126 <hr/> Name of Employer (Required) Self Employed	08/15/2023	\$18.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$602.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Margaret Thomas <hr/> Mailing Address 153 Timberton Dr <hr/> City, State, Zip Code Hattiesburg, MS 39401-8209 <hr/> Name of Employer (Required) Not Employed	08/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$722.00

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 Karen K. Sawyer <hr/> Mailing Address 150 Spence Dr <hr/> City, State, Zip Code Pass Christian, MS 39571-4839 <hr/> Name of Employer (Required) Not Employed	09/26/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Edson Griswold <hr/> Mailing Address 1699 S Trenton St <hr/> City, State, Zip Code Denver, CO 80231-5694 <hr/> Name of Employer (Required) Not Employed	08/06/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$833.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Laura Hamilton <hr/> Mailing Address 707 Randolph Ave SE <hr/> City, State, Zip Code Huntsville, AL 35801-3606 <hr/> Name of Employer (Required) Not Employed	09/06/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$748.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Nan Shiverdecker <hr/> Mailing Address 306 Alabama St <hr/> City, State, Zip Code New Albany, MS 38652-4137 <hr/> Name of Employer (Required) NEMiss.News	09/27/2023	\$100.00
Occupation (Required) Writer	Aggregate year-to-date	\$650.00

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 Caleb Dana Mailing Address 103 Pinetrail Pl City, State, Zip Code Madison, MS 39110-8008 Name of Employer (Required) Not Employed	08/07/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$247.00
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 W. Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code Madison, MS 39110-7494 Name of Employer (Required) Bradley Arant	08/17/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$875.00
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 Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed	08/27/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$796.00
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 Rhodes Mailing Address 28 Hyde Ave City, State, Zip Code Newton, MA 02458 Name of Employer (Required) Atlas Venture	09/18/2023	\$500.00
Occupation (Required) Biotech	Aggregate year-to-date	\$500.00

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 Wayne L. Gray Mailing Address 520 College Hill Rd City, State, Zip Code Oxford, MS 38655-2000 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/18/2023	\$100.00
Aggregate year-to-date		\$310.00
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 Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/28/2023	\$25.00
Aggregate year-to-date		\$748.47
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 Claire Levine Mailing Address 6400 N Montana Ave City, State, Zip Code Portland, OR 97217-4879 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/29/2023	\$25.00
Aggregate year-to-date		\$475.00
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 Stauter Mailing Address 148 Seaside Dr City, State, Zip Code Ocean Springs, MS 39564-5145 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/20/2023	\$50.00
Aggregate year-to-date		\$300.00

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 Fred Kency Jr	09/20/2023	\$100.00
Mailing Address 129 Wethersfield Dr		
City, State, Zip Code Madison, MS 39110-6931		
Name of Employer (Required) Kency Medical Services PLLC		
Occupation (Required) Physician	Aggregate year-to-date	\$410.00
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 Amdor	09/30/2023	\$250.00
Mailing Address 3642 S Prairie Ave		
City, State, Zip Code Chicago, IL 60653-1009		
Name of Employer (Required) Nekritz Amdor Andersson Group		
Occupation (Required) Consultant	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 Ed Hargett	08/30/2023	\$100.00
Mailing Address 1007 Hargett Dr		
City, State, Zip Code Charleston, MS 38921-9726		
Name of Employer (Required) Self Employed		
Occupation (Required) Corrections	Aggregate year-to-date	\$1,200.00
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 Keith Johnson	08/31/2023	\$50.00
Mailing Address PO Box 421		
City, State, Zip Code Nesbit, MS 38651-0421		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,150.00

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 Marjorie Williams <hr/> Mailing Address 505 Ward Ave <hr/> City, State, Zip Code Ocean Springs, MS 39564-4844 <hr/> Name of Employer (Required) Not Employed	08/12/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$257.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Blakely Fender <hr/> Mailing Address 2233 E Manor Dr <hr/> City, State, Zip Code Jackson, MS 39211-6150 <hr/> Name of Employer (Required) Millsaps College	08/22/2023	\$250.00
Occupation (Required) Economist	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) _____		
Full Name John Wages <hr/> Mailing Address 138 Road 199 <hr/> City, State, Zip Code Tupelo, MS 38801-7809 <hr/> Name of Employer (Required) Panorama Research, Inc.	08/03/2023	\$50.00
Occupation (Required) Research Scientist	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Laura Hamilton <hr/> Mailing Address 707 Randolph Ave SE <hr/> City, State, Zip Code Huntsville, AL 35801-3606 <hr/> Name of Employer (Required) Not Employed	08/03/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$748.47

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 Bertis Downs Mailing Address PO Box 1963 City, State, Zip Code Athens, GA 30603-1963 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/23/2023	\$250.00
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 R. Wilson Mailing Address 114 Leighton Rd City, State, Zip Code Oxford, MS 38655-2010 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/14/2023	\$50.00
Aggregate year-to-date		\$750.00
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 Ivy Whitlatch Mailing Address 1117 Prince St City, State, Zip Code Alexandria, VA 22314-2934 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/14/2023	\$2,000.00
Aggregate year-to-date		\$3,000.00
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 Dale Riser Mailing Address 605 Tuscan Valley Dr City, State, Zip Code Oxford, MS 38655-9324 Name of Employer (Required) Beard + Riser Architects Occupation (Required) Architect	08/25/2023	\$25.00
Aggregate year-to-date		\$280.00

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 Charles Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/26/2023	\$45.71
Aggregate year-to-date		\$1,061.50
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 Suzanne Stuart Mailing Address 143 Camino Don Miguel City, State, Zip Code Orinda, CA 94563-1709 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/26/2023	\$1,000.00
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 Brombacher Mailing Address 108 Coachmans Rd City, State, Zip Code Madison, MS 39110-9227 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/27/2023	\$50.00
Aggregate year-to-date		\$800.00
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 Mary Entrekin Mailing Address 129 Whispering Oaks Xing City, State, Zip Code Pearl, MS 39208-4152 Name of Employer (Required) United Methodist Church Occupation (Required) Compliance Analyst	09/27/2023	\$10.00
Aggregate year-to-date		\$380.60

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 Weaver Mailing Address 1320 Belvoir Cir City, State, Zip Code Jackson, MS 39202-1268 Name of Employer (Required) Weaver Architecture	09/28/2023	\$250.00
Occupation (Required) Architect	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 Sandra West Mailing Address 5535 Marblehead Dr City, State, Zip Code Jackson, MS 39211-4249 Name of Employer (Required) Not Employed	09/28/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$650.00
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 Stephen Baylot Mailing Address 9269 Highway 18 City, State, Zip Code Raymond, MS 39154-8914 Name of Employer (Required) Mardi Gras Motors	09/18/2023	\$500.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$1,400.00
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 Or Vaughn Mailing Address 259 Odom Rd City, State, Zip Code Steens, MS 39766-9687 Name of Employer (Required) Not Employed	08/09/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00

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 Raleigh Byars <hr/> Mailing Address 48 County Road 229 <hr/> City, State, Zip Code Oxford, MS 38655-5800 <hr/> Name of Employer (Required) Not Employed	09/20/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$885.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elizabeth Payne <hr/> Mailing Address 633 Park Dr <hr/> City, State, Zip Code Oxford, MS 38655-2824 <hr/> Name of Employer (Required) Not Employed	09/21/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$4,025.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Edson Griswold <hr/> Mailing Address 1699 S Trenton St <hr/> City, State, Zip Code Denver, CO 80231-5694 <hr/> Name of Employer (Required) Not Employed	08/01/2023	\$20.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$833.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name David Fisher <hr/> Mailing Address 1445 Broadhead School Rd <hr/> City, State, Zip Code Greenville, VA 24440-1908 <hr/> Name of Employer (Required) Not Employed	09/11/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00

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 George Q. Evans	09/22/2023	\$25.00
Mailing Address 321 Water Garden Ter		
City, State, Zip Code Madison, MS 39110-6954		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$425.00
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 Ethel Truly	09/02/2023	\$50.00
Mailing Address 414 S Rankin St		
City, State, Zip Code Natchez, MS 39120-3539		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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 Penelope Tose	09/12/2023	\$100.00
Mailing Address 551 S Valley Rd		
City, State, Zip Code Poplarville, MS 39470-6256		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$950.00
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 Andrea Walker	08/03/2023	\$25.00
Mailing Address 1041 County Road 202		
City, State, Zip Code Abbeville, MS 38601-9700		
Name of Employer (Required) American Addiction Center		
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$225.00

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 Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed	08/03/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$478.00
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 Pamela Banks Mailing Address 25 Saint Andrews Dr City, State, Zip Code Jackson, MS 39211-2438 Name of Employer (Required) Jackson State University	08/23/2023	\$250.00
Occupation (Required) Psychologist	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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	09/24/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
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 Carter Mailing Address 2615 Blackfoot Rd City, State, Zip Code Vanceleave, MS 39565-8447 Name of Employer (Required) Not Employed	08/04/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$350.00

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 Thomas Adams	08/24/2023	\$33.00
Mailing Address 4527 Union Ave		
City, State, Zip Code Nettleton, MS 38858-6037		
Name of Employer (Required) MS Public Service Commission		
Occupation (Required) Chief Investigator	Aggregate year-to-date	\$223.00
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 Gambetta	09/04/2023	\$10.00
Mailing Address 130 Harvesters Sq		
City, State, Zip Code Tupelo, MS 38801-9510		
Name of Employer (Required) Mueller Co.		
Occupation (Required) Engineer	Aggregate year-to-date	\$402.50
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 Lawhead	08/25/2023	\$25.00
Mailing Address 718 S 8th St		
City, State, Zip Code Oxford, MS 38655-4306		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
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 Sarah O'Neill	09/15/2023	\$2,500.00
Mailing Address 79 Washington Pl		
City, State, Zip Code New York, NY 10011-9137		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$2,500.00

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 Karen Smith	09/26/2023	\$25.00
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Linda J. Davis	09/27/2023	\$50.00
Mailing Address 179 Little Sawmill Rd		
City, State, Zip Code Laurel, MS 39443-9157		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00
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 Elias	09/28/2023	\$500.00
Mailing Address 1211 Van St SE		
City, State, Zip Code Washington, DC 20003-4678		
Name of Employer (Required) CleanCapital		
Occupation (Required) Vice President	Aggregate year-to-date	\$750.00
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 Anthony Baggett	09/28/2023	\$100.00
Mailing Address 104 N Broadway St		
City, State, Zip Code Tupelo, MS 38804-3967		
Name of Employer (Required) Busted Spring, LLC		
Occupation (Required) Web Developer	Aggregate year-to-date	\$455.00

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 Debra Hilgeman Mailing Address 1000 38th Ave City, State, Zip Code Gulfport, MS 39501-1628 Name of Employer (Required) Gaming Marketing Inc.	08/08/2023	\$250.00
Occupation (Required) Research	Aggregate year-to-date	\$281.00
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 N. Palmer Mailing Address PO Box 3747 City, State, Zip Code Jackson, MS 39207-3747 Name of Employer (Required) Gulf South Capital	08/08/2023	\$500.00
Occupation (Required) Chairman	Aggregate year-to-date	\$25,500.00
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 Baler Mailing Address 3000 Pineland Dr City, State, Zip Code Gulfport, MS 39501-6239 Name of Employer (Required) Not Employed	08/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$270.00
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 Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed	09/09/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,400.00

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 Ballard	09/20/2023	\$5.00
Mailing Address 142 Road 598		
City, State, Zip Code Plantersville, MS 38862-4901		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$478.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joseph Kennedy	09/30/2023	\$1,000.00
Mailing Address 106 Waban Hill Rd		
City, State, Zip Code Chestnut Hill, MA 02467-1048		
Name of Employer (Required) Citizens Energy		
Occupation (Required) President	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) _____		
Full Name Karen Smith	09/30/2023	\$25.00
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kathryn J. Irby	09/30/2023	\$75.00
Mailing Address 730 Tegarden Rd		
City, State, Zip Code Gulfport, MS 39507-2625		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$468.25

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 Ann J. Abadie Mailing Address 2238 Lee Loop City, State, Zip Code Oxford, MS 38655-4920 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/30/2023	\$25.00
Aggregate year-to-date		\$790.00
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 Jacob Knight Mailing Address 6873 Sweetclover Dr City, State, Zip Code Ocean Springs, MS 39564-5079 Name of Employer (Required) JSR Micro Occupation (Required) Software Engineer	08/30/2023	\$50.00
Aggregate year-to-date		\$350.00
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 Reilly Morse Mailing Address 929 Bridge St City, State, Zip Code Gulfport, MS 39507-3432 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/21/2023	\$50.00
Aggregate year-to-date		\$1,825.00
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 Salmon Mailing Address 43 Holly Way City, State, Zip Code Bridgeton, NJ 08302-7143 Name of Employer (Required) Salmon Ventures, Ltd. Occupation (Required) Government Relations	07/31/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Gloria Williamson	09/22/2023	\$10.00
Mailing Address 521 Holland Ave		
City, State, Zip Code Philadelphia, MS 39350-2437		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$7,010.00
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 Raleigh Byars	08/03/2023	\$10.00
Mailing Address 48 County Road 229		
City, State, Zip Code Oxford, MS 38655-5800		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$885.00
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 Jeanne Garforth	08/23/2023	\$100.00
Mailing Address 141 Viewpointe Dr		
City, State, Zip Code Clinton, MS 39056-6085		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$320.85
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 Barbara Powell	08/23/2023	\$250.00
Mailing Address 600 S Pear Orchard Rd		
City, State, Zip Code Ridgeland, MS 39157-4225		
Name of Employer (Required) Self Employed		
Occupation (Required) Research Consultant	Aggregate year-to-date	\$250.00

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 Andrea Walker	08/14/2023	\$50.00
Mailing Address 1041 County Road 202		
City, State, Zip Code Abbeville, MS 38601-9700		
Name of Employer (Required) American Addiction Center		
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$225.00
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 Gaudet	08/24/2023	\$100.00
Mailing Address 99 Midtown Sq		
City, State, Zip Code Hattiesburg, MS 39402-7513		
Name of Employer (Required) Wesley Medical Center		
Occupation (Required) Physician	Aggregate year-to-date	\$675.00
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 Guerry	08/05/2023	\$1,000.00
Mailing Address 3080 Svendson Dr		
City, State, Zip Code Baton Rouge, LA 70809-1572		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	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 Sarah Jones	08/05/2023	\$50.00
Mailing Address 2914 Beachview Dr		
City, State, Zip Code Ocean Springs, MS 39564-9404		
Name of Employer (Required) US Dept of the Navy		
Occupation (Required) Quality Assurance Data Manager	Aggregate year-to-date	\$350.00

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 Munford Mailing Address 5510 Wisconsin Ave City, State, Zip Code Chevy Chase, MD 20815-4403 Name of Employer (Required) Not Employed	09/06/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00
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 Andrew Mallette Mailing Address 204 Jefferson Rdg City, State, Zip Code Ridgeland, MS 39157-9101 Name of Employer (Required) Baptist Memorial Health Care	09/06/2023	\$1,000.00
Occupation (Required) Physician	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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	09/16/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
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 Raymond Mailing Address 733 Huckleberry Rd City, State, Zip Code Bay Saint Louis, MS 39520-1621 Name of Employer (Required) Self Employed	08/07/2023	\$1,000.00
Occupation (Required) Financial Consultant	Aggregate year-to-date	\$4,080.00

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 Barbara Casey Mailing Address 229 Peachtree Hills Ave NE City, State, Zip Code Atlanta, GA 30305-4413 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$50.00
Aggregate year-to-date		\$725.00
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 Ashley N. Wicks Mailing Address 63 Springridge Cir City, State, Zip Code Jackson, MS 39211-2903 Name of Employer (Required) Butler Snow Occupation (Required) Attorney	09/29/2023	\$100.00
Aggregate year-to-date		\$800.00
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 L. Kilgore Mailing Address 435 Center Ave N City, State, Zip Code Philadelphia, MS 39350-2918 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/29/2023	\$100.00
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 Kathi Tomsky Mailing Address 1018 Morton Rounds City, State, Zip Code New Albany, MS 38652-6035 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/19/2023	\$100.00
Aggregate year-to-date		\$350.00

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 O'Neal Mailing Address 27 Andiamo City, State, Zip Code Newport Coast, CA 92657-1202 Name of Employer (Required) Self Employed Occupation (Required) Attorney	07/31/2023	\$250.00
Aggregate year-to-date		\$325.00
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 Wilemon Mailing Address 103 Davis Dr City, State, Zip Code Aberdeen, MS 39730-2909 Name of Employer (Required) Euphrates Consulting Group, LLC Occupation (Required) Chemical Engineer	08/21/2023	\$25.00
Aggregate year-to-date		\$320.00
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 Frankie Blount Mailing Address 4876 Brookwood Pl City, State, Zip Code Jackson, MS 39272-5706 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$35.71
Aggregate year-to-date		\$278.55
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 Wayne T. Adkison Mailing Address 5406 Lakeview Dr City, State, Zip Code Moss Point, MS 39563-2132 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$100.00
Aggregate year-to-date		\$1,150.00

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 Kelly Coleman	08/31/2023	\$100.00
Mailing Address 66 Grandview Cir		
City, State, Zip Code Brandon, MS 39047-7398		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,100.00
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 Glen Davidson Jr	09/22/2023	\$25.00
Mailing Address 1123 Quail Creek Cv		
City, State, Zip Code Tupelo, MS 38801-7257		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$258.00
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 Douglas A. Horne	09/22/2023	\$1,000.00
Mailing Address 412 N Cedar Bluff Rd		
City, State, Zip Code Knoxville, TN 37923-3631		
Name of Employer (Required) Horne Properties, Inc.		
Occupation (Required) President	Aggregate year-to-date	\$37,000.00
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 Barbara Rankin	09/23/2023	\$50.00
Mailing Address PO Box 219		
City, State, Zip Code Braxton, MS 39044-0219		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00

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 Douglas Masterson Mailing Address 43 Palm Tree Loop City, State, Zip Code Petal, MS 39465-9251 Name of Employer (Required) University of Southern Mississippi	08/13/2023	\$10.00
Occupation (Required) Chemist	Aggregate year-to-date	\$565.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Sarah Dabney Mailing Address PO Box 89 City, State, Zip Code Pinola, MS 39149-0089 Name of Employer (Required) Strong River Camp and Farm	08/23/2023	\$500.00
Occupation (Required) Director	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) _____		
Full Name Andrew Jenkins Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Technical Services	08/14/2023	\$100.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$4,850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name David O'Donnell Mailing Address 420 Turnberry Cir City, State, Zip Code Oxford, MS 38655-2568 Name of Employer (Required) Clayton O'Donnell PLLC	08/15/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00

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 Constance Murray <hr/> Mailing Address 10 Oak Meadow Ln <hr/> City, State, Zip Code Carmel Valley, CA 93924-9455 <hr/> Name of Employer (Required) Not Employed	09/05/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$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) _____		
Full Name Barbara Austin <hr/> Mailing Address 1435 Saint Ann St <hr/> City, State, Zip Code Jackson, MS 39202-1847 <hr/> Name of Employer (Required) Not Employed	08/06/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$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) _____		
Full Name Anita Yarbrough <hr/> Mailing Address 202 Lakeside Dr <hr/> City, State, Zip Code Houston, MS 38851-7432 <hr/> Name of Employer (Required) Not Employed	08/16/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$392.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Aurelia Jones-Taylor <hr/> Mailing Address 470 Hopson Pixley Rd <hr/> City, State, Zip Code Clarksdale, MS 38614-9044 <hr/> Name of Employer (Required) Aaron Henry CHC	08/26/2023	\$100.00
Occupation (Required) CEO	Aggregate year-to-date	\$350.00

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 Bernell McGehee Mailing Address PO Box 410 City, State, Zip Code Liberty, MS 39645-0410 Name of Employer (Required) Self Employed Occupation (Required) Accountant	08/07/2023	\$100.00
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 Monie Henderson Mailing Address 3845 Majestic Oaks Dr City, State, Zip Code Oxford, MS 38655-8153 Name of Employer (Required) Square Books Occupation (Required) Book Seller	09/07/2023	\$250.00
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 Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/18/2023	\$250.00
Aggregate year-to-date		\$3,000.00
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 Thomas Ruffin Smith Mailing Address PO Box 265 City, State, Zip Code Louise, MS 39097-0265 Name of Employer (Required) Town of Louise Occupation (Required) Mayor	08/28/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00

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 Bridget Pieschel <hr/> Mailing Address 1413 College St <hr/> City, State, Zip Code Columbus, MS 39701-5904 <hr/> Name of Employer (Required) Not Employed	08/28/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$230.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Sharon E. Crane <hr/> Mailing Address 299 Bismark Rd <hr/> City, State, Zip Code Jayess, MS 39641-3588 <hr/> Name of Employer (Required) Not Employed	09/29/2023	\$300.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$475.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jean Fenwick <hr/> Mailing Address 208 S Madison St <hr/> City, State, Zip Code Kosciusko, MS 39090-3946 <hr/> Name of Employer (Required) Not Employed	09/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jacob Knight <hr/> Mailing Address 6873 Sweetclover Dr <hr/> City, State, Zip Code Ocean Springs, MS 39564-5079 <hr/> Name of Employer (Required) JSR Micro	08/09/2023	\$250.00
Occupation (Required) Software Engineer	Aggregate year-to-date	\$350.00

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 Kelly R. O'Neal Jr Mailing Address 56 J C Bryant Rd City, State, Zip Code Hattiesburg, MS 39401-8447 Name of Employer (Required) Not Employed	08/19/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Janice Walker Mailing Address 5950 B N Colony Blvd City, State, Zip Code Jackson, MS 39206-2404 Name of Employer (Required) Federal Emergency Management Agency	09/30/2023	\$100.00
Occupation (Required) Administrative Support Specialist	Aggregate year-to-date	\$625.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kathaleen Miller Mailing Address 13509 Circle G Ranch Rd City, State, Zip Code Picayune, MS 39466-9586 Name of Employer (Required) Not Employed	07/30/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Maureen McKerns Mailing Address 813 42nd Ave City, State, Zip Code Gulfport, MS 39501-1451 Name of Employer (Required) Not Employed	08/30/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00

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 Janice Walker Mailing Address 5950 B N Colony Blvd City, State, Zip Code Jackson, MS 39206-2404 Name of Employer (Required) Federal Emergency Management Agency Occupation (Required) Administrative Support Specialist	07/31/2023	\$100.00
Aggregate year-to-date		\$625.00
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 Frankie Blount Mailing Address 4876 Brookwood Pl City, State, Zip Code Jackson, MS 39272-5706 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	07/31/2023	\$35.71
Aggregate year-to-date		\$278.55
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 M. Pugh Mailing Address 5924 Whitestone Rd City, State, Zip Code Jackson, MS 39206-2515 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/11/2023	\$25.00
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 Susan Teasley Mailing Address 100 Aspen Dr City, State, Zip Code Madison, MS 39110-9712 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$100.00
Aggregate year-to-date		\$475.00

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 Zilla Spencer <hr/> Mailing Address 382 Highway 342 S <hr/> City, State, Zip Code Vardaman, MS 38878 <hr/> Name of Employer (Required) Not Employed	09/22/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$355.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Graham Slakie <hr/> Mailing Address 4706 Buckingham Dr <hr/> City, State, Zip Code Chattanooga, TN 37421-1108 <hr/> Name of Employer (Required) Regal Cinemas	09/22/2023	\$10.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,197.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Linda J. Davis <hr/> Mailing Address 179 Little Sawmill Rd <hr/> City, State, Zip Code Laurel, MS 39443-9157 <hr/> Name of Employer (Required) Not Employed	08/12/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kathi Tomsky <hr/> Mailing Address 1018 Morton Rounds <hr/> City, State, Zip Code New Albany, MS 38652-6035 <hr/> Name of Employer (Required) Not Employed	09/02/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00

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 Joan Santa Cruz	09/23/2023	\$10.00
Mailing Address 5825 Cedar Rd		
City, State, Zip Code Ocean Springs, MS 39564-2250		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$310.00
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 Perry	08/23/2023	\$250.00
Mailing Address 2455 Sandridge Dr		
City, State, Zip Code Jackson, MS 39211-6204		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Claire Levine	09/24/2023	\$25.00
Mailing Address 6400 N Montana Ave		
City, State, Zip Code Portland, OR 97217-4879		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$475.00
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 Byrd	08/14/2023	\$25.00
Mailing Address 701 N Fulton St		
City, State, Zip Code Iuka, MS 38852-2411		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$235.00

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 Shanti Fry Mailing Address 8 Berkeley St City, State, Zip Code Cambridge, MA 02138-3464 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/24/2023	\$5,000.00
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 Leslie F. Gold Mailing Address 12 Madison Ave City, State, Zip Code Winchester, MA 01890-3026 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/14/2023	\$1,000.00
Aggregate year-to-date		\$9,000.00
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 Mari Harris Mailing Address 330 Easterbrook St City, State, Zip Code Bay Saint Louis, MS 39520-4449 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/04/2023	\$25.00
Aggregate year-to-date		\$203.25
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 Kaye Mailing Address 123 Nottingham Ter City, State, Zip Code Buffalo, NY 14216-3504 Name of Employer (Required) University at Buffalo Occupation (Required) Faculty	08/16/2023	\$50.00
Aggregate year-to-date		\$525.00

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 Michael McRee Mailing Address PO Box 1006 City, State, Zip Code Jackson, MS 39215-1006 Name of Employer (Required) Investek, Inc.	09/06/2023	\$500.00
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 Mina Makarious Mailing Address 178 Raymond St City, State, Zip Code Cambridge, MA 02140-3323 Name of Employer (Required) Anderson & Kreiger LLP	09/27/2023	\$250.00
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 Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code Oxford, MS 38655-0400 Name of Employer (Required) Not Employed	08/07/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$850.00
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 Dianne Martin Mailing Address 211 Pebble Brook Dr City, State, Zip Code Clinton, MS 39056-5819 Name of Employer (Required) State of Mississippi	08/27/2023	\$75.00
Occupation (Required) Developer	Aggregate year-to-date	\$654.30

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 Joe Love Mailing Address PO Box 802 City, State, Zip Code Summit, MS 39666-0802 Name of Employer (Required) Not Employed	09/07/2023	\$100.00
Occupation (Required) Not Employed	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 Tom Taft Mailing Address 3301 Star Hill Farm Rd City, State, Zip Code Greenville, NC 27834-0859 Name of Employer (Required) Not Employed	09/07/2023	\$1,000.00
Occupation (Required) Retired	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 Claudean Ervin Mailing Address 4989 W Northside Dr City, State, Zip Code Clinton, MS 39056-9402 Name of Employer (Required) US Dept of Housing and Urban Development	09/18/2023	\$50.00
Occupation (Required) Community Planning	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 Edward F. Donovan Mailing Address 2559 River Place Blvd City, State, Zip Code Biloxi, MS 39531-2752 Name of Employer (Required) Self Employed	09/29/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$400.00

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 Karen Strange Mailing Address 69 Henry James Rd City, State, Zip Code New Augusta, MS 39462-9710 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/09/2023	\$500.00
Aggregate year-to-date		\$1,260.00
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 Sumati Thomas Mailing Address 4146 Crestview Pl City, State, Zip Code Jackson, MS 39211-6404 Name of Employer (Required) Change Research Occupation (Required) Analyst	08/29/2023	\$25.00
Aggregate year-to-date		\$388.60
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 Denotee Martin Mailing Address 1009 County Road 65 City, State, Zip Code New Albany, MS 38652-8923 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/20/2023	\$50.00
Aggregate year-to-date		\$532.50
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 Elwin Hall Mailing Address 2204 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-4104 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$100.00
Aggregate year-to-date		\$250.00

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 Theresa Steinberger Mailing Address 4713 Forrest St City, State, Zip Code Moss Point, MS 39563-2413 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$100.00
Aggregate year-to-date		\$750.00
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 Keith Eddins Mailing Address 1970 Columbia St City, State, Zip Code Eugene, OR 97403-1440 Name of Employer (Required) University of Oregon Occupation (Required) Adjunct Faculty	09/01/2023	\$250.00
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 Benvenuto Mailing Address PO Box 2639 City, State, Zip Code Bay Saint Louis, MS 39521-2639 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/12/2023	\$250.00
Aggregate year-to-date		\$1,750.00
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 Bonnie Allen Mailing Address 7688 Highway 19 N City, State, Zip Code Collinsville, MS 39325-9390 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/12/2023	\$25.00
Aggregate year-to-date		\$285.00

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 Bud Coley Mailing Address PO Box 3068 City, State, Zip Code Tupelo, MS 38803-3068 Name of Employer (Required) Bud Coley Trucking Occupation (Required) Business Owner	09/13/2023	\$2,000.00
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) _____ Full Name Theresa Steinberger Mailing Address 4713 Forrest St City, State, Zip Code Moss Point, MS 39563-2413 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/03/2023	\$100.00
Aggregate year-to-date		\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Barbara Rankin Mailing Address PO Box 219 City, State, Zip Code Braxton, MS 39044-0219 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/23/2023	\$50.00
Aggregate year-to-date		\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Bethany Theilman Mailing Address 131 Redbud Trl City, State, Zip Code Brandon, MS 39047-6402 Name of Employer (Required) Diabetes Foundation of MS Occupation (Required) Secretary	09/13/2023	\$25.00
Aggregate year-to-date		\$217.10

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 Rubye D. Harden <hr/> Mailing Address 450 E President Ave <hr/> City, State, Zip Code Tupelo, MS 38801-5599 <hr/> Name of Employer (Required) Harden Enterprises	09/24/2023	\$100.00
Occupation (Required) Business Owner	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 Trudy Hart <hr/> Mailing Address 190 Lenny Rd <hr/> City, State, Zip Code Potsdam, NY 13676-4429 <hr/> Name of Employer (Required) Not Employed	09/24/2023	\$25.00
Occupation (Required) Not Employed	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 Natalie Bernstein <hr/> Mailing Address 2130 E Lake Rd NE <hr/> City, State, Zip Code Atlanta, GA 30307-1836 <hr/> Name of Employer (Required) Not Employed	08/24/2023	\$5,000.00
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 Margaret A. Niven <hr/> Mailing Address 124 Highland Cir <hr/> City, State, Zip Code Jackson, MS 39211-6413 <hr/> Name of Employer (Required) Nejam Properties	09/25/2023	\$25.00
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$220.00

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 Carol Halliburton <hr/> Mailing Address 5032 Sunnyvale Dr <hr/> City, State, Zip Code Jackson, MS 39211-4843 <hr/> Name of Employer (Required) Not Employed	09/06/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$416.00
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 Brenda Plunkett <hr/> Mailing Address 138 N Ridge Dr <hr/> City, State, Zip Code Saltillo, MS 38866-5763 <hr/> Name of Employer (Required) Not Employed	09/06/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,078.45
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 Shawn S. Brevard <hr/> Mailing Address 805 Oak Grove Rd <hr/> City, State, Zip Code Tupelo, MS 38804-2031 <hr/> Name of Employer (Required) Mississippi Arts Commission	08/07/2023	\$500.00
Occupation (Required) Commissioner	Aggregate year-to-date	\$1,700.00
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 Gerald Joseph Diaz Jr <hr/> Mailing Address 208 Waterford Sq <hr/> City, State, Zip Code Madison, MS 39110-6857 <hr/> Name of Employer (Required) Diaz Law Firm	09/18/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00

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 IBEW PAC Mailing Address 900 7th St NW City, State, Zip Code Washington, DC 20001-3886 Name of Employer (Required) Occupation (Required) 	09/28/2023	\$250,000.00
Aggregate year-to-date		\$276,000.00
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 Carol Halliburton Mailing Address 5032 Sunnyvale Dr City, State, Zip Code Jackson, MS 39211-4843 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/08/2023	\$50.00
Aggregate year-to-date		\$416.00
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 Jeanne A. Marszalek Mailing Address 108 Grand Ridge Rd City, State, Zip Code Starkville, MS 39759-4112 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/18/2023	\$100.00
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 Michael Ubertini Mailing Address 11 Helen Ln City, State, Zip Code Walpole, MA 02081-2046 Name of Employer (Required) Long and Foster Occupation (Required) Recruiter	09/19/2023	\$5.00
Aggregate year-to-date		\$285.00

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 Marietta J. Goodloe <hr/> Mailing Address 3105 N 1st St <hr/> City, State, Zip Code Ocean Springs, MS 39564-8566 <hr/> Name of Employer (Required) Not Employed	09/29/2023	\$200.00
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 Richard Ballard <hr/> Mailing Address 142 Road 598 <hr/> City, State, Zip Code Plantersville, MS 38862-4901 <hr/> Name of Employer (Required) Not Employed	08/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$478.00
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 Emilee C. Young <hr/> Mailing Address 1194 Highway 370 <hr/> City, State, Zip Code Dumas, MS 38625-9604 <hr/> Name of Employer (Required) Tippah County Hospital	09/30/2023	\$100.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$11,450.00
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 Cherri Lightsey <hr/> Mailing Address 3701 Crawford Rd <hr/> City, State, Zip Code Crawford, MS 39743-9629 <hr/> Name of Employer (Required) Not Employed	08/10/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$520.00

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 Witherspoon Mailing Address 910 Lincoln Ave City, State, Zip Code Oxford, MS 38655-4328 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$50.00
Aggregate year-to-date		\$2,350.00
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 Gloria Williamson Mailing Address 521 Holland Ave City, State, Zip Code Philadelphia, MS 39350-2437 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/22/2023	\$2,500.00
Aggregate year-to-date		\$7,010.00
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 Etta Smith Mailing Address 409 Cherry Hill Dr City, State, Zip Code Madison, MS 39110-7501 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/12/2023	\$25.00
Aggregate year-to-date		\$240.00
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 Marcus Wallace Mailing Address 317 E Capitol St City, State, Zip Code Jackson, MS 39201-3409 Name of Employer (Required) MAC & Associates, LLC Occupation (Required) Business Owner	09/12/2023	\$250.00
Aggregate year-to-date		\$750.00

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 Belinda Alexander <hr/> Mailing Address 2574 Old Bay Rd <hr/> City, State, Zip Code Biloxi, MS 39531-2829 <hr/> Name of Employer (Required) Memorial Hospital at Gulfport	09/14/2023	\$500.00
Occupation (Required) Healthcare Worker	Aggregate year-to-date	\$650.00
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 Patricia Sandusky <hr/> Mailing Address PO Box 119 <hr/> City, State, Zip Code Bailey, MS 39320-0119 <hr/> Name of Employer (Required) Not Employed	08/04/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
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 Louise Cole <hr/> Mailing Address 518 N Church St <hr/> City, State, Zip Code Okolona, MS 38860-1017 <hr/> Name of Employer (Required) Brandon Presley for Governor	09/25/2023	\$100.00
Occupation (Required) Field Organizer	Aggregate year-to-date	\$535.00
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 Damian Durrant <hr/> Mailing Address 705 4th St S <hr/> City, State, Zip Code Columbus, MS 39701-6725 <hr/> Name of Employer (Required) Technology Concepts & Design Inc.	08/05/2023	\$200.00
Occupation (Required) Senior Director Legal Services	Aggregate year-to-date	\$255.00

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 Kathryn York Mailing Address 315 Panola St City, State, Zip Code Water Valley, MS 38965-2408 Name of Employer (Required) Teach for America Occupation (Required) Non Profit Administrator	08/25/2023	\$250.00
Aggregate year-to-date		\$1,600.00
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 Shirley Guy Mailing Address 1185 W Topisaw N City, State, Zip Code Ruth, MS 39662-9511 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/27/2023	\$25.00
Aggregate year-to-date		\$205.00
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 Lacavera Mailing Address 1459 Forbes Dr City, State, Zip Code Byram, MS 39272-9459 Name of Employer (Required) Eastpointe Occupation (Required) Utilization Management	08/17/2023	\$25.00
Aggregate year-to-date		\$375.00
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 Diane Irvin Mailing Address 4047 Wyandot St City, State, Zip Code Denver, CO 80211-2140 Name of Employer (Required) Strategic Programs, Inc. Occupation (Required) Corporate Secretary	08/17/2023	\$25.00
Aggregate year-to-date		\$433.00

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 Karen Kellum <hr/> Mailing Address 509 College Hill Rd <hr/> City, State, Zip Code Oxford, MS 38655-2027 <hr/> Name of Employer (Required) University of Mississippi	09/07/2023	\$1,000.00
Occupation (Required) Professor	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) _____		
Full Name Trudy Hart <hr/> Mailing Address 190 Lenny Rd <hr/> City, State, Zip Code Potsdam, NY 13676-4429 <hr/> Name of Employer (Required) Not Employed	09/17/2023	\$22.50
Occupation (Required) Not Employed	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) _____		
Full Name Lee Carson <hr/> Mailing Address 2288 Waggoner Rd <hr/> City, State, Zip Code Carthage, MS 39051-9303 <hr/> Name of Employer (Required) N. L. Carson Construction Co.	09/18/2023	\$500.00
Occupation (Required) Construction	Aggregate year-to-date	\$2,700.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Karen Smith <hr/> Mailing Address 14624 S Vandalia Ave <hr/> City, State, Zip Code Bixby, OK 74008-3754 <hr/> Name of Employer (Required) Not Employed	08/08/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50

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 Ruth Haug Mailing Address PO Box 257 City, State, Zip Code Starkville, MS 39760-0257 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/18/2023	\$500.00
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 Sam Creasey Mailing Address 911 Pinehurst Pl City, State, Zip Code Jackson, MS 39202-1742 Name of Employer (Required) Morgan & Morgan Occupation (Required) Attorney	09/08/2023	\$500.00
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 David Corliss Mailing Address 2379 Wendover Dr City, State, Zip Code Belden, MS 38826-8644 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/29/2023	\$50.00
Aggregate year-to-date		\$325.00
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 Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/09/2023	\$100.00
Aggregate year-to-date		\$3,000.00

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 Ted B. Atkinson	08/09/2023	\$10.00
Mailing Address 1000 E Broad St		
City, State, Zip Code West Point, MS 39773-3236		
Name of Employer (Required) Mississippi State University		
Occupation (Required) Professor	Aggregate year-to-date	\$410.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Gerald Blessey	09/30/2023	\$50.00
Mailing Address 2577 Chatham Ct		
City, State, Zip Code Biloxi, MS 39531-2758		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$2,083.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Preston E. Sullivan	09/30/2023	\$600.00
Mailing Address 1601 County Road 410		
City, State, Zip Code Okolona, MS 38860-9330		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Nsombi Lambright	07/30/2023	\$50.00
Mailing Address 927 Woodville Dr		
City, State, Zip Code Jackson, MS 39212-3953		
Name of Employer (Required) One Voice		
Occupation (Required) Non-Profit Manager	Aggregate year-to-date	\$300.00

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 Louise Cole <hr/> Mailing Address 518 N Church St <hr/> City, State, Zip Code Okolona, MS 38860-1017 <hr/> Name of Employer (Required) Brandon Presley for Governor	08/10/2023	\$100.00
Occupation (Required) Field Organizer	Aggregate year-to-date	\$535.00
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 Karen Smith <hr/> Mailing Address 14624 S Vandalia Ave <hr/> City, State, Zip Code Bixby, OK 74008-3754 <hr/> Name of Employer (Required) Not Employed	08/20/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Karen Smith <hr/> Mailing Address 14624 S Vandalia Ave <hr/> City, State, Zip Code Bixby, OK 74008-3754 <hr/> Name of Employer (Required) Not Employed	08/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Elvin Sunds <hr/> Mailing Address 4000 W Tidewater Ln <hr/> City, State, Zip Code Madison, MS 39110-8942 <hr/> Name of Employer (Required) St. Francis of Assisi Church	09/10/2023	\$25.00
Occupation (Required) Clergy	Aggregate year-to-date	\$780.00

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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5602 Name of Employer (Required) Not Employed	08/21/2023	\$20.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Douglas Masterson Mailing Address 43 Palm Tree Loop City, State, Zip Code Petal, MS 39465-9251 Name of Employer (Required) University of Southern Mississippi	08/31/2023	\$25.00
Occupation (Required) Chemist	Aggregate year-to-date	\$565.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John Ballard Mailing Address 5488 Turningleaf Cv City, State, Zip Code Tupelo, MS 38801-9516 Name of Employer (Required) Cardinal	08/31/2023	\$100.00
Occupation (Required) Pharmacist	Aggregate year-to-date	\$575.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Audrey McBride Mailing Address 1250 E Lakeshore Dr City, State, Zip Code Starkville, MS 39759-2482 Name of Employer (Required) McBride & Co Real Estate	08/12/2023	\$25.00
Occupation (Required) Broker	Aggregate year-to-date	\$490.00

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 Barbara Casey Mailing Address 229 Peachtree Hills Ave NE City, State, Zip Code Atlanta, GA 30305-4413 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/24/2023	\$100.00
Aggregate year-to-date		\$725.00
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 Dennis Mehiel Mailing Address 7 Renaissance Sq City, State, Zip Code White Plains, NY 10601-3056 Name of Employer (Required) Four M Investments, LLC Occupation (Required) Business Owner	09/25/2023	\$5,000.00
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 James T. Murray Jr Mailing Address 65 Caitlynn Cir City, State, Zip Code Hattiesburg, MS 39402-7995 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/25/2023	\$100.00
Aggregate year-to-date		\$3,200.00
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 Joe Love Mailing Address PO Box 802 City, State, Zip Code Summit, MS 39666-0802 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/05/2023	\$100.00
Aggregate year-to-date		\$500.00

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 Roger Klingler Mailing Address 7844 E Sandalwood Dr City, State, Zip Code Scottsdale, AZ 85250-7269 Name of Employer (Required) Not Employed	08/15/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$915.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Charles Fenner Mailing Address PO Box 759 City, State, Zip Code Edna, TX 77957-0759 Name of Employer (Required) Not Employed	08/25/2023	\$1,000.00
Occupation (Required) Retired	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) _____		
Full Name Mary Lindsay Mailing Address 1256 Belvoir Pl City, State, Zip Code Jackson, MS 39202-1205 Name of Employer (Required) City of Jackson	08/26/2023	\$50.00
Occupation (Required) Ward Member	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Duncan M. Gray III Mailing Address 110 Philip Rd City, State, Zip Code Oxford, MS 38655-2014 Name of Employer (Required) Nativity Episcopal Church	08/17/2023	\$50.00
Occupation (Required) Clergy	Aggregate year-to-date	\$675.00

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 Dianne Lee	08/17/2023	\$250.00
Mailing Address 521 Walnut Grove Dr		
City, State, Zip Code Pearl, MS 39208-7904		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
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 Trudy Hart	09/28/2023	\$25.00
Mailing Address 190 Lenny Rd		
City, State, Zip Code Potsdam, NY 13676-4429		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Nancy Groninger	08/18/2023	\$2.00
Mailing Address 5361 Saratoga St		
City, State, Zip Code Yorba Linda, CA 92886-4825		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Cynthia Morse	08/28/2023	\$25.00
Mailing Address 8601 Zimpel St		
City, State, Zip Code New Orleans, LA 70118-1139		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00

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 Bethany Theilman Mailing Address 131 Redbud Trl City, State, Zip Code Brandon, MS 39047-6402 Name of Employer (Required) Diabetes Foundation of MS Occupation (Required) Secretary	08/29/2023	\$25.00
Aggregate year-to-date		\$217.10
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 W. Rabon Mailing Address 306 River Dr City, State, Zip Code Southport, NC 28461-4110 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/09/2023	\$500.00
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 Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$50.00
Aggregate year-to-date		\$3,000.00
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 W. Powers Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/30/2023	\$10.00
Aggregate year-to-date		\$300.00

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 Calvin S. Hill Mailing Address PO Box 31514 City, State, Zip Code Jackson, MS 39286-1514 Name of Employer (Required) Nissan	09/30/2023	\$200.00
Occupation (Required) Manager	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) _____		
Full Name Gail Linson Mailing Address 133 Northshore Pt City, State, Zip Code Madison, MS 39110-7272 Name of Employer (Required) Not Employed	07/30/2023	\$40.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed	08/20/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$796.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Randy Hall Mailing Address 104 Peninsula Dr City, State, Zip Code Carriere, MS 39426-7738 Name of Employer (Required) Trace7 Services	08/30/2023	\$500.00
Occupation (Required) Consultant	Aggregate year-to-date	\$750.00

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 Jerry Smith Mailing Address 136 St Regis Dr City, State, Zip Code Madison, MS 39110-7798 Name of Employer (Required) Mississippi Baptist Medical Center Occupation (Required) Pharmacist	08/30/2023	\$100.00
Aggregate year-to-date		\$646.00
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 Norman Powell Mailing Address PO Box 2617 City, State, Zip Code Tupelo, MS 38803-2617 Name of Employer (Required) P&M Automatic Fire Protection Occupation (Required) Business Owner	08/30/2023	\$1,000.00
Aggregate year-to-date		\$5,500.00
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 Anita Yarbrough Mailing Address 202 Lakeside Dr City, State, Zip Code Houston, MS 38851-7432 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	07/31/2023	\$50.00
Aggregate year-to-date		\$392.50
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 Euell Ventures LLC Mailing Address 4915 I 55 N City, State, Zip Code Jackson, MS 39206-6212 Name of Employer (Required) Occupation (Required)	08/21/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Roy D. Campbell III <hr/> Mailing Address 835 Avondale St <hr/> City, State, Zip Code Jackson, MS 39216-3316 <hr/> Name of Employer (Required) Bradley Arant Boult Cummings LLP	08/21/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,000.00
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 Ron Coleman <hr/> Mailing Address 316 Quail Creek Dr <hr/> City, State, Zip Code Oxford, MS 38655-6108 <hr/> Name of Employer (Required) Not Employed	08/31/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
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 Jeff Richardson <hr/> Mailing Address 115 Bristol Ln <hr/> City, State, Zip Code Madison, MS 39110-5021 <hr/> Name of Employer (Required) Ontario Power Generation	08/12/2023	\$100.00
Occupation (Required) Executive	Aggregate year-to-date	\$1,350.00
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 Deonne Linenberger <hr/> Mailing Address 2584 Rue Palafox <hr/> City, State, Zip Code Biloxi, MS 39531-3733 <hr/> Name of Employer (Required) Not Employed	09/03/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

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 Dennis Truax Mailing Address 913 Southgate Dr City, State, Zip Code Starkville, MS 39759-9434 Name of Employer (Required) Self Employed Occupation (Required) Engineer	09/13/2023	\$100.00
Aggregate year-to-date		\$1,671.00
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 Alison O. Kelly Mailing Address 188 Reunion Blvd City, State, Zip Code Madison, MS 39110-8096 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/04/2023	\$500.00
Aggregate year-to-date		\$1,500.00
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 Hawkins Law PC Mailing Address PO Box 24627 City, State, Zip Code Jackson, MS 39225-4627 Name of Employer (Required) Occupation (Required)	08/04/2023	\$500.00
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 Susan Fino Mailing Address 1030 Augusta Dr City, State, Zip Code Oxford, MS 38655-8142 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/04/2023	\$100.00
Aggregate year-to-date		\$560.00

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 T. Edge	09/25/2023	\$250.00
Mailing Address 913 S 11th St		
City, State, Zip Code Oxford, MS 38655-4315		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Teacher	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 Claire Crews	09/26/2023	\$50.00
Mailing Address 101 County Road 413		
City, State, Zip Code Oxford, MS 38655-7601		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Daniel Barney	08/06/2023	\$250.00
Mailing Address 8302 Woodmont Ave		
City, State, Zip Code Bethesda, MD 20814-2795		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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 Keith Johnson	09/16/2023	\$50.00
Mailing Address PO Box 421		
City, State, Zip Code Nesbit, MS 38651-0421		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,150.00

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 Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	09/27/2023	\$10.00
Occupation (Required) Not Employed	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) _____		
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	08/07/2023	\$3.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$833.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Tomie Green Mailing Address 114 Pine Island Dr City, State, Zip Code Jackson, MS 39206-3234 Name of Employer (Required) Not Employed	08/27/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$665.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lena Grillo Mailing Address 5711 Clubview Dr City, State, Zip Code Jackson, MS 39211-4202 Name of Employer (Required) Not Employed	09/18/2023	\$60.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$230.00

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 Belinda Watkins <hr/> Mailing Address 1983 E Arden Oaks Dr <hr/> City, State, Zip Code Germantown, TN 38139-5697 <hr/> Name of Employer (Required) Not Employed	09/19/2023	\$50.00
Occupation (Required) Not Employed	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 Judith Herr <hr/> Mailing Address 8012 Maple Ridge Rd <hr/> City, State, Zip Code Bethesda, MD 20814-1308 <hr/> Name of Employer (Required) Not Employed	09/19/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,050.00
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 Reed Hillen <hr/> Mailing Address 2595 Mount Vernon Rd <hr/> City, State, Zip Code Tupelo, MS 38804-7102 <hr/> Name of Employer (Required) Hillen, Wicker & Tapscott, P.A.	09/29/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$750.00
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 Melita Thorpe <hr/> Mailing Address 5 Douglas Rd <hr/> City, State, Zip Code Ellisville, MS 39437-4805 <hr/> Name of Employer (Required) Not Employed	08/19/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

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 Becky Meek <hr/> Mailing Address 1 Oak Pl <hr/> City, State, Zip Code Oxford, MS 38655-2519 <hr/> Name of Employer (Required) Not Employed	09/20/2023	\$300.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
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 Conwill <hr/> Mailing Address 1005 County Road 357 <hr/> City, State, Zip Code New Albany, MS 38652-8981 <hr/> Name of Employer (Required) Not Employed	09/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
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 Janice Walker <hr/> Mailing Address 5950 B N Colony Blvd <hr/> City, State, Zip Code Jackson, MS 39206-2404 <hr/> Name of Employer (Required) Federal Emergency Management Agency	07/30/2023	\$25.00
Occupation (Required) Administrative Support Specialist	Aggregate year-to-date	\$625.00
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 Nan Shiverdecker <hr/> Mailing Address 306 Alabama St <hr/> City, State, Zip Code New Albany, MS 38652-4137 <hr/> Name of Employer (Required) NEMiss.News	08/30/2023	\$100.00
Occupation (Required) Writer	Aggregate year-to-date	\$650.00

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 Kelly J. Jacobs Mailing Address 3985 Robertson Gin Rd City, State, Zip Code Hernando, MS 38632-8227 Name of Employer (Required) Not Employed	08/30/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,646.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elizabeth Walkup Mailing Address 3710 Richland Ave City, State, Zip Code Nashville, TN 37205-2438 Name of Employer (Required) Graves Gilbert Clinic	09/10/2023	\$250.00
Occupation (Required) Advanced Practice Registered Nurse	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) _____		
Full Name Paul Silverman Mailing Address 201 Montgomery St City, State, Zip Code Jersey City, NJ 07302-5057 Name of Employer (Required) Silverman	08/31/2023	\$2,500.00
Occupation (Required) Real Estate Developer	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) _____		
Full Name Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required) Not Employed	08/31/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,150.00

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 Mack Lowery Mailing Address 5055 Myers Rd City, State, Zip Code Terry, MS 39170-9429 Name of Employer (Required) Aamco Transmission	09/22/2023	\$25.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$530.00
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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed	09/22/2023	\$18.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$602.00
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 Johnny D. Jones Mailing Address 611 S Pear Orchard Rd City, State, Zip Code Ridgeland, MS 39157-4836 Name of Employer (Required) The DELTA Project	08/02/2023	\$50.00
Occupation (Required) CEO	Aggregate year-to-date	\$1,761.50
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 Lawrence Mailing Address 23213 MS-19 City, State, Zip Code Kosciusko, MS 39090 Name of Employer (Required) University of Mississippi Medical Center	08/22/2023	\$100.00
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$250.00

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 L. V. Holland Mailing Address 17 New Bethel Rd City, State, Zip Code Tylertown, MS 39667-6608 Name of Employer (Required) Self Employed Occupation (Required) Farmer	08/22/2023	\$500.00
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 Felicia Brown-Williams Mailing Address 4010 Council Cir City, State, Zip Code Jackson, MS 39206-5813 Name of Employer (Required) David & Lucile Packard Foundation Occupation (Required) Advisor	08/14/2023	\$50.00
Aggregate year-to-date		\$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 William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/24/2023	\$15.00
Aggregate year-to-date		\$285.00
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 Terry Mangialardi Mailing Address 1181 Mcgowan Dr City, State, Zip Code Southaven, MS 38671-8430 Name of Employer (Required) Desoto County Schools Occupation (Required) Teacher	09/14/2023	\$25.00
Aggregate year-to-date		\$215.00

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 Sheila Newtown Mailing Address 3893 County Route 10 City, State, Zip Code De Peyster, NY 13633-3405 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/25/2023	\$25.00
Aggregate year-to-date		\$240.00
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/05/2023	\$15.00
Aggregate year-to-date		\$833.50
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 Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	09/05/2023	\$25.00
Aggregate year-to-date		\$1,197.00
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 Johnny D. Jones Mailing Address 611 S Pear Orchard Rd City, State, Zip Code Ridgeland, MS 39157-4836 Name of Employer (Required) The DELTA Project Occupation (Required) CEO	09/15/2023	\$100.00
Aggregate year-to-date		\$1,761.50

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 Glenda Burns Mailing Address PO Box 110 City, State, Zip Code Okolona, MS 38860-0110 Name of Employer (Required) Bank of Okolona Occupation (Required) Loan Operations Officer	09/26/2023	\$25.00
Aggregate year-to-date		\$335.00
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 Cherri Lightsey Mailing Address 3701 Crawford Rd City, State, Zip Code Crawford, MS 39743-9629 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/06/2023	\$25.00
Aggregate year-to-date		\$520.00
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 Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/26/2023	\$45.71
Aggregate year-to-date		\$1,061.50
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 Anthony Vita Mailing Address 65 Vaiden Dr City, State, Zip Code Hernando, MS 38632-2313 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/16/2023	\$25.00
Aggregate year-to-date		\$750.00

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 Penelope Tose <hr/> Mailing Address 551 S Valley Rd <hr/> City, State, Zip Code Poplarville, MS 39470-6256 <hr/> Name of Employer (Required) Not Employed	09/27/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$950.00
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 Lise Pearlman <hr/> Mailing Address 1147 Clarendon Cres <hr/> City, State, Zip Code Oakland, CA 94610-1807 <hr/> Name of Employer (Required) Self Employed	09/07/2023	\$50.00
Occupation (Required) Author	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 Bonnie Allen <hr/> Mailing Address 7688 Highway 19 N <hr/> City, State, Zip Code Collinsville, MS 39325-9390 <hr/> Name of Employer (Required) Not Employed	09/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
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 A. H. Cooper <hr/> Mailing Address 401 Garner St <hr/> City, State, Zip Code Oxford, MS 38655-2005 <hr/> Name of Employer (Required) Not Employed	08/18/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00

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 Andrew Dickson Mailing Address 807 Sth 19Th Ave City, State, Zip Code Hattiesburg, MS 39401 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/28/2023	\$250.00
Aggregate year-to-date		\$2,200.00
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 Brenke Mailing Address 3228 Dijon Ave City, State, Zip Code Ocean Springs, MS 39564-8520 Name of Employer (Required) Strat S.P.A., LLC Occupation (Required) Consultant	09/29/2023	\$200.00
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 Philip Carey Hearn Mailing Address 117 N Mountain St City, State, Zip Code Blue Mountain, MS 38610-9441 Name of Employer (Required) Hearn Law Firm Occupation (Required) Attorney	09/20/2023	\$500.00
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 Mack Lowery Mailing Address 5055 Myers Rd City, State, Zip Code Terry, MS 39170-9429 Name of Employer (Required) Aamco Transmission Occupation (Required) Business Owner	08/30/2023	\$25.00
Aggregate year-to-date		\$530.00

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 Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed	08/30/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Phillip Pinkston Mailing Address 540 Shadow View Dr E City, State, Zip Code Hernando, MS 38632-6562 Name of Employer (Required) Orgill, Inc.	07/31/2023	\$100.00
Occupation (Required) Senior Programmer Analyst	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Dennis J. J. Erby Mailing Address PO Box 2811 City, State, Zip Code Columbus, MS 39704-2811 Name of Employer (Required) Not Employed	08/31/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Frankie Blount Mailing Address 4876 Brookwood Pl City, State, Zip Code Jackson, MS 39272-5706 Name of Employer (Required) Not Employed	09/11/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$278.55

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 Frances Croft <hr/> Mailing Address 220 Saint Andrews Dr <hr/> City, State, Zip Code Jackson, MS 39211-2519 <hr/> Name of Employer (Required) Women's Foundation of Mississippi	08/22/2023	\$500.00
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 John Rollins <hr/> Mailing Address 28 Homochitto St <hr/> City, State, Zip Code Natchez, MS 39120-3996 <hr/> Name of Employer (Required) Rollins Resources	08/03/2023	\$50.00
Occupation (Required) Consultant	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 Benvenuto <hr/> Mailing Address PO Box 2639 <hr/> City, State, Zip Code Bay Saint Louis, MS 39521-2639 <hr/> Name of Employer (Required) Not Employed	08/23/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,750.00
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 Catherine P. Cotten <hr/> Mailing Address 24 Grand Bayou Cir <hr/> City, State, Zip Code Hattiesburg, MS 39402-7931 <hr/> Name of Employer (Required) University of Southern Mississippi	08/23/2023	\$1,000.00
Occupation (Required) Professor	Aggregate year-to-date	\$1,000.00

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 Caleb Dana Mailing Address 103 Pinetrail Pl City, State, Zip Code Madison, MS 39110-8008 Name of Employer (Required) Not Employed	09/26/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$247.00
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 Leslie Rutland Mailing Address PO Box 2349 City, State, Zip Code Collins, MS 39428-2349 Name of Employer (Required) Rutland Lumber Co.	08/16/2023	\$2,500.00
Occupation (Required) President	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 Rickey T. Moore Mailing Address PO Box 145 City, State, Zip Code Wheeler, MS 38880-0145 Name of Employer (Required) Not Employed	09/27/2023	\$250.00
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 Anne Winter Mailing Address 13 Horizon Hill Rd City, State, Zip Code Asheville, NC 28804-2429 Name of Employer (Required) Not Employed	09/27/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

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 Owen Mailing Address PO Box 27 City, State, Zip Code Columbus, MS 39703-0027 Name of Employer (Required) David Owen, Attorney at Law Occupation (Required) Attorney	08/07/2023	\$500.00
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 Frank Witherspoon Mailing Address 910 Lincoln Ave City, State, Zip Code Oxford, MS 38655-4328 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/07/2023	\$25.00
Aggregate year-to-date		\$2,350.00
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 Keith Johnson Mailing Address PO Box 421 City, State, Zip Code Nesbit, MS 38651-0421 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/17/2023	\$50.00
Aggregate year-to-date		\$1,150.00
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 Ted B. Atkinson Mailing Address 1000 E Broad St City, State, Zip Code West Point, MS 39773-3236 Name of Employer (Required) Mississippi State University Occupation (Required) Professor	09/07/2023	\$25.00
Aggregate year-to-date		\$410.00

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 Rogers Mailing Address 831 Cedar Lake Rd City, State, Zip Code Biloxi, MS 39532-4671 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/28/2023	\$250.00
Aggregate year-to-date		\$1,200.00
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 Leonette Slay Mailing Address 320 Albemarle Dr City, State, Zip Code Hoover, AL 35226-1503 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$100.00
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 Erdman Mailing Address 2445 Selwyn Ave City, State, Zip Code Charlotte, NC 28209-1668 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/18/2023	\$300.00
Aggregate year-to-date		\$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 Charles Addington Mailing Address 3747 Crane Blvd City, State, Zip Code Jackson, MS 39216-3606 Name of Employer (Required) HORNE LLP Occupation (Required) Accountant	08/09/2023	\$50.00
Aggregate year-to-date		\$217.25

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 Deirdre Phillips Mailing Address 200 Jefferson Rdg City, State, Zip Code Ridgeland, MS 39157-9101 Name of Employer (Required) Delta Health System Occupation (Required) Physician	09/09/2023	\$50.00
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 Melissa Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code Madison, MS 39110-7494 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/20/2023	\$25.00
Aggregate year-to-date		\$225.00
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 Chiarito Mailing Address 1724 Eisenhower Dr City, State, Zip Code Vicksburg, MS 39180-3753 Name of Employer (Required) Self Employed Occupation (Required) Physician	09/30/2023	\$250.00
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 Akins Mailing Address 86449 Meadowwood Dr City, State, Zip Code Yulee, FL 32097-6427 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/21/2023	\$50.00
Aggregate year-to-date		\$746.00

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 Ira Lechner Mailing Address 19811 4th Pl City, State, Zip Code Escondido, CA 92029-7004 Name of Employer (Required) Self Employed Occupation (Required) Attorney	07/31/2023	\$1,000.00
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 Ed Penny Mailing Address 4366 N Honeysuckle Ln City, State, Zip Code Jackson, MS 39211-6131 Name of Employer (Required) Self Employed Occupation (Required) Farmer	08/31/2023	\$17.60
Aggregate year-to-date		\$267.60
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 K. Fitzwilliam Mailing Address 165 Audubon Pl City, State, Zip Code Picayune, MS 39466-8799 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/01/2023	\$1,000.00
Aggregate year-to-date		\$2,000.00
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 Triplelette Advisors, LLC. Mailing Address PO Box 2566 City, State, Zip Code Oxford, MS 38655-4900 Name of Employer (Required) Occupation (Required)	09/11/2023	\$250.00
Aggregate year-to-date		\$250.00

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 Sidney Whitehurst Mailing Address PO Box 966 City, State, Zip Code Iuka, MS 38852-0966 Name of Employer (Required) Not Employed	09/22/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jerry Sandlin Mailing Address 303 Robbers Trce City, State, Zip Code Ridgeland, MS 39157-8773 Name of Employer (Required) Not Employed	08/22/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Michael O'Neal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic	08/22/2023	\$100.00
Occupation (Required) Physician	Aggregate year-to-date	\$2,526.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Michael Lutz Mailing Address 6224 Sandhill Cv City, State, Zip Code Ocean Springs, MS 39564-5685 Name of Employer (Required) Raytheon Technologies	09/12/2023	\$250.00
Occupation (Required) Engineering Manager	Aggregate year-to-date	\$250.00

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 Suzanne Walsh	08/03/2023	\$10.00
Mailing Address 2725 White Wing Ln		
City, State, Zip Code West Palm Beach, FL 33409-2032		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$203.00
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 Maureen McKerns	08/13/2023	\$10.00
Mailing Address 813 42nd Ave		
City, State, Zip Code Gulfport, MS 39501-1451		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
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 Dorian Turner	08/23/2023	\$500.00
Mailing Address 2022 Petit Bois St S		
City, State, Zip Code Jackson, MS 39211-6709		
Name of Employer (Required) Hinds Behavioral Health Services		
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 Linda Bryant-Angotti	08/04/2023	\$50.00
Mailing Address 129 Hedges Cv		
City, State, Zip Code Oxford, MS 38655-1146		
Name of Employer (Required) Kent State University		
Occupation (Required) Professor	Aggregate year-to-date	\$385.00

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 Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/24/2023	\$33.00
Aggregate year-to-date		\$796.00
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 Nan Tarlton Mailing Address 210 Meadowlane Dr City, State, Zip Code Madison, MS 39110-9611 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/25/2023	\$100.00
Aggregate year-to-date		\$1,400.00
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 Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy	08/25/2023	\$25.00
Aggregate year-to-date		\$780.00
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 Ellen Lake Mailing Address 4230 Lakeshore Ave City, State, Zip Code Oakland, CA 94610-1136 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/15/2023	\$50.00
Aggregate year-to-date		\$400.00

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 Anthony Baggett <hr/> Mailing Address 104 N Broadway St <hr/> City, State, Zip Code Tupelo, MS 38804-3967 <hr/> Name of Employer (Required) Busted Spring, LLC	09/06/2023	\$200.00
Occupation (Required) Web Developer	Aggregate year-to-date	\$455.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John Gaudet <hr/> Mailing Address 99 Midtown Sq <hr/> City, State, Zip Code Hattiesburg, MS 39402-7513 <hr/> Name of Employer (Required) Wesley Medical Center	09/27/2023	\$50.00
Occupation (Required) Physician	Aggregate year-to-date	\$675.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Eugene Bramlett Jr <hr/> Mailing Address 1123 College St <hr/> City, State, Zip Code Columbus, MS 39701-5810 <hr/> Name of Employer (Required) Covenant United Methodist Church	08/07/2023	\$500.00
Occupation (Required) Religious Worker	Aggregate year-to-date	\$1,175.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert Carroll <hr/> Mailing Address 675 Beulah Grove Rd <hr/> City, State, Zip Code Pontotoc, MS 38863-7704 <hr/> Name of Employer (Required) Ashley Distribution Services	08/27/2023	\$250.00
Occupation (Required) Truck Driver	Aggregate year-to-date	\$920.00

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 Edward Snowdon Mailing Address 50 Riverside Dr City, State, Zip Code New York, NY 10024-6508 Name of Employer (Required) Self Employed Occupation (Required) Theatrical Producer	09/28/2023	\$5,000.00
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 H. Scott Ross Mailing Address PO Box 332 City, State, Zip Code West Point, MS 39773-0332 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/18/2023	\$2,500.00
Aggregate year-to-date		\$3,500.00
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 H. Scott Ross Mailing Address PO Box 332 City, State, Zip Code West Point, MS 39773-0332 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/08/2023	\$1,000.00
Aggregate year-to-date		\$3,500.00
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 Kathleen Coward Mailing Address 6245 Woodland Cir City, State, Zip Code Meridian, MS 39305-9082 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/29/2023	\$35.00
Aggregate year-to-date		\$205.00

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 Carroll	08/09/2023	\$50.00
Mailing Address 675 Beulah Grove Rd		
City, State, Zip Code Pontotoc, MS 38863-7704		
Name of Employer (Required) Ashley Distribution Services		
Occupation (Required) Truck Driver	Aggregate year-to-date	\$920.00
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 Carrie Augustine	08/29/2023	\$250.00
Mailing Address 3378 W 33rd Ave		
City, State, Zip Code Denver, CO 80211-3106		
Name of Employer (Required) Workday		
Occupation (Required) Sales	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 Frank Witherspoon	09/09/2023	\$50.00
Mailing Address 910 Lincoln Ave		
City, State, Zip Code Oxford, MS 38655-4328		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,350.00
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 Margaret A. Niven	08/30/2023	\$25.00
Mailing Address 124 Highland Cir		
City, State, Zip Code Jackson, MS 39211-6413		
Name of Employer (Required) Nejam Properties		
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$220.00

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 Janet Bland Mailing Address 810 Sample Rd City, State, Zip Code Belden, MS 38826-9650 Name of Employer (Required) Not Employed	08/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$273.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name David Miotke Mailing Address 1626 Francisco St City, State, Zip Code Berkeley, CA 94703-1255 Name of Employer (Required) Self Employed	09/21/2023	\$500.00
Occupation (Required) Musician	Aggregate year-to-date	\$518.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ken Rutherford Mailing Address 633 Park Dr City, State, Zip Code Oxford, MS 38655-2824 Name of Employer (Required) Not Employed	08/31/2023	\$1,000.00
Occupation (Required) Not Employed	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) _____		
Full Name Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed	09/11/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

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 Vaughn Grisham Mailing Address 211 Stone Rd City, State, Zip Code Oxford, MS 38655-2021 Name of Employer (Required) Not Employed	08/03/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Sarah Glover Mailing Address 169 Brookstone Way City, State, Zip Code Madison, MS 39110-7566 Name of Employer (Required) Tulane	09/03/2023	\$250.00
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) _____		
Full Name Theresa Guthrie Mailing Address 661 Arm Rd City, State, Zip Code Silver Creek, MS 39663-2423 Name of Employer (Required) Harrell & Nowak, LLC	08/04/2023	\$5.00
Occupation (Required) Office Manager	Aggregate year-to-date	\$236.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jerry Sandlin Mailing Address 303 Robbers Trce City, State, Zip Code Ridgeland, MS 39157-8773 Name of Employer (Required) Not Employed	08/05/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00

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 Helen Boone <hr/> Mailing Address 3726 Crane Blvd <hr/> City, State, Zip Code Jackson, MS 39216-3605 <hr/> Name of Employer (Required) Not Employed	08/25/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,047.45
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 Hope Harrington <hr/> Mailing Address 3534 Fulton St NW <hr/> City, State, Zip Code Washington, DC 20007-1437 <hr/> Name of Employer (Required) Not Employed	09/16/2023	\$1,000.00
Occupation (Required) Retired	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 Gene Corbin <hr/> Mailing Address 123 Montgomery St <hr/> City, State, Zip Code Cambridge, MA 02140-1726 <hr/> Name of Employer (Required) Tufts University	09/26/2023	\$500.00
Occupation (Required) Professor	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 David Clark <hr/> Mailing Address 110 Olympia Flds <hr/> City, State, Zip Code Jackson, MS 39211-2509 <hr/> Name of Employer (Required) Not Employed	08/06/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$19,003.00

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 Romasco Mailing Address 6330 Sanctuary Woods Ct City, State, Zip Code Burke, VA 22015-4071 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/06/2023	\$5,000.00
		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) _____		
Full Name Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/27/2023	\$25.00
		Aggregate year-to-date \$748.47
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ronald Unz Mailing Address 2535 Wright Rd City, State, Zip Code Steens, MS 39766-9129 Name of Employer (Required) Mississippi State University Occupation (Required) Scientist	08/07/2023	\$5.00
		Aggregate year-to-date \$335.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Edwin Pittman Mailing Address 164 Summers Bay Dr City, State, Zip Code Ridgeland, MS 39157-9234 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/07/2023	\$250.00
		Aggregate year-to-date \$250.00

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 Kathryn York Mailing Address 315 Panola St City, State, Zip Code Water Valley, MS 38965-2408 Name of Employer (Required) Teach for America Occupation (Required) Non Profit Administrator	08/08/2023	\$500.00
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 Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/08/2023	\$25.00
Aggregate year-to-date		\$375.00
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 Martha Martin Mailing Address 136 Forrest Field Dr City, State, Zip Code Pontotoc, MS 38863-1552 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/08/2023	\$200.00
Aggregate year-to-date		\$400.00
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 Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/28/2023	\$10.00
Aggregate year-to-date		\$250.00

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 Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church	09/29/2023	\$100.00
Occupation (Required) Clergy	Aggregate year-to-date	\$780.00
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 Joe C. Parks Mailing Address PO Box 842 City, State, Zip Code New Albany, MS 38652-0842 Name of Employer (Required) Not Employed	09/19/2023	\$500.00
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 Marilyn Vandemark Mailing Address 412 Highpoint Dr City, State, Zip Code Diamondhead, MS 39525-3719 Name of Employer (Required) Not Employed	09/20/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
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 Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed	09/30/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

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 Catherine H. Jacobs Mailing Address 425 Porter Ave City, State, Zip Code Ocean Springs, MS 39564-3715 Name of Employer (Required) Law Offices of Catherine H. Jacobs Occupation (Required) Attorney	08/10/2023	\$500.00
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 Watt Bishop Mailing Address 714 N 14th St City, State, Zip Code Oxford, MS 38655-3222 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	07/31/2023	\$250.00
Aggregate year-to-date		\$600.00
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 Mary Entrekin Mailing Address 129 Whispering Oaks Xing City, State, Zip Code Pearl, MS 39208-4152 Name of Employer (Required) United Methodist Church Occupation (Required) Compliance Analyst	07/31/2023	\$5.00
Aggregate year-to-date		\$380.60
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 Dorothy Roberts Mailing Address 252 Handy Ln City, State, Zip Code Pass Christian, MS 39571-4426 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/11/2023	\$50.00
Aggregate year-to-date		\$550.00

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 Baler	08/21/2023	\$25.00
Mailing Address 3000 Pineland Dr		
City, State, Zip Code Gulfport, MS 39501-6239		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$270.00
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 Don Keim	08/31/2023	\$100.00
Mailing Address 202 S Deer Creek Dr W		
City, State, Zip Code Leland, MS 38756-3129		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00
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 Lori Karny	08/31/2023	\$10.00
Mailing Address 6230 Wilshire Blvd		
City, State, Zip Code Los Angeles, CA 90048-5126		
Name of Employer (Required) Self Employed		
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$602.00
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 Colette Honorable	09/01/2023	\$500.00
Mailing Address 5133 Warren Pl NW		
City, State, Zip Code Washington, DC 20016-4318		
Name of Employer (Required) Reed Smith LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00

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 Wayne T. Adkison Mailing Address 5406 Lakeview Dr City, State, Zip Code Moss Point, MS 39563-2132 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/22/2023	\$25.00
Aggregate year-to-date		\$1,150.00
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 B. Clark Mailing Address 167 Rolling Meadows Rd City, State, Zip Code Ridgeland, MS 39157-9488 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/23/2023	\$200.00
Aggregate year-to-date		\$3,850.00
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 Janet Shanks Mailing Address 125 Northpointe Pkwy City, State, Zip Code Jackson, MS 39211-2411 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/23/2023	\$25.00
Aggregate year-to-date		\$1,050.00
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 Aileen Ajootian Mailing Address 403 Tyler Ave City, State, Zip Code Oxford, MS 38655-3821 Name of Employer (Required) University of Mississippi Occupation (Required) Professor	09/25/2023	\$250.00
Aggregate year-to-date		\$550.00

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 Lisa McCollom	09/25/2023	\$25.00
Mailing Address 201 Hoffman Ln		
City, State, Zip Code Waveland, MS 39576-4312		
Name of Employer (Required) American Airlines		
Occupation (Required) Flight Attendant	Aggregate year-to-date	\$886.75
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 Miriam Harrington	08/25/2023	\$25.00
Mailing Address 3800 Fairfax Dr		
City, State, Zip Code Arlington, VA 22203-1720		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$418.00
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 Raleigh Byars	09/05/2023	\$10.00
Mailing Address 48 County Road 229		
City, State, Zip Code Oxford, MS 38655-5800		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$885.00
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 Reilly Morse	08/06/2023	\$50.00
Mailing Address 929 Bridge St		
City, State, Zip Code Gulfport, MS 39507-3432		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,825.00

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 T. Murray Jr Mailing Address 65 Caitlynn Cir City, State, Zip Code Hattiesburg, MS 39402-7995 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/06/2023	\$1,000.00
Aggregate year-to-date		\$3,200.00
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/07/2023	\$15.00
Aggregate year-to-date		\$833.50
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 Suzanne H. Robinson Mailing Address 206 Wood St City, State, Zip Code Water Valley, MS 38965-2603 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/07/2023	\$30.00
Aggregate year-to-date		\$1,425.00
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 Crews Mailing Address 518 N 11th St City, State, Zip Code Oxford, MS 38655-3108 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/07/2023	\$1,000.00
Aggregate year-to-date		\$2,000.00

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 Karen Smith	09/18/2023	\$5.00
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Jayne Buttross	08/28/2023	\$150.00
Mailing Address 329 E Mayes St		
City, State, Zip Code Jackson, MS 39206-5718		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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 Elizabeth Payne	09/08/2023	\$25.00
Mailing Address 633 Park Dr		
City, State, Zip Code Oxford, MS 38655-2824		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$4,025.00
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 Stanly Godbold	09/29/2023	\$100.00
Mailing Address 47 Mockingbird Ln		
City, State, Zip Code Starkville, MS 39759-5388		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/09/2023	\$10.00
Aggregate year-to-date		\$833.50
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 Lisa Stevens Mailing Address 101 Boone Dr City, State, Zip Code Booneville, MS 38829-2609 Name of Employer (Required) NE MS Community College Occupation (Required) College Instructor	08/19/2023	\$25.00
Aggregate year-to-date		\$325.00
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 Democratic Governors Association Mailing Address 1225 Eye St NW City, State, Zip Code Washington, DC 20005-3914 Name of Employer (Required) Occupation (Required)	08/29/2023	\$1,200,000.00
Aggregate year-to-date		\$3,700,171.72
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 Stewart Mailing Address 321 County Road 416 City, State, Zip Code Vardaman, MS 38878-9708 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/20/2023	\$25.00
Aggregate year-to-date		\$275.00

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 Sean McGuinness Mailing Address 1605 Devine St City, State, Zip Code Jackson, MS 39202-1314 Name of Employer (Required) Butler Snow LLP	09/30/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$244.10
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Sam Pace Mailing Address 2013 N Parc Cir City, State, Zip Code Tupelo, MS 38804-9723 Name of Employer (Required) Not Employed	08/30/2023	\$250.00
Occupation (Required) Not Employed	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) _____		
Full Name Russell Smith Mailing Address 158 Arlington Rd City, State, Zip Code Beaumont, MS 39423-2617 Name of Employer (Required) Bentley Systems, Inc.	07/31/2023	\$100.00
Occupation (Required) Software Development Manager	Aggregate year-to-date	\$841.40
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed	08/11/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,400.00

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 Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed	08/31/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$375.00
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 Conwill Mailing Address 1005 County Road 357 City, State, Zip Code New Albany, MS 38652-8981 Name of Employer (Required) Not Employed	08/31/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
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 Carroll Mailing Address 675 Beulah Grove Rd City, State, Zip Code Pontotoc, MS 38863-7704 Name of Employer (Required) Ashley Distribution Services	09/22/2023	\$50.00
Occupation (Required) Truck Driver	Aggregate year-to-date	\$920.00
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 L. Chadwick Mailing Address 449 Highway 334 City, State, Zip Code Oxford, MS 38655-6339 Name of Employer (Required) Not Employed	09/22/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$400.00

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 C. Maxwell Mailing Address 1710 Linden Pl City, State, Zip Code Jackson, MS 39202-1217 Name of Employer (Required) Not Employed	09/22/2023	\$100.00
Occupation (Required) Not Employed	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 Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed	08/03/2023	\$31.79
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,061.50
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 Kevin Shirley Mailing Address 114 Harvey St City, State, Zip Code Belzoni, MS 39038-3112 Name of Employer (Required) Self Employed	09/13/2023	\$50.00
Occupation (Required) It Contractor	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 Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed	09/24/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

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 Desiree Hensley	08/04/2023	\$25.00
Mailing Address 210 Longest Rd		
City, State, Zip Code Oxford, MS 38655-2216		
Name of Employer (Required) University of Mississippi School of Law		
Occupation (Required) Professor	Aggregate year-to-date	\$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 Benjamin Skyes Sturdivant	08/14/2023	\$1,000.00
Mailing Address PO Box 209		
City, State, Zip Code Glendora, MS 38928-0209		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$3,000.00
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 Hudson Hickman	08/16/2023	\$250.00
Mailing Address 412 S Central Ave		
City, State, Zip Code New Albany, MS 38652-3701		
Name of Employer (Required) Self Employed		
Occupation (Required) Film Producer	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 Mack Lowery	08/26/2023	\$25.00
Mailing Address 5055 Myers Rd		
City, State, Zip Code Terry, MS 39170-9429		
Name of Employer (Required) Aamco Transmission		
Occupation (Required) Business Owner	Aggregate year-to-date	\$530.00

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 G. Hill	09/06/2023	\$1,000.00
Mailing Address PO Box 429		
City, State, Zip Code Oxford, MS 38655-0429		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$3,000.00
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 Elise Gillespie	09/27/2023	\$25.00
Mailing Address 1013 S Lamar Blvd		
City, State, Zip Code Oxford, MS 38655-4739		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$575.00
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 Brad Cole	08/07/2023	\$50.00
Mailing Address 415 W 8700 S		
City, State, Zip Code Paradise, UT 84328-7704		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Marilyn Vandemark	09/07/2023	\$100.00
Mailing Address 412 Highpoint Dr		
City, State, Zip Code Diamondhead, MS 39525-3719		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00

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 Mozella Conville Mailing Address 104 Cherokee Ct City, State, Zip Code Hattiesburg, MS 39401-7036 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$250.00
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 Martha Swan Mailing Address 1665 Toccopola Junction Rd City, State, Zip Code Thaxton, MS 38871-9005 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$50.00
Aggregate year-to-date		\$300.00
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 Cornelis Gispen Mailing Address 1112 S 11th St City, State, Zip Code Oxford, MS 38655-4610 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$200.00
Aggregate year-to-date		\$2,175.00
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 Linda J. Davis Mailing Address 179 Little Sawmill Rd City, State, Zip Code Laurel, MS 39443-9157 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$100.00
Aggregate year-to-date		\$600.00

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 Nan Shiverdecker Mailing Address 306 Alabama St City, State, Zip Code New Albany, MS 38652-4137 Name of Employer (Required) NEMiss.News Occupation (Required) Writer	07/30/2023	\$100.00
Aggregate year-to-date		\$650.00
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 Brenda Elliott Mailing Address 977 CR-821 City, State, Zip Code Saltillo, MS 38866 Name of Employer (Required) WW Trucking Inc. Occupation (Required) Logistics Manager	08/20/2023	\$25.00
Aggregate year-to-date		\$219.60
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 Simmons Mailing Address 907 Lincoln Ave City, State, Zip Code Oxford, MS 38655-4327 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/11/2023	\$1,000.00
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 Steven Laufer Mailing Address 2001 S St NW City, State, Zip Code Washington, DC 20009-1249 Name of Employer (Required) Myers-JDC-Brookdale Institute Occupation (Required) Researcher	08/31/2023	\$10,000.00
Aggregate year-to-date		\$10,000.00

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 Cynthia Groya Mailing Address 5371 Fairway St City, State, Zip Code Jackson, MS 39211-4251 Name of Employer (Required) Hinds County Community College Occupation (Required) Art Instructor	09/22/2023	\$250.00
Aggregate year-to-date		\$275.00
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5602 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/12/2023	\$25.00
Aggregate year-to-date		\$325.00
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 Douglas Masterson Mailing Address 43 Palm Tree Loop City, State, Zip Code Petal, MS 39465-9251 Name of Employer (Required) University of Southern Mississippi Occupation (Required) Chemist	09/23/2023	\$25.00
Aggregate year-to-date		\$565.00
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 Baler Mailing Address 3000 Pineland Dr City, State, Zip Code Gulfport, MS 39501-6239 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/03/2023	\$10.00
Aggregate year-to-date		\$270.00

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 Fike Mailing Address 1845 Piedmont St City, State, Zip Code Jackson, MS 39202-1346 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/23/2023	\$250.00
Aggregate year-to-date		\$400.00
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 Sittman Mailing Address 1822 Devine St City, State, Zip Code Jackson, MS 39202-1317 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/23/2023	\$50.00
Aggregate year-to-date		\$1,550.00
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 Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/24/2023	\$25.00
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 Sawyer Mailing Address 150 Spence Dr City, State, Zip Code Pass Christian, MS 39571-4839 Name of Employer (Required) Memorial Hospital Occupation (Required) Physician	09/14/2023	\$500.00
Aggregate year-to-date		\$1,500.00

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 Martha Van Landingham <hr/> Mailing Address 4830 Old West Point Rd <hr/> City, State, Zip Code Starkville, MS 39759-8190 <hr/> Name of Employer (Required) Not Employed	08/04/2023	\$1,000.00
Occupation (Required) Retired	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 Thomas Adams <hr/> Mailing Address 4527 Union Ave <hr/> City, State, Zip Code Nettleton, MS 38858-6037 <hr/> Name of Employer (Required) MS Public Service Commission	09/05/2023	\$25.00
Occupation (Required) Chief Investigator	Aggregate year-to-date	\$223.00
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 Andrew Jenkins <hr/> Mailing Address 116 Highland Meadow Rd <hr/> City, State, Zip Code Flora, MS 39071-9553 <hr/> Name of Employer (Required) AJA Management & Technical Services	08/16/2023	\$100.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$4,850.00
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 Ammerman <hr/> Mailing Address 2185 Longview Rd <hr/> City, State, Zip Code Starkville, MS 39759-8974 <hr/> Name of Employer (Required) Not Employed	08/16/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00

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 Eva Lantrip Mailing Address 3239 Big Ben S City, State, Zip Code Hernando, MS 38632-6918 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/06/2023	\$10.00
Aggregate year-to-date		\$260.00
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 E. Brevard Mailing Address 805 Oak Grove Rd City, State, Zip Code Tupelo, MS 38804-2031 Name of Employer (Required) B & B Concrete Co., Inc. Occupation (Required) President	08/07/2023	\$500.00
Aggregate year-to-date		\$2,700.00
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 R. Clark Webb Mailing Address 846 Van Duzer St City, State, Zip Code Staten Island, NY 10304-1816 Name of Employer (Required) Metropolitan Transportation Authority Occupation (Required) It Professional	09/07/2023	\$6.00
Aggregate year-to-date		\$287.00
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 Joshua Boger Mailing Address 22 Liberty Dr City, State, Zip Code Boston, MA 02210-1333 Name of Employer (Required) Alkeus Pharmaceuticals, Inc. Occupation (Required) Biotech Executive	09/18/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00

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 Carla Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Mississippi Humanities Council Occupation (Required) Prison Education Coordinator	08/08/2023	\$50.00
Aggregate year-to-date		\$350.00
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 Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/28/2023	\$31.79
Aggregate year-to-date		\$1,061.50
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 Emilee C. Young Mailing Address 1194 Highway 370 City, State, Zip Code Dumas, MS 38625-9604 Name of Employer (Required) Tippah County Hospital Occupation (Required) Nurse Practitioner	09/08/2023	\$100.00
Aggregate year-to-date		\$11,450.00
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 Kathy Olsen Mailing Address 4416 Sunnybrook Dr City, State, Zip Code Nashville, TN 37205-3860 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/29/2023	\$25,000.00
Aggregate year-to-date		\$105,000.00

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 Don A. Zatroch <hr/> Mailing Address 2366 17th Ave NW <hr/> City, State, Zip Code Saint Paul, MN 55112-5204 <hr/> Name of Employer (Required) Not Employed	09/09/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mark McLain <hr/> Mailing Address 120 Hickory Gln <hr/> City, State, Zip Code Madison, MS 39110-7605 <hr/> Name of Employer (Required) MS Neuropsychiatric Center	09/30/2023	\$100.00
Occupation (Required) Psychiatrist	Aggregate year-to-date	\$444.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brenda Roberts <hr/> Mailing Address 709 Northdale Pl <hr/> City, State, Zip Code Brandon, MS 39047-5110 <hr/> Name of Employer (Required) Not Employed	07/30/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Larry Or Vaughn <hr/> Mailing Address 259 Odom Rd <hr/> City, State, Zip Code Steens, MS 39766-9687 <hr/> Name of Employer (Required) Not Employed	08/31/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00

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 Ron Coleman	08/31/2023	\$25.00
Mailing Address 316 Quail Creek Dr		
City, State, Zip Code Oxford, MS 38655-6108		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
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 Edson Griswold	09/01/2023	\$20.00
Mailing Address 1699 S Trenton St		
City, State, Zip Code Denver, CO 80231-5694		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$833.50
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 Alan Arendale	09/22/2023	\$25.00
Mailing Address 345 Woodstone Rd		
City, State, Zip Code Clinton, MS 39056-4948		
Name of Employer (Required) Cannon Toyota Vicksburg		
Occupation (Required) Sales Consultant	Aggregate year-to-date	\$230.00
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 Zilla Spencer	09/22/2023	\$5.00
Mailing Address 382 Highway 342 S		
City, State, Zip Code Vardaman, MS 38878		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$355.00

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 Marcus Wallace <hr/> Mailing Address 317 E Capitol St <hr/> City, State, Zip Code Jackson, MS 39201-3409 <hr/> Name of Employer (Required) MAC & Associates, LLC	09/12/2023	\$250.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Doug Hill <hr/> Mailing Address 136 Courtland Dr <hr/> City, State, Zip Code Saltillo, MS 38866-6007 <hr/> Name of Employer (Required) Cardiology Associates	09/13/2023	\$250.00
Occupation (Required) Physician	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Rodger Wilder <hr/> Mailing Address 1159 BRIARSTONE Pl <hr/> City, State, Zip Code Gulfport, MS 39503 <hr/> Name of Employer (Required) Balch & Bingham LLP	09/14/2023	\$500.00
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) _____		
Full Name Frank Witherspoon <hr/> Mailing Address 910 Lincoln Ave <hr/> City, State, Zip Code Oxford, MS 38655-4328 <hr/> Name of Employer (Required) Not Employed	08/04/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,350.00

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 Charles Parrott	08/14/2023	\$250.00
Mailing Address 9 Abbey Nord Pl		
City, State, Zip Code Jackson, MS 39216-3743		
Name of Employer (Required) Adams and Reese LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,100.00
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 Claire Levine	08/24/2023	\$25.00
Mailing Address 6400 N Montana Ave		
City, State, Zip Code Portland, OR 97217-4879		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$475.00
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 Gaudet	09/25/2023	\$250.00
Mailing Address 99 Midtown Sq		
City, State, Zip Code Hattiesburg, MS 39402-7513		
Name of Employer (Required) Wesley Medical Center		
Occupation (Required) Physician	Aggregate year-to-date	\$675.00
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 Karen Strange	09/25/2023	\$100.00
Mailing Address 69 Henry James Rd		
City, State, Zip Code New Augusta, MS 39462-9710		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,260.00

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 Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code Oxford, MS 38655-0400 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/07/2023	\$25.00
Aggregate year-to-date		\$850.00
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. Barnett Jr Mailing Address 2406 S Arlington Ridge Rd City, State, Zip Code Arlington, VA 22202-2234 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/07/2023	\$1,000.00
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 Diane Irvin Mailing Address 4047 Wyandot St City, State, Zip Code Denver, CO 80211-2140 Name of Employer (Required) Strategic Programs, Inc. Occupation (Required) Corporate Secretary	09/17/2023	\$25.00
Aggregate year-to-date		\$433.00
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 Ray Johansmeier Mailing Address 753 E Second St City, State, Zip Code Pass Christian, MS 39571-4613 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/18/2023	\$100.00
Aggregate year-to-date		\$350.00

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 B. Clark	09/08/2023	\$1,000.00
Mailing Address 167 Rolling Meadows Rd		
City, State, Zip Code Ridgeland, MS 39157-9488		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,850.00
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 Jay Murphy	08/29/2023	\$50.00
Mailing Address 121 Maison Deville		
City, State, Zip Code Starkville, MS 39759-4164		
Name of Employer (Required) Self Employed		
Occupation (Required) Real Estate Broker	Aggregate year-to-date	\$350.00
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 Anita Yarbrough	08/29/2023	\$10.00
Mailing Address 202 Lakeside Dr		
City, State, Zip Code Houston, MS 38851-7432		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$392.50
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 Nancy Groninger	09/09/2023	\$25.00
Mailing Address 5361 Saratoga St		
City, State, Zip Code Yorba Linda, CA 92886-4825		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$255.00

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 Josephine W. Ashmead Mailing Address 540 E Van Dorn Ave City, State, Zip Code Holly Springs, MS 38635-2515 Name of Employer (Required) Self Employed	09/30/2023	\$200.00
Occupation (Required) Physician	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Marilyn Vandemark Mailing Address 412 Highpoint Dr City, State, Zip Code Diamondhead, MS 39525-3719 Name of Employer (Required) Not Employed	08/10/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Cherri Lightsey Mailing Address 3701 Crawford Rd City, State, Zip Code Crawford, MS 39743-9629 Name of Employer (Required) Not Employed	08/20/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$520.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name James Galloway Mailing Address 17 Baytowne Row City, State, Zip Code Madison, MS 39110-9179 Name of Employer (Required) Not Employed	08/30/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,333.60

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 William Janeway Mailing Address 8 E 80th St City, State, Zip Code New York, NY 10075-0110 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/21/2023	\$5,000.00
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 J. David Orlansky Mailing Address 1013 Laramie Ct City, State, Zip Code Madison, MS 39110-7746 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/21/2023	\$500.00
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 Caleb Dana Mailing Address 103 Pinetrail Pl City, State, Zip Code Madison, MS 39110-8008 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/23/2023	\$20.00
Aggregate year-to-date		\$247.00
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 Sheppard Mailing Address PO Box 327 City, State, Zip Code Cuero, TX 77954-0327 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/13/2023	\$250.00
Aggregate year-to-date		\$1,950.00

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 Lawrence Wallach Mailing Address 30 Common St City, State, Zip Code Belmont, MA 02478-3042 Name of Employer (Required) Not Employed	09/13/2023	\$2,500.00
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 Mary Miller Mailing Address 510 E 86th St City, State, Zip Code New York, NY 10028-7507 Name of Employer (Required) Not Employed	09/24/2023	\$100.00
Occupation (Required) Not Employed	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 Linda Cox Mailing Address 12 Estate Dr City, State, Zip Code Long Beach, MS 39560-3912 Name of Employer (Required) Veterans Health Administration	08/24/2023	\$25.00
Occupation (Required) Psychologist	Aggregate year-to-date	\$675.00
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 Miotke Mailing Address 1626 Francisco St City, State, Zip Code Berkeley, CA 94703-1255 Name of Employer (Required) Self Employed	09/25/2023	\$5.00
Occupation (Required) Musician	Aggregate year-to-date	\$518.50

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 Langdon Clay Mailing Address 304 Cassidy St City, State, Zip Code Sumner, MS 38957-9715 Name of Employer (Required) Self Employed Occupation (Required) Photographer	09/25/2023	\$250.00
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 Andrew Jenkins Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Technical Services Occupation (Required) Business Owner	08/05/2023	\$100.00
Aggregate year-to-date		\$4,850.00
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 Lawhead Mailing Address 718 S 8th St City, State, Zip Code Oxford, MS 38655-4306 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/05/2023	\$25.00
Aggregate year-to-date		\$285.00
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 Klarman Mailing Address 103 Irving St City, State, Zip Code Cambridge, MA 02138-2025 Name of Employer (Required) Harvard Law School Occupation (Required) Law Professor	08/05/2023	\$250.00
Aggregate year-to-date		\$250.00

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 Philip Kuhn Mailing Address PO Box 82 City, State, Zip Code Raymond, MS 39154-0082 Name of Employer (Required) Not Employed	09/05/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$290.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed	08/06/2023	\$5.00
Occupation (Required) Not Employed	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) _____		
Full Name Randy Patterson Mailing Address 1603 Sycamore St City, State, Zip Code Murray, KY 42071-2223 Name of Employer (Required) Not Employed	08/07/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John Dunbar Mailing Address 621 N Lamar Blvd City, State, Zip Code Oxford, MS 38655-3207 Name of Employer (Required) Not Employed	08/17/2023	\$200.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,200.00

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 Glenn Oliver Mailing Address 5642 Gibson Rd City, State, Zip Code Vicksburg, MS 39180-6320 Name of Employer (Required) Not Employed	09/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$280.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Sally W. Featherstone Mailing Address 406 Thomas St City, State, Zip Code Oxford, MS 38655-2918 Name of Employer (Required) Not Employed	09/29/2023	\$1,500.00
Occupation (Required) Not Employed	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) _____		
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	09/29/2023	\$25.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,197.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	09/09/2023	\$25.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,197.00

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 Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$10.00
Aggregate year-to-date		\$607.60
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 Stephen Schear Mailing Address 805 Santa Ray Ave City, State, Zip Code Oakland, CA 94610-1738 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/30/2023	\$500.00
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 Anne Hill Mailing Address 200 Craft St City, State, Zip Code Holly Springs, MS 38635-2912 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$100.00
Aggregate year-to-date		\$300.00
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. Jordan Mailing Address 1087 Augusta Dr City, State, Zip Code Oxford, MS 38655-6187 Name of Employer (Required) Oxford Hotels & Resorts, LLC Occupation (Required) President	08/30/2023	\$5,000.00
Aggregate year-to-date		\$17,501.00

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 Reita E. Schmittling <hr/> Mailing Address 102 Driftwood Dr <hr/> City, State, Zip Code Long Beach, MS 39560-5811 <hr/> Name of Employer (Required) Not Employed	07/31/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
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 R. Lindsay Jr <hr/> Mailing Address 1256 Belvoir Pl <hr/> City, State, Zip Code Jackson, MS 39202-1205 <hr/> Name of Employer (Required) Matthews, Cutrer & Lindsay, P.A.	08/21/2023	\$500.00
Occupation (Required) CPA	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 The NEA Fund for Children & Public Educa <hr/> Mailing Address 1201 16th St NW <hr/> City, State, Zip Code Washington, DC 20036-3201 <hr/> Name of Employer (Required) _____	08/31/2023	\$15,000.00
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 Karen Clarke <hr/> Mailing Address 122 Shadowlawn Ave <hr/> City, State, Zip Code Pass Christian, MS 39571-4817 <hr/> Name of Employer (Required) Ochsner	09/01/2023	\$100.00
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$400.00

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 Lucile Nash Mailing Address 883 Highland Park Dr City, State, Zip Code Tupelo, MS 38801-6935 Name of Employer (Required) R&D Marketing Occupation (Required) Finance	09/22/2023	\$50.00
Aggregate year-to-date		\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	09/13/2023	\$25.00
Aggregate year-to-date		\$1,197.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name James W. Powers Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/04/2023	\$250.00
Aggregate year-to-date		\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name John P. Samonds Mailing Address 202 Beacon Pt City, State, Zip Code Oxford, MS 38655-2108 Name of Employer (Required) University of Mississippi Occupation (Required) Associate Dean	09/25/2023	\$100.00
Aggregate year-to-date		\$300.00

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 Jerry Stallings <hr/> Mailing Address PO Box 1141 <hr/> City, State, Zip Code Oxford, MS 38655-1141 <hr/> Name of Employer (Required) State of Mississippi	08/05/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Dick Ledoux <hr/> Mailing Address 488 CR 1460 <hr/> City, State, Zip Code Tupelo, MS 38804 <hr/> Name of Employer (Required) Insource Solutions	09/15/2023	\$25.00
Occupation (Required) Client Success Advocate	Aggregate year-to-date	\$250.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Reita E. Schmidtling <hr/> Mailing Address 102 Driftwood Dr <hr/> City, State, Zip Code Long Beach, MS 39560-5811 <hr/> Name of Employer (Required) Not Employed	09/26/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert Hamilton <hr/> Mailing Address 3701 58th Ave <hr/> City, State, Zip Code Meridian, MS 39307-2905 <hr/> Name of Employer (Required) Self Employed	09/16/2023	\$10.00
Occupation (Required) Restaurateur	Aggregate year-to-date	\$240.00

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 Allendale Farms, LLC. Mailing Address PO Box 63 City, State, Zip Code Shelby, MS 38774-0063 Name of Employer (Required) Occupation (Required)	08/07/2023	\$5,000.00
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 Paul Carter Mailing Address 2615 Blackfoot Rd City, State, Zip Code Vancleave, MS 39565-8447 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/07/2023	\$25.00
Aggregate year-to-date		\$350.00
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 Nan Tarlton Mailing Address 210 Meadowlane Dr City, State, Zip Code Madison, MS 39110-9611 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/27/2023	\$50.00
Aggregate year-to-date		\$1,400.00
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 Judi Leake Mailing Address 5645 Traceside Dr City, State, Zip Code Nashville, TN 37221-4093 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/27/2023	\$10.00
Aggregate year-to-date		\$310.00

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 Linda J. Davis Mailing Address 179 Little Sawmill Rd City, State, Zip Code Laurel, MS 39443-9157 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/28/2023	\$100.00
Aggregate year-to-date		\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/19/2023	\$100.00
Aggregate year-to-date		\$722.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Linda Breathitt Mailing Address 1405 Pendennis Cir City, State, Zip Code Lexington, KY 40502-2823 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/19/2023	\$1,000.00
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) _____		
Full Name Joan Peterman Mailing Address 1224 Ridge Rd City, State, Zip Code Perkinston, MS 39573-5925 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/09/2023	\$25.00
Aggregate year-to-date		\$230.00

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 Cheryl Goggin Mailing Address 402 Mandalay Dr City, State, Zip Code Hattiesburg, MS 39402-2039 Name of Employer (Required) Not Employed	08/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$305.10
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Dennis J. J. Erby Mailing Address PO Box 2811 City, State, Zip Code Columbus, MS 39704-2811 Name of Employer (Required) Not Employed	08/29/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Cindy Brown Mailing Address 219 Carol Ln City, State, Zip Code Oxford, MS 38655-3403 Name of Employer (Required) Not Employed	09/20/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$800.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Angela Sallis Mailing Address 330 Demontluzin Ave City, State, Zip Code Bay St Louis, MS 39520-4408 Name of Employer (Required) Stennis Space Center	09/10/2023	\$250.00
Occupation (Required) Project Manager	Aggregate year-to-date	\$250.00

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 Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed	09/21/2023	\$25.00
Occupation (Required) Not Employed	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 Francis Turner Mailing Address 166 Steep Holw City, State, Zip Code Hattiesburg, MS 39402-7004 Name of Employer (Required) Self Employed	08/31/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$625.00
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 B. Schimmel Mailing Address 3630 Kings Hwy City, State, Zip Code Jackson, MS 39216-3321 Name of Employer (Required) Not Employed	09/11/2023	\$1,250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$15,850.00
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 Cherri Lightsey Mailing Address 3701 Crawford Rd City, State, Zip Code Crawford, MS 39743-9629 Name of Employer (Required) Not Employed	09/22/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$520.00

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 Alley Mailing Address 735 Gillespie St City, State, Zip Code Jackson, MS 39202-1712 Name of Employer (Required) Not Employed	08/02/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$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 Agnes Gund Mailing Address 765 Park Ave City, State, Zip Code New York, NY 10021-4271 Name of Employer (Required) Not Employed	08/22/2023	\$15,000.00
Occupation (Required) Retired	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 Hines Hall Mailing Address 117 County Road 259 City, State, Zip Code Iuka, MS 38852-8542 Name of Employer (Required) Not Employed	08/23/2023	\$500.00
Occupation (Required) Not Employed	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 Theresa Guthrie Mailing Address 661 Arm Rd City, State, Zip Code Silver Creek, MS 39663-2423 Name of Employer (Required) Harrell & Nowak, LLC	09/03/2023	\$100.00
Occupation (Required) Office Manager	Aggregate year-to-date	\$236.00

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 Jonathan Hamilton Mailing Address 4100 Warren St NW City, State, Zip Code Washington, DC 20016-2136 Name of Employer (Required) White & Case LLP	09/14/2023	\$10,000.00
Occupation (Required) Attorney	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 Marc Doyle Mailing Address 704 State St City, State, Zip Code Natchez, MS 39120-3543 Name of Employer (Required) Not Employed	08/25/2023	\$25.00
Occupation (Required) Not Employed	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 Brandy Burnette Mailing Address 7069 Tudor Ln City, State, Zip Code Horn Lake, MS 38637-1259 Name of Employer (Required) Young Williams	08/25/2023	\$15.00
Occupation (Required) Attorney	Aggregate year-to-date	\$216.00
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 Elliott III Mailing Address 205 Autumn Ridge Dr City, State, Zip Code Jackson, MS 39211-5955 Name of Employer (Required) Episcopal Church	09/05/2023	\$50.00
Occupation (Required) Priest	Aggregate year-to-date	\$225.00

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 Tomie Green	09/26/2023	\$50.00
Mailing Address 114 Pine Island Dr		
City, State, Zip Code Jackson, MS 39206-3234		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$665.00
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 Karen Smith	09/26/2023	\$25.00
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Hall	09/26/2023	\$250.00
Mailing Address 225 HIGHWAY 32		
City, State, Zip Code Okolona, MS 38860		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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 Quint Hunt	08/26/2023	\$250.00
Mailing Address 5104 Canton Heights Dr		
City, State, Zip Code Jackson, MS 39211-4515		
Name of Employer (Required) University of Mississippi Medical Center		
Occupation (Required) Pharmacist	Aggregate year-to-date	\$250.00

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 Jay Murphy Mailing Address 121 Maison Deville City, State, Zip Code Starkville, MS 39759-4164 Name of Employer (Required) Self Employed Occupation (Required) Real Estate Broker	09/27/2023	\$100.00
Aggregate year-to-date		\$350.00
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 Mary Entrekin Mailing Address 129 Whispering Oaks Xing City, State, Zip Code Pearl, MS 39208-4152 Name of Employer (Required) United Methodist Church Occupation (Required) Compliance Analyst	08/07/2023	\$3.00
Aggregate year-to-date		\$380.60
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 Carter Mailing Address 2615 Blackfoot Rd City, State, Zip Code Vanceleave, MS 39565-8447 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/07/2023	\$25.00
Aggregate year-to-date		\$350.00
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 Claudean Ervin Mailing Address 4989 W Northside Dr City, State, Zip Code Clinton, MS 39056-9402 Name of Employer (Required) US Dept of Housing and Urban Development Occupation (Required) Community Planning	08/17/2023	\$25.00
Aggregate year-to-date		\$250.00

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 Douglas Masterson Mailing Address 43 Palm Tree Loop City, State, Zip Code Petal, MS 39465-9251 Name of Employer (Required) University of Southern Mississippi	08/27/2023	\$10.00
Occupation (Required) Chemist	Aggregate year-to-date	\$565.00
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 West Mailing Address PO Box 40 City, State, Zip Code Pickwick Dam, TN 38365-0040 Name of Employer (Required) Not Employed	09/07/2023	\$50.00
Occupation (Required) Not Employed	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 Marian Kurz Mailing Address 1300 Central St City, State, Zip Code Evanston, IL 60201-1676 Name of Employer (Required) Self Employed	08/08/2023	\$10.00
Occupation (Required) Public Relations	Aggregate year-to-date	\$290.00
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 Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Not Employed	08/18/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,050.00

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 Mark McLain Mailing Address 120 Hickory Gln City, State, Zip Code Madison, MS 39110-7605 Name of Employer (Required) MS Neuropsychiatric Center	08/09/2023	\$19.60
Occupation (Required) Psychiatrist	Aggregate year-to-date	\$444.60
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 Wilma Sharpe Mailing Address 6017 Kristen Dr City, State, Zip Code Jackson, MS 39211-2817 Name of Employer (Required) Self Employed	08/29/2023	\$100.00
Occupation (Required) Public Relations	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 Melissa Scholes Mailing Address 2501 Lake Cir City, State, Zip Code Jackson, MS 39211-6625 Name of Employer (Required) University of Mississippi Medical Center	09/20/2023	\$200.00
Occupation (Required) Physician	Aggregate year-to-date	\$670.00
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 Foy Mailing Address 1881 N Parc Cir City, State, Zip Code Tupelo, MS 38804-9774 Name of Employer (Required) Not Employed	08/30/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$325.00

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 Karen Smith	08/30/2023	\$10.00
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Anonymous Anonymous	09/21/2023	\$603.00
Mailing Address 611 Pennsylvania Ave SE		
City, State, Zip Code Washington, DC 20003-4303		
Name of Employer (Required) N/A		
Occupation (Required) N/A	Aggregate year-to-date	\$2,947.00
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 Steve Headrick	07/31/2023	\$250.00
Mailing Address 115 Virginia Dr		
City, State, Zip Code Hattiesburg, MS 39401-5831		
Name of Employer (Required) Self Employed		
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 David Anderson	08/31/2023	\$500.00
Mailing Address 203 County Road 181		
City, State, Zip Code Oxford, MS 38655-8476		
Name of Employer (Required) Self Employed		
Occupation (Required) Coffee Roaster	Aggregate year-to-date	\$500.00

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>Partnership</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Green Hills Farm Mailing Address 1721 Highway 4 W City, State, Zip Code Ripley, MS 38663-9678 Name of Employer (Required) 	09/22/2023	\$150.00
Occupation (Required)	Aggregate year-to-date	\$850.00
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 Frank Alley Mailing Address 735 Gillespie St City, State, Zip Code Jackson, MS 39202-1712 Name of Employer (Required) Not Employed	08/22/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$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 Marjorie Williams Mailing Address 505 Ward Ave City, State, Zip Code Ocean Springs, MS 39564-4844 Name of Employer (Required) Not Employed	09/12/2023	\$32.25
Occupation (Required) Retired	Aggregate year-to-date	\$257.25
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 Wilemon Mailing Address 103 Davis Dr City, State, Zip Code Aberdeen, MS 39730-2909 Name of Employer (Required) Euphrates Consulting Group, LLC	08/03/2023	\$25.00
Occupation (Required) Chemical Engineer	Aggregate year-to-date	\$320.00

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 Leslie F. Gold	08/23/2023	\$8,000.00
Mailing Address 12 Madison Ave		
City, State, Zip Code Winchester, MA 01890-3026		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$9,000.00
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 Carol Halliburton	09/03/2023	\$25.00
Mailing Address 5032 Sunnyvale Dr		
City, State, Zip Code Jackson, MS 39211-4843		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$416.00
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 Winter	08/14/2023	\$50.00
Mailing Address 13 Horizon Hill Rd		
City, State, Zip Code Asheville, NC 28804-2429		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Betsy Pattullo	09/14/2023	\$1,000.00
Mailing Address 505 Tremont St		
City, State, Zip Code Boston, MA 02116-6352		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00

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 Michele Schipper Mailing Address 405 Le Bourgeois Ln City, State, Zip Code Brandon, MS 39047-7501 Name of Employer (Required) Institute of Southern Jewish Life	08/25/2023	\$250.00
Occupation (Required) CEO	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) _____		
Full Name Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed	08/06/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$796.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Perry Hood Mailing Address 402 Lake Hazle Dr City, State, Zip Code Hazlehurst, MS 39083-2210 Name of Employer (Required) J & K Interest Inc	08/26/2023	\$2,500.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$7,460.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Richard Raspert Mailing Address PO Box 2595 City, State, Zip Code Oxford, MS 38655-4900 Name of Employer (Required) Not Employed	09/06/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$4,500.00

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 Theresa Steinberger Mailing Address 4713 Forrest St City, State, Zip Code Moss Point, MS 39563-2413 Name of Employer (Required) Not Employed	09/16/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Judy Woods Mailing Address 119 King Richard Rd City, State, Zip Code Starkville, MS 39759-3848 Name of Employer (Required) Not Employed	09/27/2023	\$500.00
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) _____		
Full Name Glenn Taylor Mailing Address 3644 Old Canton Rd City, State, Zip Code Jackson, MS 39216-3313 Name of Employer (Required) Copeland Cook Taylor & Bush	09/27/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mark A. Novotny Mailing Address 515 9th St N City, State, Zip Code Columbus, MS 39701-4635 Name of Employer (Required) Mississippi State University	08/07/2023	\$250.00
Occupation (Required) Physicist	Aggregate year-to-date	\$250.00

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 Thomas Adams <hr/> Mailing Address 4527 Union Ave <hr/> City, State, Zip Code Nettleton, MS 38858-6037 <hr/> Name of Employer (Required) MS Public Service Commission	09/18/2023	\$25.00
Occupation (Required) Chief Investigator	Aggregate year-to-date	\$223.00
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 Mitchell Berger <hr/> Mailing Address 201 E Las Olas Blvd <hr/> City, State, Zip Code Fort Lauderdale, FL 33301-4439 <hr/> Name of Employer (Required) Berger Singerman, LLP	09/28/2023	\$1,000.00
Occupation (Required) Co-Chair	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 Susan Goldhor <hr/> Mailing Address 45 B Museum St <hr/> City, State, Zip Code Cambridge, MA 02138-1921 <hr/> Name of Employer (Required) Not Employed	08/08/2023	\$500.00
Occupation (Required) Not Employed	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 Anonymous Anonymous <hr/> Mailing Address 611 Pennsylvania Ave SE <hr/> City, State, Zip Code Washington, DC 20003-4303 <hr/> Name of Employer (Required) N/A	08/18/2023	\$200.00
Occupation (Required) N/A	Aggregate year-to-date	\$2,947.00

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 Kathy Howard Mailing Address 1213 Huntcliff Way City, State, Zip Code Clinton, MS 39056-3425 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/28/2023	\$25.00
Aggregate year-to-date		\$350.00
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 Bailey Mailing Address 705 N Overlook Dr City, State, Zip Code Alexandria, VA 22305-1223 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/09/2023	\$50.00
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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	09/09/2023	\$15.00
Aggregate year-to-date		\$602.00
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5602 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$35.00
Aggregate year-to-date		\$325.00

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 Ann J. Abadie	09/30/2023	\$10.00
Mailing Address 2238 Lee Loop		
City, State, Zip Code Oxford, MS 38655-4920		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$790.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Cheryl Peters	09/30/2023	\$5.00
Mailing Address 75 Derek Dr		
City, State, Zip Code Columbus, MS 39702-7817		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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) _____		
Full Name Paul Pearson	07/30/2023	\$25.00
Mailing Address 325 Pearson Rd		
City, State, Zip Code Lyon, MS 38645-9548		
Name of Employer (Required) Delta, Inc.		
Occupation (Required) Business Owner	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Constance Murray	08/30/2023	\$100.00
Mailing Address 10 Oak Meadow Ln		
City, State, Zip Code Carmel Valley, CA 93924-9455		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$550.00

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 Randy Richardson Mailing Address 311 Eagle Spring Rd City, State, Zip Code Oxford, MS 38655-2211 Name of Employer (Required) Rayner Eye Clinic Occupation (Required) Physician	09/21/2023	\$1,000.00
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 Stephen Stojcich Mailing Address 319 Magnolia Ave City, State, Zip Code Ocean Springs, MS 39564-4816 Name of Employer (Required) EGH Architects Occupation (Required) Architect	08/31/2023	\$100.00
Aggregate year-to-date		\$235.00
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 Okechukwu Ekenna Mailing Address PO Box 1246 City, State, Zip Code Pascagoula, MS 39568-1246 Name of Employer (Required) Self Employed Occupation (Required) Physician	09/22/2023	\$500.00
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 Eva Lantrip Mailing Address 3239 Big Ben S City, State, Zip Code Hernando, MS 38632-6918 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/23/2023	\$100.00
Aggregate year-to-date		\$260.00

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 Orlando Richmond	08/23/2023	\$1,000.00
Mailing Address 2260 W Tva Rd		
City, State, Zip Code West Point, MS 39773-8055		
Name of Employer (Required) Butler Snow LLP		
Occupation (Required) Attorney	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 James Raymond	08/25/2023	\$25.00
Mailing Address 733 Huckleberry Rd		
City, State, Zip Code Bay Saint Louis, MS 39520-1621		
Name of Employer (Required) Self Employed		
Occupation (Required) Financial Consultant	Aggregate year-to-date	\$4,080.00
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 Janis Shibata	09/15/2023	\$100.00
Mailing Address 10433 Larwin Ave		
City, State, Zip Code Chatsworth, CA 91311-2059		
Name of Employer (Required) Self Employed		
Occupation (Required) Insurance 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 Wilson Golden	08/16/2023	\$250.00
Mailing Address 3136 White Magnolia Chase SW		
City, State, Zip Code Gainesville, GA 30504-5587		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,150.00

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 Anthony Vita Mailing Address 65 Vaiden Dr City, State, Zip Code Hernando, MS 38632-2313 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/27/2023	\$50.00
Aggregate year-to-date		\$750.00
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 Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/17/2023	\$25.00
Aggregate year-to-date		\$285.00
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 Judith Herr Mailing Address 8012 Maple Ridge Rd City, State, Zip Code Bethesda, MD 20814-1308 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/27/2023	\$50.00
Aggregate year-to-date		\$3,050.00
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>Committee - Not a PAC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Smith County Democratic Executive Commit Mailing Address INFORMATION REQUESTED City, State, Zip Code , MS Name of Employer (Required)	09/07/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Sean Curran Mailing Address 84 State St City, State, Zip Code Boston, MA 02109-2202 Name of Employer (Required) Waterville Consulting Occupation (Required) Consultant	09/28/2023	\$2,500.00
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 Sheryl Jones Mailing Address 630 Savannah Estates Blvd City, State, Zip Code Biloxi, MS 39532-3703 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$100.00
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 Suzanne Walsh Mailing Address 2725 White Wing Ln City, State, Zip Code West Palm Beach, FL 33409-2032 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$25.00
Aggregate year-to-date		\$203.00
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 Gail Linson Mailing Address 133 Northshore Pt City, State, Zip Code Madison, MS 39110-7272 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/08/2023	\$25.00
Aggregate year-to-date		\$350.00

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 Emily Liner	08/08/2023	\$100.00
Mailing Address 408 6th St S		
City, State, Zip Code Columbus, MS 39701-6736		
Name of Employer (Required) Friendly City Books		
Occupation (Required) Business Owner	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 Patrick Falkner	08/28/2023	\$50.00
Mailing Address 176 Shady Acres Rd		
City, State, Zip Code Tupelo, MS 38804-2945		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,050.00
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 Lynn Dobbs	09/08/2023	\$25.00
Mailing Address 43 Dobbs Dr		
City, State, Zip Code Columbus, MS 39701-9619		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
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 Brenda Plunkett	09/19/2023	\$100.00
Mailing Address 138 N Ridge Dr		
City, State, Zip Code Saltillo, MS 38866-5763		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$2,078.45

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 C. Johnson Mailing Address PO Box 13050 City, State, Zip Code Sacramento, CA 95813-3050 Name of Employer (Required) Not Employed	08/09/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Suzanne Walsh Mailing Address 2725 White Wing Ln City, State, Zip Code West Palm Beach, FL 33409-2032 Name of Employer (Required) Not Employed	09/09/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$203.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	07/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name James N. Butts Mailing Address 703 N 7th Ave City, State, Zip Code Laurel, MS 39440-3468 Name of Employer (Required) Sanderson Farms	07/31/2023	\$500.00
Occupation (Required) Manager	Aggregate year-to-date	\$2,500.00

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 Elizabeth Payne Mailing Address 633 Park Dr City, State, Zip Code Oxford, MS 38655-2824 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/11/2023	\$1,000.00
Aggregate year-to-date		\$4,025.00
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 Daniel Mars Mailing Address PO Box 612 City, State, Zip Code Philadelphia, MS 39350-0612 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/22/2023	\$500.00
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 William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/22/2023	\$30.00
Aggregate year-to-date		\$285.00
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 Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy	09/23/2023	\$25.00
Aggregate year-to-date		\$780.00

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 Jeanne Garforth <hr/> Mailing Address 141 Viewpointe Dr <hr/> City, State, Zip Code Clinton, MS 39056-6085 <hr/> Name of Employer (Required) Not Employed	09/23/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$320.85
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Richard Rhoden <hr/> Mailing Address 778 Gillespie St <hr/> City, State, Zip Code Jackson, MS 39202-1711 <hr/> Name of Employer (Required) Self Employed	08/03/2023	\$25.00
Occupation (Required) Physician	Aggregate year-to-date	\$685.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Gary Elden <hr/> Mailing Address 3750 N Lake Shore Dr <hr/> City, State, Zip Code Chicago, IL 60613-4238 <hr/> Name of Employer (Required) Shook Hardy Bacon	08/23/2023	\$2,500.00
Occupation (Required) Attorney	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) _____		
Full Name Peyton D. Prospere <hr/> Mailing Address 1336 Saint Mary St <hr/> City, State, Zip Code Jackson, MS 39202-1848 <hr/> Name of Employer (Required) Watkins & Eager PLLC	08/23/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,500.00

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 Witherspoon <hr/> Mailing Address 910 Lincoln Ave <hr/> City, State, Zip Code Oxford, MS 38655-4328 <hr/> Name of Employer (Required) Not Employed	08/14/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,350.00
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 Dabbs <hr/> Mailing Address 5 Turnbury Dr <hr/> City, State, Zip Code Hattiesburg, MS 39401-8229 <hr/> Name of Employer (Required) South Central Regional Medical Center	08/25/2023	\$100.00
Occupation (Required) CIO	Aggregate year-to-date	\$400.00
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 Raleigh Byars <hr/> Mailing Address 48 County Road 229 <hr/> City, State, Zip Code Oxford, MS 38655-5800 <hr/> Name of Employer (Required) Not Employed	08/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$885.00
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 Himel <hr/> Mailing Address 5155 Madison St <hr/> City, State, Zip Code Skokie, IL 60077-5233 <hr/> Name of Employer (Required) Not Employed	09/05/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00

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 Tom Rhoden Mailing Address 117 Park Circle Dr City, State, Zip Code Flowood, MS 39232-8878 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/16/2023	\$1,000.00
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 James W. Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code Madison, MS 39110-7494 Name of Employer (Required) Bradley Arant Occupation (Required) Attorney	09/26/2023	\$500.00
Aggregate year-to-date		\$875.00
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 Gary Taylor Mailing Address 140 Felicity St City, State, Zip Code Bay St Louis, MS 39520-3716 Name of Employer (Required) ABP Humber Occupation (Required) Pilot	09/06/2023	\$500.00
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 David Williams Mailing Address 122 Madison Pl City, State, Zip Code Hattiesburg, MS 39402-8339 Name of Employer (Required) Bristow Helicopters Occupation (Required) Pilot	09/27/2023	\$25.00
Aggregate year-to-date		\$700.00

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 Susan Watson Mailing Address 42 County Road 317 City, State, Zip Code Oxford, MS 38655-5922 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/07/2023	\$250.00
Aggregate year-to-date		\$1,293.30
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Onellis Stanford Mailing Address 26287 Niolet Rd City, State, Zip Code Pass Christian, MS 39571-9422 Name of Employer (Required) Memorial Health Occupation (Required) Nurse Practitioner	09/28/2023	\$30.00
Aggregate year-to-date		\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name James H. Best Mailing Address 1355 Kimwood Dr City, State, Zip Code Jackson, MS 39211-5912 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/28/2023	\$200.00
Aggregate year-to-date		\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Beckett Howorth Mailing Address 921 Hayes Ave City, State, Zip Code Oxford, MS 38655-4615 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/08/2023	\$250.00
Aggregate year-to-date		\$725.00

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 Jacqueline Amos <hr/> Mailing Address 168 Kilkenny Blvd <hr/> City, State, Zip Code Jackson, MS 39209-3744 <hr/> Name of Employer (Required) The City of Canton <hr/> Occupation (Required) City Administrator	09/29/2023	\$25.00
Aggregate year-to-date		\$305.00
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 Mary Lux <hr/> Mailing Address 616 S 19th Ave <hr/> City, State, Zip Code Hattiesburg, MS 39401-7454 <hr/> Name of Employer (Required) University of Southern Mississippi <hr/> Occupation (Required) Professor	09/29/2023	\$50.00
Aggregate year-to-date		\$225.00
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 Bailey <hr/> Mailing Address 140 Chickasaw Dr <hr/> City, State, Zip Code West Point, MS 39773-3270 <hr/> Name of Employer (Required) Not Employed <hr/> Occupation (Required) Not Employed	08/30/2023	\$50.00
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 Benjamin Griffith <hr/> Mailing Address PO Box 2248 <hr/> City, State, Zip Code Oxford, MS 38655-7248 <hr/> Name of Employer (Required) Griffith Law Firm <hr/> Occupation (Required) Attorney	08/30/2023	\$100.00
Aggregate year-to-date		\$1,025.00

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 Christopher Dunbar Mailing Address 34 A Mardell Cir City, State, Zip Code Asheville, NC 28806-3532 Name of Employer (Required) Blue Ridge Power Occupation (Required) CEO	07/31/2023	\$250.00
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 Stanley S. Owen Mailing Address 24 Sweetgrass Ln City, State, Zip Code Ocean Springs, MS 39564-3455 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/11/2023	\$100.00
Aggregate year-to-date		\$700.00
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 Communication Workers of America Mailing Address 501 3rd St NW City, State, Zip Code Washington, DC 20001-2760 Name of Employer (Required) Occupation (Required)	08/31/2023	\$50,000.00
Aggregate year-to-date		\$50,000.00
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 Gerald Blessey Mailing Address 2577 Chatham Ct City, State, Zip Code Biloxi, MS 39531-2758 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/31/2023	\$100.00
Aggregate year-to-date		\$2,083.00

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 Lee Shelton Mailing Address 1317 Wilson St City, State, Zip Code Tupelo, MS 38804-6017 Name of Employer (Required) General Services Administration	09/22/2023	\$500.00
Occupation (Required) Regional Administrator	Aggregate year-to-date	\$4,586.39
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 May Bridges Mailing Address 1004 Alta Vista Blvd City, State, Zip Code Jackson, MS 39209-7104 Name of Employer (Required) Not Employed	09/22/2023	\$250.00
Occupation (Required) Not Employed	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 Michael O'Neal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic	09/23/2023	\$25.00
Occupation (Required) Physician	Aggregate year-to-date	\$2,526.00
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 Alan Saleski Mailing Address 2116 Harrison St City, State, Zip Code Evanston, IL 60201-2223 Name of Employer (Required) Loyola University Chicago	08/03/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$250.00

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 Mary McGarry Mailing Address 65 W 13th St City, State, Zip Code New York, NY 10011-7910 Name of Employer (Required) Not Employed	08/03/2023	\$1,000.00
Occupation (Required) Not Employed	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) _____		
Full Name Darryl Bishop Mailing Address 17 Drake Ldg City, State, Zip Code Raymond, MS 39154-7659 Name of Employer (Required) Not Employed	08/23/2023	\$500.00
Occupation (Required) Not Employed	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) _____		
Full Name Ginny Troutt Mailing Address 185 Oakley Rd City, State, Zip Code Senatobia, MS 38668-6481 Name of Employer (Required) Not Employed	09/24/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kerry Hamilton Mailing Address 43 County Road 332 City, State, Zip Code Taylor, MS 38673-4552 Name of Employer (Required) Kerry Hamilton, Inc.	09/24/2023	\$250.00
Occupation (Required) Consultant	Aggregate year-to-date	\$750.00

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 Munford Mailing Address 5510 Wisconsin Ave City, State, Zip Code Chevy Chase, MD 20815-4403 Name of Employer (Required) Not Employed	09/25/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	08/05/2023	\$15.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$833.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robin Weigle Mailing Address 14046 W Old River Trl City, State, Zip Code Gulfport, MS 39503-9046 Name of Employer (Required) Not Employed	08/15/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$355.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Alan Arendale Mailing Address 345 Woodstone Rd City, State, Zip Code Clinton, MS 39056-4948 Name of Employer (Required) Cannon Toyota Vicksburg	09/05/2023	\$10.00
Occupation (Required) Sales Consultant	Aggregate year-to-date	\$230.00

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 Hackett Cummins <hr/> Mailing Address 9 Nelson Ln <hr/> City, State, Zip Code Pass Christian, MS 39571-4716 <hr/> Name of Employer (Required) Not Employed	08/06/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name David Gambetta <hr/> Mailing Address 130 Harvesters Sq <hr/> City, State, Zip Code Tupelo, MS 38801-9510 <hr/> Name of Employer (Required) Mueller Co.	08/26/2023	\$100.00
Occupation (Required) Engineer	Aggregate year-to-date	\$402.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Suzanne H. Robinson <hr/> Mailing Address 206 Wood St <hr/> City, State, Zip Code Water Valley, MS 38965-2603 <hr/> Name of Employer (Required) Not Employed	08/26/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ken Hipple <hr/> Mailing Address 311 Summer Oak Trl <hr/> City, State, Zip Code Madison, MS 39110-9147 <hr/> Name of Employer (Required) Not Employed	09/06/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,550.00

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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	08/07/2023	\$15.00
Aggregate year-to-date		\$602.00
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 Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/18/2023	\$25.00
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 Leesa Golden Mailing Address 435 Humphries Cove Rd City, State, Zip Code West Point, MS 39773-8212 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$50.00
Aggregate year-to-date		\$325.00
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 Olson Mailing Address 403 Arbor Vw City, State, Zip Code Brandon, MS 39047-7073 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/28/2023	\$250.00
Aggregate year-to-date		\$450.00

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 Aubrey F. Hunt Mailing Address 105 Cannon Ridge Dr City, State, Zip Code Brandon, MS 39042-9436 Name of Employer (Required) Not Employed	09/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed	09/30/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$722.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mark McLain Mailing Address 120 Hickory Gln City, State, Zip Code Madison, MS 39110-7605 Name of Employer (Required) MS Neuropsychiatric Center	08/10/2023	\$150.00
Occupation (Required) Psychiatrist	Aggregate year-to-date	\$444.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Dannie Ball Mailing Address 104 Bay View Ct City, State, Zip Code Bay Saint Louis, MS 39520-4602 Name of Employer (Required) Not Employed	08/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.00

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 Dianne Martin Mailing Address 211 Pebble Brook Dr City, State, Zip Code Clinton, MS 39056-5819 Name of Employer (Required) State of Mississippi	07/31/2023	\$100.00
Occupation (Required) Developer	Aggregate year-to-date	\$654.30
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Susan Phillips Mailing Address 168 Highway 6 E City, State, Zip Code Oxford, MS 38655-8708 Name of Employer (Required) Oxford University United Methodist Church	09/22/2023	\$500.00
Occupation (Required) Preschool Director	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) _____		
Full Name Kathy Griffith Mailing Address 162 Oxford Creek Dr City, State, Zip Code Oxford, MS 38655-2242 Name of Employer (Required) Griffith Law Firm	09/22/2023	\$250.00
Occupation (Required) Administrator	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Miriam Harrington Mailing Address 3800 Fairfax Dr City, State, Zip Code Arlington, VA 22203-1720 Name of Employer (Required) Not Employed	08/02/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$418.00

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 Jim Mazingo Mailing Address 1016 Louisville St City, State, Zip Code Starkville, MS 39759-3953 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/12/2023	\$500.00
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 Richard Courtney Mailing Address PO Box 23126 City, State, Zip Code Jackson, MS 39225-3126 Name of Employer (Required) Courtney Elder Law Occupation (Required) Attorney	08/12/2023	\$50.00
Aggregate year-to-date		\$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 Wayne T. Adkison Mailing Address 5406 Lakeview Dr City, State, Zip Code Moss Point, MS 39563-2132 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/22/2023	\$25.00
Aggregate year-to-date		\$1,150.00
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 Joyce Ellis Mailing Address 106 Napa Valley Dr City, State, Zip Code Clinton, MS 39056-5732 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/24/2023	\$250.00
Aggregate year-to-date		\$369.60

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 Susan Fino	08/16/2023	\$200.00
Mailing Address 1030 Augusta Dr		
City, State, Zip Code Oxford, MS 38655-8142		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$560.00
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 Laurie McRee	09/06/2023	\$500.00
Mailing Address PO Box 12630		
City, State, Zip Code Jackson, MS 39236-2630		
Name of Employer (Required) Not Employed		
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 Ann Smith	09/27/2023	\$25.00
Mailing Address PO Box 1865		
City, State, Zip Code Gulfport, MS 39502-1865		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$390.00
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 Neilson Buchanan	09/07/2023	\$100.00
Mailing Address 155 Bryant St		
City, State, Zip Code Palo Alto, CA 94301-1104		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$425.00

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 Landis Becker Young Mailing Address 430 Stuart St City, State, Zip Code Boston, MA 02116-6533 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/18/2023	\$250.00
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 Hines Hall Mailing Address 117 County Road 259 City, State, Zip Code Iuka, MS 38852-8542 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$250.00
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 Tor Kwembe Mailing Address 4100 Poplar Ave City, State, Zip Code Richton Park, IL 60471-1236 Name of Employer (Required) Jackson State University Occupation (Required) Professor	09/28/2023	\$50.00
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 Cliff Johnson Mailing Address 1275 Highway 7 S City, State, Zip Code Water Valley, MS 38965-3758 Name of Employer (Required) MacArthur Justice Center Occupation (Required) Attorney	08/29/2023	\$250.00
Aggregate year-to-date		\$1,014.60

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 Eric Beamon Mailing Address 15055 Swan Lake Blvd City, State, Zip Code Gulfport, MS 39503-8613 Name of Employer (Required) Not Employed	08/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00
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 Diane Cockrum Mailing Address 600 County Road 515 City, State, Zip Code Ripley, MS 38663-8347 Name of Employer (Required) Not Employed	09/20/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
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 Lisa Dyre Mailing Address 2107 Country Club Rd City, State, Zip Code Grenada, MS 38901-4834 Name of Employer (Required) Not Employed	09/30/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$242.30
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 Vi Risser Mailing Address 377 County Road 653B City, State, Zip Code Saltillo, MS 38866-5716 Name of Employer (Required) Not Employed	07/30/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,400.00

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 Mari Harris <hr/> Mailing Address 330 Easterbrook St <hr/> City, State, Zip Code Bay Saint Louis, MS 39520-4449 <hr/> Name of Employer (Required) Not Employed	07/31/2023	\$78.25
Occupation (Required) Not Employed	Aggregate year-to-date	\$203.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Charles Dunagin <hr/> Mailing Address 1302 Fillmore Ave <hr/> City, State, Zip Code Oxford, MS 38655-4424 <hr/> Name of Employer (Required) Not Employed	08/31/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Emily Fox <hr/> Mailing Address 707 N Rankin St <hr/> City, State, Zip Code Natchez, MS 39120-2944 <hr/> Name of Employer (Required) Not Employed	09/22/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$635.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brandy Burnette <hr/> Mailing Address 7069 Tudor Ln <hr/> City, State, Zip Code Horn Lake, MS 38637-1259 <hr/> Name of Employer (Required) Young Williams	08/12/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$216.00

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 William Haynes Mailing Address 1501 Jackson Ave W City, State, Zip Code Oxford, MS 38655-2566 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/12/2023	\$1,000.00
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 Willie Crossley Mailing Address 5096 Highway 49 S City, State, Zip Code Piney Woods, MS 39148-2100 Name of Employer (Required) The Piney Woods School Occupation (Required) President	08/23/2023	\$500.00
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 Patrick Phillips Mailing Address 653 Ferncliff Dr City, State, Zip Code Jackson, MS 39211-2606 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/23/2023	\$25.00
Aggregate year-to-date		\$375.00
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 Eric Beamon Mailing Address 15055 Swan Lake Blvd City, State, Zip Code Gulfport, MS 39503-8613 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/13/2023	\$25.00
Aggregate year-to-date		\$260.00

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 Cherri Musser Mailing Address 105 Piute Cir City, State, Zip Code Loudon, TN 37774-2138 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/24/2023	\$50.00
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 Constance Murray Mailing Address 10 Oak Meadow Ln City, State, Zip Code Carmel Valley, CA 93924-9455 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/04/2023	\$100.00
Aggregate year-to-date		\$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 Johnny D. Jones Mailing Address 611 S Pear Orchard Rd City, State, Zip Code Ridgeland, MS 39157-4836 Name of Employer (Required) The DELTA Project Occupation (Required) CEO	09/05/2023	\$25.00
Aggregate year-to-date		\$1,761.50
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 Democratic Governors Association Mailing Address 1225 Eye St NW City, State, Zip Code Washington, DC 20005-3914 Name of Employer (Required) Occupation (Required)	09/26/2023	\$1,000,000.00
Aggregate year-to-date		\$3,700,171.72

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 Peter Buttross Jr <hr/> Mailing Address 206 S Rankin St <hr/> City, State, Zip Code Natchez, MS 39120-3536 <hr/> Name of Employer (Required) Not Employed	08/16/2023	\$50.00
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) _____		
Full Name William R. Wheeler Jr <hr/> Mailing Address 1700 Jefferson Ave <hr/> City, State, Zip Code Oxford, MS 38655-3722 <hr/> Name of Employer (Required) Wheeler and Franks Law Firm PC	09/07/2023	\$1,000.00
Occupation (Required) Attorney	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) _____		
Full Name Patrick Malouf <hr/> Mailing Address 209 Saint Andrews Dr <hr/> City, State, Zip Code Jackson, MS 39211-2520 <hr/> Name of Employer (Required) Porter and Malouf Law Firm	09/18/2023	\$1,000.00
Occupation (Required) Attorney	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) _____		
Full Name Thomas Wooldridge <hr/> Mailing Address 1848 Northwood Dr <hr/> City, State, Zip Code Tupelo, MS 38804-1047 <hr/> Name of Employer (Required) Nephrology & Hypertension Associates	08/18/2023	\$500.00
Occupation (Required) Physician	Aggregate year-to-date	\$2,500.00

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 Debra Reed	09/08/2023	\$100.00
Mailing Address 3436 Magazine St		
City, State, Zip Code New Orleans, LA 70115-2480		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,200.00
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 Janet Shanks	09/08/2023	\$200.00
Mailing Address 125 Northpointe Pkwy		
City, State, Zip Code Jackson, MS 39211-2411		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,050.00
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 Curt Brinson	09/19/2023	\$100.00
Mailing Address 311 Southwind Dr		
City, State, Zip Code Richland, MS 39218-9235		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
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 Stephen B. Richer	09/29/2023	\$50.00
Mailing Address 62 53rd Cir		
City, State, Zip Code Gulfport, MS 39507-4541		
Name of Employer (Required) Self Employed		
Occupation (Required) Marketing Consultant	Aggregate year-to-date	\$775.00

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 Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed	08/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$885.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Steve Tadlock Mailing Address 2985 Beaumont Cv City, State, Zip Code Pearl, MS 39208-5324 Name of Employer (Required) Broderick Advertising	09/09/2023	\$25.00
Occupation (Required) Creative Director	Aggregate year-to-date	\$295.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Beckett Howorth Mailing Address 921 Hayes Ave City, State, Zip Code Oxford, MS 38655-4615 Name of Employer (Required) Not Employed	07/30/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$725.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed	07/30/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$796.00

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 Melissa Scholes Mailing Address 2501 Lake Cir City, State, Zip Code Jackson, MS 39211-6625 Name of Employer (Required) University of Mississippi Medical Center Occupation (Required) Physician	08/20/2023	\$100.00
Aggregate year-to-date		\$670.00
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 Reilly Morse Mailing Address 929 Bridge St City, State, Zip Code Gulfport, MS 39507-3432 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$150.00
Aggregate year-to-date		\$1,825.00
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. Mann Mailing Address 316 Sonoma Cv City, State, Zip Code Madison, MS 39110-9549 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$50.00
Aggregate year-to-date		\$800.00
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 Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/10/2023	\$100.00
Aggregate year-to-date		\$2,045.00

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 Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/11/2023	\$30.00
Aggregate year-to-date		\$796.00
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 Leigh Soares Mailing Address 2605 Pin Oak Dr City, State, Zip Code Starkville, MS 39759-3514 Name of Employer (Required) Mississippi State University Occupation (Required) Professor	08/21/2023	\$100.00
Aggregate year-to-date		\$375.00
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 Rubye D. Harden Mailing Address 450 E President Ave City, State, Zip Code Tupelo, MS 38801-5599 Name of Employer (Required) Harden Enterprises Occupation (Required) Business Owner	08/31/2023	\$100.00
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 Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/22/2023	\$15.00
Aggregate year-to-date		\$680.50

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 Dianne Martin	09/22/2023	\$100.00
Mailing Address 211 Pebble Brook Dr		
City, State, Zip Code Clinton, MS 39056-5819		
Name of Employer (Required) State of Mississippi		
Occupation (Required) Developer	Aggregate year-to-date	\$654.30
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 Daniel Ellis	09/14/2023	\$100.00
Mailing Address 1800 Beach Dr		
City, State, Zip Code Gulfport, MS 39507-1556		
Name of Employer (Required) Self Employed		
Occupation (Required) Author	Aggregate year-to-date	\$300.00
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 Lydia Quarles	08/04/2023	\$100.00
Mailing Address 1016 Louisville St		
City, State, Zip Code Starkville, MS 39759-3953		
Name of Employer (Required) Mzingo Quarles PLLC		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,871.00
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 Dorothy Howorth	09/25/2023	\$1,000.00
Mailing Address 315 Eagle Spring Rd		
City, State, Zip Code Oxford, MS 38655-2211		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00

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 Brenda Roberts Mailing Address 709 Northdale Pl City, State, Zip Code Brandon, MS 39047-5110 Name of Employer (Required) Not Employed	09/16/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Paloma Wu Mailing Address 3525 Hawthorn Dr City, State, Zip Code Jackson, MS 39216-3308 Name of Employer (Required) Mississippi Center For Justice	08/07/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Thomas S. Howorth Mailing Address 315 Eagle Spring Rd City, State, Zip Code Oxford, MS 38655-2211 Name of Employer (Required) Howorth & Associates Architects	09/07/2023	\$250.00
Occupation (Required) Architect	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Glenn Oliver Mailing Address 5642 Gibson Rd City, State, Zip Code Vicksburg, MS 39180-6320 Name of Employer (Required) Not Employed	08/28/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$280.00

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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	09/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Suzanne H. Robinson Mailing Address 206 Wood St City, State, Zip Code Water Valley, MS 38965-2603 Name of Employer (Required) Not Employed	08/09/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Carol Halliburton Mailing Address 5032 Sunnyvale Dr City, State, Zip Code Jackson, MS 39211-4843 Name of Employer (Required) Not Employed	08/29/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$416.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	09/09/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50

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 Glenda Burns Mailing Address PO Box 110 City, State, Zip Code Okolona, MS 38860-0110 Name of Employer (Required) Bank of Okolona Occupation (Required) Loan Operations Officer	09/20/2023	\$50.00
Aggregate year-to-date		\$335.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Michael T. Kayes Mailing Address 510 Evergreen Dr City, State, Zip Code Long Beach, MS 39560-3228 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$200.00
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) _____ Full Name David Corliss Mailing Address 2379 Wendover Dr City, State, Zip Code Belden, MS 38826-8644 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	07/30/2023	\$50.00
Aggregate year-to-date		\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Bill Brasher Mailing Address 830 Holcomb Sweethome Rd City, State, Zip Code Holcomb, MS 38940-9310 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/30/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Cathy Garrett Mailing Address 26 Lake Barnett Dr City, State, Zip Code Brandon, MS 39047-6278 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/10/2023	\$100.00
Aggregate year-to-date		\$208.60
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 Campbell Wallace Mailing Address 562 W End Ave City, State, Zip Code New York, NY 10024-2747 Name of Employer (Required) Teneo Occupation (Required) Senior Associate	08/21/2023	\$100.00
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 Rishi A. Roy Mailing Address 206 Eastpark St City, State, Zip Code Ridgeland, MS 39157-2064 Name of Employer (Required) Advanced Vascular & Vein Associates Occupation (Required) Vascular Surgeon	08/21/2023	\$1,000.00
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 Leslie Steverson Mailing Address 2313 Farrell Cir City, State, Zip Code Gulfport, MS 39507-2222 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/22/2023	\$10.00
Aggregate year-to-date		\$320.00

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 Cynthia Morse Mailing Address 8601 Zimpel St City, State, Zip Code New Orleans, LA 70118-1139 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/12/2023	\$25.00
Aggregate year-to-date		\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elizabeth Stevens Mailing Address 3050 Avon Ln NW City, State, Zip Code Washington, DC 20007-2908 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/13/2023	\$2,500.00
Aggregate year-to-date		\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Greg White Mailing Address 3811 Fox Valley Dr City, State, Zip Code Rockville, MD 20853-3282 Name of Employer (Required) National Assn of Regulatory Utility Commissioners Occupation (Required) Executive	09/24/2023	\$100.00
Aggregate year-to-date		\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Bradley D. Campbell Mailing Address 111 Lakeshore Dr City, State, Zip Code Brandon, MS 39047-6019 Name of Employer (Required) Southern Resource Service Inc. Occupation (Required) President	08/24/2023	\$100.00
Aggregate year-to-date		\$400.00

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 Nan Tarlton Mailing Address 210 Meadowlane Dr City, State, Zip Code Madison, MS 39110-9611 Name of Employer (Required) Not Employed	09/25/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lisa Bates Mailing Address PO Box 306 City, State, Zip Code Tylertown, MS 39667-0306 Name of Employer (Required) Geartek	09/15/2023	\$500.00
Occupation (Required) Production Coordinator	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) _____		
Full Name Walter T. Moore Mailing Address 103 Waterstone Dr City, State, Zip Code Oxford, MS 38655-0009 Name of Employer (Required) Not Employed	09/25/2023	\$200.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code Oxford, MS 38655-0400 Name of Employer (Required) Not Employed	08/05/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$850.00

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 Herr Mailing Address 8012 Maple Ridge Rd City, State, Zip Code Bethesda, MD 20814-1308 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/05/2023	\$1,000.00
Aggregate year-to-date		\$3,050.00
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 Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/15/2023	\$34.00
Aggregate year-to-date		\$2,045.00
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 Kaye Mailing Address 123 Nottingham Ter City, State, Zip Code Buffalo, NY 14216-3504 Name of Employer (Required) University at Buffalo Occupation (Required) Faculty	09/05/2023	\$50.00
Aggregate year-to-date		\$525.00
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 Kathy Howard Mailing Address 1213 Huntcliff Way City, State, Zip Code Clinton, MS 39056-3425 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/05/2023	\$25.00
Aggregate year-to-date		\$350.00

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 Jolee Hussey <hr/> Mailing Address 209 Woodland Hills Dr <hr/> City, State, Zip Code Oxford, MS 38655-9771 <hr/> Name of Employer (Required) Not Employed	08/26/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
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 Martha Carl <hr/> Mailing Address 301 Woodrun Dr <hr/> City, State, Zip Code Ridgeland, MS 39157-2504 <hr/> Name of Employer (Required) Not Employed	08/17/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
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 Clark <hr/> Mailing Address 110 Olympia Flds <hr/> City, State, Zip Code Jackson, MS 39211-2509 <hr/> Name of Employer (Required) Not Employed	08/17/2023	\$3,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$19,003.00
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 Patricia Erb <hr/> Mailing Address 1828 Gary Rd <hr/> City, State, Zip Code Stewartsville, NJ 08886-2608 <hr/> Name of Employer (Required) Not Employed	09/08/2023	\$300.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00

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 Jerry Meadors <hr/> Mailing Address PO Box 369 <hr/> City, State, Zip Code Kiln, MS 39556-0369 <hr/> Name of Employer (Required) Not Employed	09/19/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Raburn Coln <hr/> Mailing Address 288 County Road 218 <hr/> City, State, Zip Code Corinth, MS 38834-7531 <hr/> Name of Employer (Required) Not Employed	08/20/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$345.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lloyd Gordon <hr/> Mailing Address 105 Colony Crown <hr/> City, State, Zip Code Brandon, MS 39047-8202 <hr/> Name of Employer (Required) Not Employed	07/31/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Catherine Smith <hr/> Mailing Address 326 Windsor Dr N <hr/> City, State, Zip Code Oxford, MS 38655-7091 <hr/> Name of Employer (Required) Southern Bird Studio	08/21/2023	\$100.00
Occupation (Required) Artist	Aggregate year-to-date	\$225.00

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 Constance S. Harvey <hr/> Mailing Address PO Box 88 <hr/> City, State, Zip Code Forest, MS 39074-0088 <hr/> Name of Employer (Required) Not Employed	08/21/2023	\$500.00
Occupation (Required) Retired	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) _____		
Full Name Reilly Morse <hr/> Mailing Address 929 Bridge St <hr/> City, State, Zip Code Gulfport, MS 39507-3432 <hr/> Name of Employer (Required) Not Employed	08/31/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,825.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mack Lowery <hr/> Mailing Address 5055 Myers Rd <hr/> City, State, Zip Code Terry, MS 39170-9429 <hr/> Name of Employer (Required) Aamco Transmission	09/11/2023	\$25.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$530.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lee Jackson <hr/> Mailing Address 5157 Montavale S <hr/> City, State, Zip Code Southaven, MS 38672-2513 <hr/> Name of Employer (Required) Not Employed	08/13/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00

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 IBEW PAC	08/23/2023	\$10,000.00
Mailing Address 900 7th St NW		
City, State, Zip Code Washington, DC 20001-3886		
Name of Employer (Required) _____		
Occupation (Required) _____	Aggregate year-to-date	\$276,000.00
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 Kavanagh	09/13/2023	\$250.00
Mailing Address 134 Saint Jude St		
City, State, Zip Code Biloxi, MS 39530-3603		
Name of Employer (Required) Tellabs		
Occupation (Required) Vice President	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 Gratia Karmes	09/24/2023	\$5.00
Mailing Address 417 Chapin St		
City, State, Zip Code Starkville, MS 39759-2620		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$495.00
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 R. Segars III	08/04/2023	\$500.00
Mailing Address 4429 Forest Park Dr		
City, State, Zip Code Jackson, MS 39211-6039		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00

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 Jeff Justis <hr/> Mailing Address 710 Long Meadow Dr <hr/> City, State, Zip Code Oxford, MS 38655-9792 <hr/> Name of Employer (Required) Not Employed	09/25/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$825.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Peter Smith <hr/> Mailing Address 403 Whippoorwill Rd <hr/> City, State, Zip Code Brandon, MS 39047-6434 <hr/> Name of Employer (Required) Not Employed	09/26/2023	\$100.00
Occupation (Required) Not Employed	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) _____		
Full Name Charles Fenner <hr/> Mailing Address PO Box 759 <hr/> City, State, Zip Code Edna, TX 77957-0759 <hr/> Name of Employer (Required) Not Employed	08/06/2023	\$1,000.00
Occupation (Required) Retired	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) _____		
Full Name Douglas Masterson <hr/> Mailing Address 43 Palm Tree Loop <hr/> City, State, Zip Code Petal, MS 39465-9251 <hr/> Name of Employer (Required) University of Southern Mississippi	09/16/2023	\$25.00
Occupation (Required) Chemist	Aggregate year-to-date	\$565.00

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 Alim and Sons LLC <hr/> Mailing Address 30038 Hideaway Dr <hr/> City, State, Zip Code Amory, MS 38821-8741 <hr/> Name of Employer (Required) _____ <hr/> Occupation (Required) _____	08/07/2023	\$1,000.00
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 R. Clark Webb <hr/> Mailing Address 846 Van Duzer St <hr/> City, State, Zip Code Staten Island, NY 10304-1816 <hr/> Name of Employer (Required) Metropolitan Transportation Authority <hr/> Occupation (Required) It Professional	08/07/2023	\$25.00
Aggregate year-to-date		\$287.00
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 Sally Faulkner <hr/> Mailing Address 108 Sumach St <hr/> City, State, Zip Code Lookout Mountai, TN 37350-1132 <hr/> Name of Employer (Required) Not Employed <hr/> Occupation (Required) Not Employed	08/17/2023	\$25.00
Aggregate year-to-date		\$3,025.00
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 Cristen Hemmins <hr/> Mailing Address 101 County Road 178 <hr/> City, State, Zip Code Oxford, MS 38655-8479 <hr/> Name of Employer (Required) Self Employed <hr/> Occupation (Required) Ad Sales	08/17/2023	\$100.00
Aggregate year-to-date		\$350.00

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 Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed	08/27/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,045.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Reita E. Schmidtling Mailing Address 102 Driftwood Dr City, State, Zip Code Long Beach, MS 39560-5811 Name of Employer (Required) Not Employed	09/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	09/19/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Arthur Collins Mailing Address 952 Mackall Farms Ln City, State, Zip Code McLean, VA 22101-1645 Name of Employer (Required) The GROUP DC	09/19/2023	\$1,000.00
Occupation (Required) Business Consultant	Aggregate year-to-date	\$1,000.00

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 Graham Mailing Address 520 Deer Creek Dr City, State, Zip Code Oxford, MS 38655-8559 Name of Employer (Required) Not Employed	08/19/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$650.00
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 Hamilton Mailing Address 3701 58th Ave City, State, Zip Code Meridian, MS 39307-2905 Name of Employer (Required) Self Employed	08/29/2023	\$10.00
Occupation (Required) Restauranteur	Aggregate year-to-date	\$240.00
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 Janice Walker Mailing Address 5950 B N Colony Blvd City, State, Zip Code Jackson, MS 39206-2404 Name of Employer (Required) Federal Emergency Management Agency	09/30/2023	\$25.00
Occupation (Required) Administrative Support Specialist	Aggregate year-to-date	\$625.00
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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	07/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00

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 Gerald Blessey Mailing Address 2577 Chatham Ct City, State, Zip Code Biloxi, MS 39531-2758 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/21/2023	\$33.00
Aggregate year-to-date		\$2,083.00
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 Richardson Mailing Address 6008 Vista Cir City, State, Zip Code Gulfport, MS 39507-4634 Name of Employer (Required) Chism Strategies Occupation (Required) Consultant	08/31/2023	\$250.00
Aggregate year-to-date		\$1,350.00
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 Hugh B. Jones Jr Mailing Address PO Box 1408 City, State, Zip Code Ridgeland, MS 39158-1408 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$50.00
Aggregate year-to-date		\$225.00
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 Akins Mailing Address 86449 Meadowwood Dr City, State, Zip Code Yulee, FL 32097-6427 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/02/2023	\$50.00
Aggregate year-to-date		\$746.00

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 Mike Thorne Mailing Address 516 Chestnut Dr City, State, Zip Code Starkville, MS 39759-3639 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/22/2023	\$250.00
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 Mary Entrekin Mailing Address 129 Whispering Oaks Xing City, State, Zip Code Pearl, MS 39208-4152 Name of Employer (Required) United Methodist Church Occupation (Required) Compliance Analyst	09/23/2023	\$10.00
Aggregate year-to-date		\$380.60
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/03/2023	\$25.00
Aggregate year-to-date		\$833.50
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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/13/2023	\$25.00
Aggregate year-to-date		\$880.00

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 Bert Ehrhardt Mailing Address 200 Windsor Rdg City, State, Zip Code Oxford, MS 38655-6265 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/23/2023	\$500.00
Aggregate year-to-date		\$2,115.00
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 Eugene Bramlett Jr Mailing Address 1123 College St City, State, Zip Code Columbus, MS 39701-5810 Name of Employer (Required) Covenant United Methodist Church Occupation (Required) Religious Worker	09/24/2023	\$25.00
Aggregate year-to-date		\$1,175.00
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 Ronald H. Blackley Mailing Address 122 Airport Rd City, State, Zip Code Indianola, MS 38751-2685 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/24/2023	\$500.00
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 Felicia Brown-Williams Mailing Address 4010 Council Cir City, State, Zip Code Jackson, MS 39206-5813 Name of Employer (Required) David & Lucile Packard Foundation Occupation (Required) Advisor	09/14/2023	\$50.00
Aggregate year-to-date		\$550.00

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 Mcinnis Mailing Address 2509 Promenade Blvd City, State, Zip Code Ocean Springs, MS 39564-8720 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/14/2023	\$1,000.00
Aggregate year-to-date		\$3,000.00
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 Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/25/2023	\$25.00
Aggregate year-to-date		\$885.00
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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	09/05/2023	\$15.00
Aggregate year-to-date		\$602.00
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 Drew Smith Mailing Address 2935 Corston Rd City, State, Zip Code Ann Arbor, MI 48105-3714 Name of Employer (Required) University of Michigan Occupation (Required) Treasurer	09/26/2023	\$1,000.00
Aggregate year-to-date		\$2,000.00

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 Randall B. Wall <hr/> Mailing Address 2206 Culleywood Rd <hr/> City, State, Zip Code Jackson, MS 39211-5815 <hr/> Name of Employer (Required) Not Employed	08/06/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Donna S. Smith <hr/> Mailing Address 711 6th Ave N <hr/> City, State, Zip Code Columbus, MS 39701-4617 <hr/> Name of Employer (Required) Self Employed	08/07/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Misty Shaw-Feder <hr/> Mailing Address 1202 Iola Rd <hr/> City, State, Zip Code Ocean Springs, MS 39564-2819 <hr/> Name of Employer (Required) Self Employed	08/17/2023	\$500.00
Occupation (Required) Education	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) _____		
Full Name Eric Beamon <hr/> Mailing Address 15055 Swan Lake Blvd <hr/> City, State, Zip Code Gulfport, MS 39503-8613 <hr/> Name of Employer (Required) Not Employed	08/27/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00

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 Juanita Boutin	09/07/2023	\$25.00
Mailing Address PO Box 400		
City, State, Zip Code Oxford, MS 38655-0400		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$850.00
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 E. K. Pruitt	09/20/2023	\$100.00
Mailing Address 4217 Oakridge Dr		
City, State, Zip Code Jackson, MS 39216-3420		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
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 Will Baetz	09/20/2023	\$250.00
Mailing Address 850 N Randolph St		
City, State, Zip Code Arlington, VA 22203-4018		
Name of Employer (Required) US Navy		
Occupation (Required) Engineer	Aggregate year-to-date	\$350.00
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 Kathaleen Miller	09/30/2023	\$25.00
Mailing Address 13509 Circle G Ranch Rd		
City, State, Zip Code Picayune, MS 39466-9586		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00

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 Joseph Alsop Mailing Address 675 C Hale St City, State, Zip Code Beverly, MA 01915-2166 Name of Employer (Required) Alsop Louie Partners Occupation (Required) Venture Partner	09/30/2023	\$1,000.00
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 Thomas Neyhart Mailing Address 145 James Dr E City, State, Zip Code Saint Rose, LA 70087-4006 Name of Employer (Required) PosiGen Solar & Energy Efficiency Occupation (Required) Management	08/31/2023	\$100.00
Aggregate year-to-date		\$5,200.00
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 Houston Mailing Address PO Box 72 City, State, Zip Code Aberdeen, MS 39730-0072 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/01/2023	\$500.00
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 Heather Denison Mailing Address 104 Temple Ter City, State, Zip Code Ocean Springs, MS 39564-5402 Name of Employer (Required) Self Employed Occupation (Required) Photographer	08/12/2023	\$200.00
Aggregate year-to-date		\$1,000.00

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 Lee Smithson Mailing Address 155 Castle Cir City, State, Zip Code Madison, MS 39110-9403 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/22/2023	\$250.00
Aggregate year-to-date		\$417.90
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 Lana Richardson Mailing Address 10611 County Road 500 City, State, Zip Code Ripley, MS 38663-9199 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/12/2023	\$100.00
Aggregate year-to-date		\$655.00
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 Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/23/2023	\$25.00
Aggregate year-to-date		\$680.50
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 Belinda Alexander Mailing Address 2574 Old Bay Rd City, State, Zip Code Biloxi, MS 39531-2829 Name of Employer (Required) Memorial Hospital at Gulfport Occupation (Required) Healthcare Worker	08/03/2023	\$50.00
Aggregate year-to-date		\$650.00

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 Anita Yarbrough Mailing Address 202 Lakeside Dr City, State, Zip Code Houston, MS 38851-7432 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/24/2023	\$7.50
Aggregate year-to-date		\$392.50
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 Diane Cockrum Mailing Address 600 County Road 515 City, State, Zip Code Ripley, MS 38663-8347 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/14/2023	\$25.00
Aggregate year-to-date		\$275.00
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 Nathan Prescott Mailing Address 309 Live Oak Ave City, State, Zip Code Ocean Springs, MS 39564-3909 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/26/2023	\$250.00
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 Stephanie Scott Mailing Address 433 Greenwood Ln City, State, Zip Code Ridgeland, MS 39157-4043 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/06/2023	\$250.00
Aggregate year-to-date		\$250.00

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 Clinton Mayes Mailing Address 100 Chilton Pl City, State, Zip Code Madison, MS 39110-7810 Name of Employer (Required) Family Health Care Clinic Occupation (Required) COO	08/17/2023	\$50.00
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 Andrew Beck Mailing Address 5250 Vanston Rd City, State, Zip Code Cutchogue, NY 11935-1630 Name of Employer (Required) Self Employed Occupation (Required) Public Policy	08/27/2023	\$2,500.00
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 Francis Turner Mailing Address 166 Steep Holw City, State, Zip Code Hattiesburg, MS 39402-7004 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/18/2023	\$100.00
Aggregate year-to-date		\$625.00
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 Vick Etheridge Mailing Address 4212 N Harper Rd City, State, Zip Code Corinth, MS 38834-2407 Name of Employer (Required) Corinthian, Inc. Occupation (Required) President	09/28/2023	\$5,000.00
Aggregate year-to-date		\$5,000.00

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 R. Bradley <hr/> Mailing Address 107 Philip Rd <hr/> City, State, Zip Code Oxford, MS 38655-2013 <hr/> Name of Employer (Required) Not Employed	09/28/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$10,260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Keith Johnson <hr/> Mailing Address PO Box 421 <hr/> City, State, Zip Code Nesbit, MS 38651-0421 <hr/> Name of Employer (Required) Not Employed	08/28/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,150.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kevin Shirley <hr/> Mailing Address 114 Harvey St <hr/> City, State, Zip Code Belzoni, MS 39038-3112 <hr/> Name of Employer (Required) Self Employed	08/09/2023	\$50.00
Occupation (Required) It Contractor	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) _____		
Full Name William Himel <hr/> Mailing Address 5155 Madison St <hr/> City, State, Zip Code Skokie, IL 60077-5233 <hr/> Name of Employer (Required) Not Employed	08/09/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00

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 Ron Coleman	09/09/2023	\$10.00
Mailing Address 316 Quail Creek Dr		
City, State, Zip Code Oxford, MS 38655-6108		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
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 Faye Cox	09/20/2023	\$50.00
Mailing Address 704 Northpointe Cv		
City, State, Zip Code Oxford, MS 38655-7708		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Ann Rabalais	09/30/2023	\$10.00
Mailing Address 132 Sara Fox Dr		
City, State, Zip Code Brandon, MS 39047-5526		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$307.00
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 Leslie Steverson	07/30/2023	\$25.00
Mailing Address 2313 Farrell Cir		
City, State, Zip Code Gulfport, MS 39507-2222		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$320.00

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 Mary Geoghegan	09/21/2023	\$150.00
Mailing Address 227 Greenfield Pl		
City, State, Zip Code Brandon, MS 39047-9007		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$950.00
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 W. Powers	08/31/2023	\$10.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
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 Esther Chung	09/22/2023	\$500.00
Mailing Address 3281 Greer Rd		
City, State, Zip Code Palo Alto, CA 94303-4029		
Name of Employer (Required) Not Employed		
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 Roy Decker	08/22/2023	\$100.00
Mailing Address 4044 Oakridge Dr		
City, State, Zip Code Jackson, MS 39216-3413		
Name of Employer (Required) DuvallDecker		
Occupation (Required) Architects	Aggregate year-to-date	\$1,700.00

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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	09/12/2023	\$15.00
Aggregate year-to-date		\$602.00
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 Synarus Green Mailing Address 138 Pine Island Dr City, State, Zip Code Jackson, MS 39206-3234 Name of Employer (Required) US Dept of Justice Occupation (Required) Federal Liason	08/23/2023	\$20.00
Aggregate year-to-date		\$270.00
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 Jane Woosley Mailing Address 618 Brampton Pl City, State, Zip Code Ridgeland, MS 39157-4195 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/23/2023	\$500.00
Aggregate year-to-date		\$650.00
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 Mack Lowery Mailing Address 5055 Myers Rd City, State, Zip Code Terry, MS 39170-9429 Name of Employer (Required) Aamco Transmission Occupation (Required) Business Owner	09/03/2023	\$5.00
Aggregate year-to-date		\$530.00

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 Jacob Knight Mailing Address 6873 Sweetclover Dr City, State, Zip Code Ocean Springs, MS 39564-5079 Name of Employer (Required) JSR Micro	09/13/2023	\$50.00
Occupation (Required) Software Engineer	Aggregate year-to-date	\$350.00
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 Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	08/14/2023	\$25.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,197.00
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 Andrew Dickson Mailing Address 807 Sth 19Th Ave City, State, Zip Code Hattiesburg, MS 39401 Name of Employer (Required) Not Employed	09/14/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,200.00
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 Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed	08/16/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$478.00

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 Dianne Veal	08/07/2023	\$500.00
Mailing Address 871 Ranson Rd		
City, State, Zip Code Columbus, MS 39701-8638		
Name of Employer (Required) Veal Chiropractic Center PC		
Occupation (Required) Business Owner	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 Lori Karny	08/17/2023	\$20.00
Mailing Address 6230 Wilshire Blvd		
City, State, Zip Code Los Angeles, CA 90048-5126		
Name of Employer (Required) Self Employed		
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$602.00
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 Clinton Mayes	09/18/2023	\$100.00
Mailing Address 100 Chilton Pl		
City, State, Zip Code Madison, MS 39110-7810		
Name of Employer (Required) Family Health Care Clinic		
Occupation (Required) COO	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 Eric Taylor	09/28/2023	\$250.00
Mailing Address 224 Crawford St		
City, State, Zip Code Madison, MS 39110-9502		
Name of Employer (Required) Rio Apartments		
Occupation (Required) Developer	Aggregate year-to-date	\$450.00

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 Latham Mailing Address 2090 Jefferson Pkwy City, State, Zip Code Hernando, MS 38632-5905 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$100.00
Aggregate year-to-date		\$1,650.00
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 Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$31.79
Aggregate year-to-date		\$1,061.50
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 Geneva C. Moon Mailing Address PO Box 128 City, State, Zip Code Becker, MS 38825-0128 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/08/2023	\$500.00
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 Brenda Coleman Mailing Address 4013 Pinehaven Dr City, State, Zip Code Jackson, MS 39209-9736 Name of Employer (Required) Hinds County Board of Supervisors Occupation (Required) Fiscal Officer	09/08/2023	\$25.00
Aggregate year-to-date		\$275.00

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 IBEW PAC Mailing Address 900 7th St NW City, State, Zip Code Washington, DC 20001-3886 Name of Employer (Required) Occupation (Required)	09/08/2023	\$11,000.00
Aggregate year-to-date		\$276,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/29/2023	\$15.00
Aggregate year-to-date		\$680.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name David Collins Mailing Address 1689 State Road 30 W City, State, Zip Code Myrtle, MS 38650-9529 Name of Employer (Required) Innovate Mississippi Occupation (Required) Entrepreneurial Development Consultant	09/19/2023	\$1,000.00
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) _____ Full Name Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/20/2023	\$50.00
Aggregate year-to-date		\$375.00

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 Raburn Coln	07/30/2023	\$22.50
Mailing Address 288 County Road 218		
City, State, Zip Code Corinth, MS 38834-7531		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$345.00
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 Gray	08/30/2023	\$100.00
Mailing Address 1425 Jackson St		
City, State, Zip Code Corinth, MS 38834-3423		
Name of Employer (Required) Self Employed		
Occupation (Required) Architect	Aggregate year-to-date	\$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 Joseph Sheppard	09/10/2023	\$250.00
Mailing Address PO Box 327		
City, State, Zip Code Cuero, TX 77954-0327		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,950.00
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 Vern Gavin	09/21/2023	\$250.00
Mailing Address 102 Moselle Dr		
City, State, Zip Code Clinton, MS 39056-5739		
Name of Employer (Required) Gavin Travel Agency		
Occupation (Required) Travel Agency	Aggregate year-to-date	\$250.00

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 Jay K Johnson Mailing Address 908 Chickasaw Rd City, State, Zip Code Oxford, MS 38655-2725 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/21/2023	\$500.00
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 Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$10.00
Aggregate year-to-date		\$885.00
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 Danny Rasberry Mailing Address 754 N 8th Ave City, State, Zip Code Laurel, MS 39440-3451 Name of Employer (Required) Rasberry Producer Group Occupation (Required) Sales	08/02/2023	\$500.00
Aggregate year-to-date		\$3,250.00
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 Claire Davis Mailing Address 44714 Audubon Sq City, State, Zip Code Ashburn, VA 20147-6295 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/02/2023	\$25.00
Aggregate year-to-date		\$930.00

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 Beth Stoor Mailing Address 9314 SW 97th Ln City, State, Zip Code Ocala, FL 34481-7573 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/23/2023	\$25.00
Aggregate year-to-date		\$295.00
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/23/2023	\$25.00
Aggregate year-to-date		\$833.50
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 E. K. Pruitt Mailing Address 4217 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3420 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/03/2023	\$25.00
Aggregate year-to-date		\$880.00
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 Barrett Mailing Address 2086 Old Taylor Rd City, State, Zip Code Oxford, MS 38655-5500 Name of Employer (Required) Law Offices of Richard R. Barrett, PLLC Occupation (Required) Attorney	08/23/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00

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 Brenda F. Hyde Mailing Address PO Box 13646 City, State, Zip Code Jackson, MS 39236-3646 Name of Employer (Required) Southern Echo Inc. Occupation (Required) Assistant Director	08/23/2023	\$100.00
Aggregate year-to-date		\$425.25
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 Jeffrey Watt Mailing Address 915 Old Taylor Rd City, State, Zip Code Oxford, MS 38655-4637 Name of Employer (Required) University of Mississippi Occupation (Required) Professor	08/14/2023	\$150.00
Aggregate year-to-date		\$400.00
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 Cherri Lightsey Mailing Address 3701 Crawford Rd City, State, Zip Code Crawford, MS 39743-9629 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/24/2023	\$10.00
Aggregate year-to-date		\$520.00
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 Joyce Tubb Mailing Address 520 Lake Park Dr City, State, Zip Code Tupelo, MS 38801-8423 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/25/2023	\$100.00
Aggregate year-to-date		\$400.00

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 Michael O'Neal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic Occupation (Required) Physician	08/25/2023	\$25.00
Aggregate year-to-date		\$2,526.00
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 Sallye Howorth Mailing Address 1200 Harrison Ave City, State, Zip Code Oxford, MS 38655-3932 Name of Employer (Required) Not Employed Occupation (Required) University Student	09/15/2023	\$250.00
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 Claire Levine Mailing Address 6400 N Montana Ave City, State, Zip Code Portland, OR 97217-4879 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/16/2023	\$250.00
Aggregate year-to-date		\$475.00
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 Harold Barber Boone Mailing Address 3956 Old Canton Rd City, State, Zip Code Jackson, MS 39216-3617 Name of Employer (Required) Butler Snow LLP Occupation (Required) Attorney	09/06/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Mark C. Wallfisch <hr/> Mailing Address 128 Central Park Pl <hr/> City, State, Zip Code New Orleans, LA 70124-3708 <hr/> Name of Employer (Required) Not Employed	09/16/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$625.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Alan Solomont <hr/> Mailing Address 60 Beaver Rd <hr/> City, State, Zip Code Weston, MA 02493-1018 <hr/> Name of Employer (Required) Not Employed	09/27/2023	\$500.00
Occupation (Required) Not Employed	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) _____		
Full Name Janice Antonow <hr/> Mailing Address 3336 Whippoorwill Ln <hr/> City, State, Zip Code Oxford, MS 38655-5311 <hr/> Name of Employer (Required) City of Oxford	09/27/2023	\$25.00
Occupation (Required) Alderman	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Stacy Callender <hr/> Mailing Address 4047 Pine Hill Dr <hr/> City, State, Zip Code Jackson, MS 39206-5739 <hr/> Name of Employer (Required) MS Dept of Education	08/07/2023	\$100.00
Occupation (Required) Program Coordinator	Aggregate year-to-date	\$500.00

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 Feeley Mailing Address 7371 N Aberdeen Dr City, State, Zip Code Pass Christian, MS 39571-7012 Name of Employer (Required) Self Employed Occupation (Required) Engineer	09/28/2023	\$50.00
Aggregate year-to-date		\$300.00
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 Leslie Steverson Mailing Address 2313 Farrell Cir City, State, Zip Code Gulfport, MS 39507-2222 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/28/2023	\$30.00
Aggregate year-to-date		\$320.00
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 Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/08/2023	\$25.00
Aggregate year-to-date		\$478.00
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 Leslie M. Westbrook Mailing Address 800 College Hill Rd City, State, Zip Code Oxford, MS 38655-2767 Name of Employer (Required) Self Employed Occupation (Required) Marketing	08/08/2023	\$2,500.00
Aggregate year-to-date		\$58,500.00

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 Mary Miller Mailing Address 510 E 86th St City, State, Zip Code New York, NY 10028-7507 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/28/2023	\$50.00
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 Debra Anderson Mailing Address 828 Battle Rd City, State, Zip Code Byhalia, MS 38611-8999 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/29/2023	\$100.00
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 Brombacher Mailing Address 108 Coachmans Rd City, State, Zip Code Madison, MS 39110-9227 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/29/2023	\$25.00
Aggregate year-to-date		\$800.00
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 Jo Ann Denley Mailing Address PO Box 278 City, State, Zip Code Bruce, MS 38915-0278 Name of Employer (Required) Calhoun County Journal Occupation (Required) Columnist	08/29/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00

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 Sheila Newtown Mailing Address 3893 County Route 10 City, State, Zip Code De Peyster, NY 13633-3405 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$10.00
Aggregate year-to-date		\$240.00
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 Elwin Hall Mailing Address 2204 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-4104 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	07/30/2023	\$10.00
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 Dan Jones Mailing Address 314 S Extension St City, State, Zip Code Hazlehurst, MS 39083-3310 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/01/2023	\$250.00
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 William Denman Mailing Address 417 Main St City, State, Zip Code Winchester, MA 01890-2925 Name of Employer (Required) Massachusetts General Physicians Organization Occupation (Required) Physician	08/11/2023	\$50.00
Aggregate year-to-date		\$618.30

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 Joyce N. Dortch <hr/> Mailing Address 4626 Hickory Ridge Rd <hr/> City, State, Zip Code Jackson, MS 39211-5846 <hr/> Name of Employer (Required) Not Employed	08/11/2023	\$500.00
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) _____		
Full Name David Erdman <hr/> Mailing Address 2445 Selwyn Ave <hr/> City, State, Zip Code Charlotte, NC 28209-1668 <hr/> Name of Employer (Required) Self Employed	09/11/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$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) _____		
Full Name Brian Johnson <hr/> Mailing Address 113 Rosedowne Dr <hr/> City, State, Zip Code Madison, MS 39110-4757 <hr/> Name of Employer (Required) Trustmark National Bank	09/22/2023	\$1,000.00
Occupation (Required) Insurance Consultant	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) _____		
Full Name Jerry Sandlin <hr/> Mailing Address 303 Robbers Trce <hr/> City, State, Zip Code Ridgeland, MS 39157-8773 <hr/> Name of Employer (Required) Not Employed	09/12/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00

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 Patrick Phillips <hr/> Mailing Address 653 Ferncliff Dr <hr/> City, State, Zip Code Jackson, MS 39211-2606 <hr/> Name of Employer (Required) Not Employed	09/23/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Daniel Pair <hr/> Mailing Address 968 Road 261 <hr/> City, State, Zip Code Tupelo, MS 38801-7600 <hr/> Name of Employer (Required) Social Security Administration	08/03/2023	\$25.00
Occupation (Required) Claims Specialist	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Maureen McKerns <hr/> Mailing Address 813 42nd Ave <hr/> City, State, Zip Code Gulfport, MS 39501-1451 <hr/> Name of Employer (Required) Not Employed	08/13/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joyce Leech <hr/> Mailing Address 214 Main St S <hr/> City, State, Zip Code Amory, MS 38821-4218 <hr/> Name of Employer (Required) Not Employed	09/13/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$650.00

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 Jerry Smith	09/13/2023	\$50.00
Mailing Address 136 St Regis Dr		
City, State, Zip Code Madison, MS 39110-7798		
Name of Employer (Required) Mississippi Baptist Medical Center		
Occupation (Required) Pharmacist	Aggregate year-to-date	\$646.00
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 Hecht	09/24/2023	\$500.00
Mailing Address 105 Morton St		
City, State, Zip Code Newton Center, MA 02459-1029		
Name of Employer (Required) Yale University		
Occupation (Required) Professor	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 Steve Tadlock	08/24/2023	\$10.00
Mailing Address 2985 Beaumont Cv		
City, State, Zip Code Pearl, MS 39208-5324		
Name of Employer (Required) Broderick Advertising		
Occupation (Required) Creative Director	Aggregate year-to-date	\$295.00
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 Matt Holleman III	09/25/2023	\$25.00
Mailing Address 310 Lake Castle Rd		
City, State, Zip Code Madison, MS 39110-8603		
Name of Employer (Required) Galaxie Corp		
Occupation (Required) President	Aggregate year-to-date	\$208.00

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 Karen Smith	08/05/2023	\$15.00
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Dannie Ball	09/15/2023	\$25.00
Mailing Address 104 Bay View Ct		
City, State, Zip Code Bay Saint Louis, MS 39520-4602		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.00
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 Frank Witherspoon	09/26/2023	\$250.00
Mailing Address 910 Lincoln Ave		
City, State, Zip Code Oxford, MS 38655-4328		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,350.00
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 Carol Halliburton	08/06/2023	\$50.00
Mailing Address 5032 Sunnyvale Dr		
City, State, Zip Code Jackson, MS 39211-4843		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$416.00

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 Laura Hamilton	08/26/2023	\$25.00
Mailing Address 707 Randolph Ave SE		
City, State, Zip Code Huntsville, AL 35801-3606		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$748.47
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 Allan Johannesen	09/06/2023	\$100.00
Mailing Address 4 Carleton Rd		
City, State, Zip Code Rochdale, MA 01542-1144		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
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 Hamilton	09/16/2023	\$25.00
Mailing Address 707 Randolph Ave SE		
City, State, Zip Code Huntsville, AL 35801-3606		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$748.47
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 Jamie Barnett	09/17/2023	\$500.00
Mailing Address 801 Yorkshire Ct		
City, State, Zip Code Oxford, MS 38655-4441		
Name of Employer (Required) Viasat, Inc		
Occupation (Required) Satellite Executive	Aggregate year-to-date	\$1,000.00

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 Kaye Bernheim <hr/> Mailing Address PO Box 7081 <hr/> City, State, Zip Code Gulfport, MS 39506-7081 <hr/> Name of Employer (Required) Gastroenterology Center PA <hr/> Occupation (Required) Healthcare	09/07/2023	\$1,000.00
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 Elizabeth Cagle <hr/> Mailing Address 411 N Montgomery St <hr/> City, State, Zip Code Starkville, MS 39759-2605 <hr/> Name of Employer (Required) MS State University <hr/> Occupation (Required) Instructor	09/18/2023	\$25.00
Aggregate year-to-date		\$332.25
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 The NEA Fund for Children & Public Educa <hr/> Mailing Address 1201 16th St NW <hr/> City, State, Zip Code Washington, DC 20036-3201 <hr/> Name of Employer (Required) <hr/> Occupation (Required) 	09/28/2023	\$10,000.00
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 Leesa Golden <hr/> Mailing Address 435 Humphries Cove Rd <hr/> City, State, Zip Code West Point, MS 39773-8212 <hr/> Name of Employer (Required) Not Employed <hr/> Occupation (Required) Not Employed	09/28/2023	\$50.00
Aggregate year-to-date		\$325.00

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 Darrylinn Todd Mailing Address 3616 Roman Forest Dr City, State, Zip Code Southaven, MS 38672-6784 Name of Employer (Required) University of Tennessee Health Science Center Occupation (Required) Administrator	08/18/2023	\$100.00
Aggregate year-to-date		\$300.00
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 Nicholas B. Phillips Mailing Address PO Box 566 City, State, Zip Code Iuka, MS 38852-0566 Name of Employer (Required) Phillips & Phillips, P.A. Occupation (Required) Attorney	09/29/2023	\$250.00
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 Marjorie Williams Mailing Address 505 Ward Ave City, State, Zip Code Ocean Springs, MS 39564-4844 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/19/2023	\$100.00
Aggregate year-to-date		\$257.25
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 Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/29/2023	\$20.00
Aggregate year-to-date		\$285.00

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 Conwill Mailing Address 1005 County Road 357 City, State, Zip Code New Albany, MS 38652-8981 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$25.00
Aggregate year-to-date		\$400.00
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 Sheet Metal Air Rail Transportation Poli Mailing Address 1750 New York Ave NW City, State, Zip Code Washington, DC 20006-5301 Name of Employer (Required) Occupation (Required)	08/21/2023	\$25,000.00
Aggregate year-to-date		\$50,000.00
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 Steve Tadlock Mailing Address 2985 Beaumont Cv City, State, Zip Code Pearl, MS 39208-5324 Name of Employer (Required) Broderick Advertising Occupation (Required) Creative Director	08/31/2023	\$10.00
Aggregate year-to-date		\$295.00
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 Joanne Rhodes Mailing Address 7904 Ashbrook Cv City, State, Zip Code Germantown, TN 38138-2907 Name of Employer (Required) University of Memphis Occupation (Required) Instructor	08/31/2023	\$250.00
Aggregate year-to-date		\$250.00

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 C. Shurden <hr/> Mailing Address 2122 Taryn Ln <hr/> City, State, Zip Code Nesbit, MS 38651-9513 <hr/> Name of Employer (Required) Not Employed	09/01/2023	\$250.00
Occupation (Required) Not Employed	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 Emily Liles <hr/> Mailing Address 6346 Nellwood Dr <hr/> City, State, Zip Code Olive Branch, MS 38654-8253 <hr/> Name of Employer (Required) Not Employed	09/22/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
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 Hamilton <hr/> Mailing Address 3701 58th Ave <hr/> City, State, Zip Code Meridian, MS 39307-2905 <hr/> Name of Employer (Required) Self Employed	09/23/2023	\$10.00
Occupation (Required) Restaurateur	Aggregate year-to-date	\$240.00
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 Curtis Gray <hr/> Mailing Address 37 County Road 317 <hr/> City, State, Zip Code Heidelberg, MS 39439-3679 <hr/> Name of Employer (Required) Jasper	08/03/2023	\$10.00
Occupation (Required) County Supervisor	Aggregate year-to-date	\$235.00

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 Lydia Quarles Mailing Address 1016 Louisville St City, State, Zip Code Starkville, MS 39759-3953 Name of Employer (Required) Mozingo Quarles PLLC Occupation (Required) Attorney	08/13/2023	\$500.00
Aggregate year-to-date		\$1,871.00
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 Ward Mailing Address 1725 Hearthglow Ln City, State, Zip Code Charlottesville, VA 22901-1273 Name of Employer (Required) Crutchfield Corporation Occupation (Required) Sales Advisor	09/24/2023	\$200.00
Aggregate year-to-date		\$317.90
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 Wilemon Mailing Address 103 Davis Dr City, State, Zip Code Aberdeen, MS 39730-2909 Name of Employer (Required) Euphrates Consulting Group, LLC Occupation (Required) Chemical Engineer	09/04/2023	\$25.00
Aggregate year-to-date		\$320.00
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/05/2023	\$30.00
Aggregate year-to-date		\$833.50

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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	08/25/2023	\$10.00
Aggregate year-to-date		\$602.00
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 Gerald Blessey Mailing Address 2577 Chatham Ct City, State, Zip Code Biloxi, MS 39531-2758 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/06/2023	\$500.00
Aggregate year-to-date		\$2,083.00
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 Jenkins-Joffe Mailing Address 3825 Legation St NW City, State, Zip Code Washington, DC 20015-2701 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/16/2023	\$35.00
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 Carol Halliburton Mailing Address 5032 Sunnyvale Dr City, State, Zip Code Jackson, MS 39211-4843 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/27/2023	\$25.00
Aggregate year-to-date		\$416.00

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 H. Hickman	08/07/2023	\$250.00
Mailing Address 412 S Central Ave		
City, State, Zip Code New Albany, MS 38652-3701		
Name of Employer (Required) Self Employed		
Occupation (Required) Producer	Aggregate year-to-date	\$2,250.00
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 Claire Davis	09/07/2023	\$100.00
Mailing Address 44714 Audubon Sq		
City, State, Zip Code Ashburn, VA 20147-6295		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$930.00
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 Sondheim	09/18/2023	\$350.00
Mailing Address 830 W 40th St		
City, State, Zip Code Baltimore, MD 21211-2129		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$350.00
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 Patty Quillin	09/18/2023	\$20,000.00
Mailing Address 849 Almar Ave		
City, State, Zip Code Santa Cruz, CA 95060-5875		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$20,000.00

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 R. Clark Webb	08/28/2023	\$25.00
Mailing Address 846 Van Duzer St		
City, State, Zip Code Staten Island, NY 10304-1816		
Name of Employer (Required) Metropolitan Transportation Authority		
Occupation (Required) It Professional	Aggregate year-to-date	\$287.00
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 T. Gillespie	09/29/2023	\$250.00
Mailing Address PO Box 573		
City, State, Zip Code Norman Park, GA 31771-0573		
Name of Employer (Required) 1st Presbyterian Moultrie		
Occupation (Required) Presbyterian Minister	Aggregate year-to-date	\$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 Brad Williams	08/29/2023	\$1,000.00
Mailing Address 302 Twin Oaks Cv		
City, State, Zip Code Ridgeland, MS 39157-8502		
Name of Employer (Required) Select Edge Realty		
Occupation (Required) Real Estate	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 Hugh Hanna	09/30/2023	\$100.00
Mailing Address 335 Southern Cir		
City, State, Zip Code Gulfport, MS 39507-1536		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00

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 Susan Rushet	07/30/2023	\$100.00
Mailing Address 1656 Highway 43 S		
City, State, Zip Code Pelahatchie, MS 39145-3440		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
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 Ann Smith	07/30/2023	\$10.00
Mailing Address PO Box 1865		
City, State, Zip Code Gulfport, MS 39502-1865		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$390.00
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 Andrea Walker	08/20/2023	\$10.00
Mailing Address 1041 County Road 202		
City, State, Zip Code Abbeville, MS 38601-9700		
Name of Employer (Required) American Addiction Center		
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$225.00
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 W. Powers	07/31/2023	\$10.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$300.00

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 Dianne Martin Mailing Address 211 Pebble Brook Dr City, State, Zip Code Clinton, MS 39056-5819 Name of Employer (Required) State of Mississippi Occupation (Required) Developer	07/31/2023	\$43.30
Aggregate year-to-date		\$654.30
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 Miriam Harrington Mailing Address 3800 Fairfax Dr City, State, Zip Code Arlington, VA 22203-1720 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/01/2023	\$26.00
Aggregate year-to-date		\$418.00
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 Roy S. Mitchell Mailing Address 704 Forest Point Dr City, State, Zip Code Brandon, MS 39047-6220 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/22/2023	\$250.00
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 Cherri Lightsey Mailing Address 3701 Crawford Rd City, State, Zip Code Crawford, MS 39743-9629 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/02/2023	\$25.00
Aggregate year-to-date		\$520.00

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 Joshua Phillips <hr/> Mailing Address 184 Sundown Cv <hr/> City, State, Zip Code Madison, MS 39110-8168 <hr/> Name of Employer (Required) Mississippi Asthma and Allergy	09/12/2023	\$3.00
Occupation (Required) Physician	Aggregate year-to-date	\$803.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William B. Thompson <hr/> Mailing Address 4444 Woodlark Dr <hr/> City, State, Zip Code Jackson, MS 39211-6226 <hr/> Name of Employer (Required) Self Employed	08/23/2023	\$200.00
Occupation (Required) Physician	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) _____		
Full Name Ed Clynch <hr/> Mailing Address 401 Colonial Cir <hr/> City, State, Zip Code Starkville, MS 39759-4213 <hr/> Name of Employer (Required) Not Employed	09/24/2023	\$250.00
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) _____		
Full Name Leonard A. Blackwell II <hr/> Mailing Address 11857 Lorraine Rd <hr/> City, State, Zip Code Gulfport, MS 39503-3951 <hr/> Name of Employer (Required) Brunini Law Firm	09/14/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,250.00

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 Janet Scott	08/04/2023	\$500.00
Mailing Address 603 Troon Rd		
City, State, Zip Code Oxford, MS 38655-3596		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$8,500.00
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 William Sussman	08/16/2023	\$500.00
Mailing Address 240 W 75th St		
City, State, Zip Code New York, NY 10023-1725		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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 Don A. Zatroch	08/26/2023	\$25.00
Mailing Address 2366 17th Ave NW		
City, State, Zip Code Saint Paul, MN 55112-5204		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
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 Raleigh Byars	09/27/2023	\$25.00
Mailing Address 48 County Road 229		
City, State, Zip Code Oxford, MS 38655-5800		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$885.00

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 Bailey Mailing Address 1300 E Lafayette St City, State, Zip Code Detroit, MI 48207-2921 Name of Employer (Required) Doner Detroit Occupation (Required) Advertising	09/17/2023	\$100.00
Aggregate year-to-date		\$300.00
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 Karen Sweet Mailing Address 25 Kenmore St City, State, Zip Code Newton, MA 02459-2105 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/18/2023	\$250.00
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 Crymes M. Pittman Mailing Address 2213 Heritage Hill Dr City, State, Zip Code Jackson, MS 39211-5822 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/08/2023	\$250.00
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 Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy	09/19/2023	\$25.00
Aggregate year-to-date		\$780.00

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 Taliscia Tobias Mailing Address 16224 Lily Orchard Rd City, State, Zip Code Moss Point, MS 39562-9002 Name of Employer (Required) US Dept of Veterans Affairs Occupation (Required) Registered Nurse	09/29/2023	\$50.00
Aggregate year-to-date		\$225.00
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 Fino Mailing Address 1030 Augusta Dr City, State, Zip Code Oxford, MS 38655-8142 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/29/2023	\$10.00
Aggregate year-to-date		\$560.00
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 Lee Carson Mailing Address 2288 Waggoner Rd City, State, Zip Code Carthage, MS 39051-9303 Name of Employer (Required) N. L. Carson Construction Co. Occupation (Required) Construction	08/29/2023	\$500.00
Aggregate year-to-date		\$2,700.00
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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/29/2023	\$10.00
Aggregate year-to-date		\$880.00

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 Gail Anderson Mailing Address 1329 Willis Rd City, State, Zip Code Carthage, MS 39051-9126 Name of Employer (Required) Not Employed Occupation (Required) Retired	07/30/2023	\$100.00
Aggregate year-to-date		\$400.00
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 Sittman Mailing Address 1822 Devine St City, State, Zip Code Jackson, MS 39202-1317 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/10/2023	\$100.00
Aggregate year-to-date		\$1,550.00
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 Don A. Zatroch Mailing Address 2366 17th Ave NW City, State, Zip Code Saint Paul, MN 55112-5204 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	07/31/2023	\$25.00
Aggregate year-to-date		\$375.00
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 Sababu Rashid Mailing Address 3946 Azalea Dr City, State, Zip Code Jackson, MS 39206-4509 Name of Employer (Required) International Museum of Muslim Cultures Occupation (Required) Founder	09/22/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Nan Shiverdecker Mailing Address 306 Alabama St City, State, Zip Code New Albany, MS 38652-4137 Name of Employer (Required) NEMiss.News	09/12/2023	\$250.00
Occupation (Required) Writer	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Audrey McBride Mailing Address 1250 E Lakeshore Dr City, State, Zip Code Starkville, MS 39759-2482 Name of Employer (Required) McBride & Co Real Estate	09/13/2023	\$50.00
Occupation (Required) Broker	Aggregate year-to-date	\$490.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joe Love Mailing Address PO Box 802 City, State, Zip Code Summit, MS 39666-0802 Name of Employer (Required) Not Employed	08/04/2023	\$100.00
Occupation (Required) Not Employed	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) _____		
Full Name Nora Brownell Mailing Address 105 Pommander Walk City, State, Zip Code Alexandria, VA 22314-3844 Name of Employer (Required) ESPY Energy Solutions, LLC	09/25/2023	\$250.00
Occupation (Required) Consultant	Aggregate year-to-date	\$1,350.00

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 Hamilton Mailing Address 3701 58th Ave City, State, Zip Code Meridian, MS 39307-2905 Name of Employer (Required) Self Employed Occupation (Required) Restaurateur	09/25/2023	\$100.00
Aggregate year-to-date		\$240.00
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 Maureen McKerns Mailing Address 813 42nd Ave City, State, Zip Code Gulfport, MS 39501-1451 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/27/2023	\$25.00
Aggregate year-to-date		\$400.00
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 Brenda Daniels Mailing Address 120 Cascade Ave City, State, Zip Code Winston Salem, NC 27127-2027 Name of Employer (Required) University of North Carolina School of the Arts Occupation (Required) Associate Dean	09/17/2023	\$100.00
Aggregate year-to-date		\$600.00
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 Stephen Stojcich Mailing Address 319 Magnolia Ave City, State, Zip Code Ocean Springs, MS 39564-4816 Name of Employer (Required) EGH Architects Occupation (Required) Architect	09/19/2023	\$100.00
Aggregate year-to-date		\$235.00

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 Martha Samuelson <hr/> Mailing Address 17 Winthrop St <hr/> City, State, Zip Code West Newton, MA 02465-2308 <hr/> Name of Employer (Required) Anaylsis Group	09/29/2023	\$15,000.00
Occupation (Required) CEO	Aggregate year-to-date	\$40,000.00
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 Luther Ragin Jr <hr/> Mailing Address 160 Cabrini Blvd <hr/> City, State, Zip Code New York, NY 10033-1143 <hr/> Name of Employer (Required) Not Employed	08/09/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
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 Pamela Helms <hr/> Mailing Address 317 Autumn Crest Dr <hr/> City, State, Zip Code Ridgeland, MS 39157-2604 <hr/> Name of Employer (Required) Self Employed	09/09/2023	\$25.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$335.00
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 Maureen McKerns <hr/> Mailing Address 813 42nd Ave <hr/> City, State, Zip Code Gulfport, MS 39501-1451 <hr/> Name of Employer (Required) Not Employed	09/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00

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 William C. Eisenhauer <hr/> Mailing Address 354 9th St NE <hr/> City, State, Zip Code Atlanta, GA 30309-4209 <hr/> Name of Employer (Required) Not Employed	09/30/2023	\$200.00
Occupation (Required) Retired	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Glenn Taylor <hr/> Mailing Address 3644 Old Canton Rd <hr/> City, State, Zip Code Jackson, MS 39216-3313 <hr/> Name of Employer (Required) Copeland Cook Taylor & Bush	07/30/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Tim Wolf <hr/> Mailing Address 5311 Waterstone Dr <hr/> City, State, Zip Code Boulder, CO 80301-4399 <hr/> Name of Employer (Required) Wolf Interests, Inc.	08/21/2023	\$2,500.00
Occupation (Required) Investor	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) _____		
Full Name Michael C. Moore <hr/> Mailing Address 104 Hidden Oaks Cv <hr/> City, State, Zip Code Ridgeland, MS 39157-7703 <hr/> Name of Employer (Required) Self Employed	08/21/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$6,000.00

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 M. Pugh Mailing Address 5924 Whitestone Rd City, State, Zip Code Jackson, MS 39206-2515 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/11/2023	\$25.00
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 Jackie Ray Mailing Address 414 Ronie St City, State, Zip Code Hattiesburg, MS 39401-3564 Name of Employer (Required) Davide Rawlings, Chapter 13 Trustee Occupation (Required) Attorney	08/02/2023	\$500.00
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 Robert O'Brien Mailing Address 6007 SW 240th St City, State, Zip Code Vashon, WA 98070-7247 Name of Employer (Required) Health Net Occupation (Required) COO	09/13/2023	\$100.00
Aggregate year-to-date		\$950.00
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 Angelos Vamvakas Mailing Address 3161 Wayne Dr City, State, Zip Code Diberville, MS 39540-8554 Name of Employer (Required) Self Employed Occupation (Required) Psychiatrist	09/24/2023	\$100.00
Aggregate year-to-date		\$250.00

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 Stephan McDavid Mailing Address 521 N 11th St City, State, Zip Code Oxford, MS 38655-3107 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/25/2023	\$1,000.00
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 Gambetta Mailing Address 130 Harvesters Sq City, State, Zip Code Tupelo, MS 38801-9510 Name of Employer (Required) Mueller Co. Occupation (Required) Engineer	08/05/2023	\$100.00
Aggregate year-to-date		\$402.50
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 Trout IV Mailing Address 439 Laundre Rd City, State, Zip Code Coldwater, MS 38618-3135 Name of Employer (Required) Trout Valley Quail Preserve Occupation (Required) Business Owner	08/05/2023	\$200.00
Aggregate year-to-date		\$300.00
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 Roxann Jackson Mailing Address 1713 Reserve Dr City, State, Zip Code Clinton, MS 39056-5667 Name of Employer (Required) Submittable Occupation (Required) Campaign Support Lead	09/05/2023	\$50.00
Aggregate year-to-date		\$650.00

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 Roger Klingler Mailing Address 7844 E Sandalwood Dr City, State, Zip Code Scottsdale, AZ 85250-7269 Name of Employer (Required) Not Employed	09/15/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$915.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brenda Daniels Mailing Address 120 Cascade Ave City, State, Zip Code Winston Salem, NC 27127-2027 Name of Employer (Required) University of North Carolina School of the Arts	08/17/2023	\$100.00
Occupation (Required) Associate Dean	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert Alexander Mailing Address 18 Highland Meadows Dr City, State, Zip Code Jackson, MS 39211-5949 Name of Employer (Required) Alexander CPA, LLC	08/17/2023	\$100.00
Occupation (Required) Accountant	Aggregate year-to-date	\$900.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elizabeth Smithson Mailing Address 155 Castle Cir City, State, Zip Code Madison, MS 39110-9403 Name of Employer (Required) Not Employed	09/20/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,100.00

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 Patricia Thompson	09/30/2023	\$200.00
Mailing Address PO Box 3913		
City, State, Zip Code Tupelo, MS 38803-3913		
Name of Employer (Required) Way-Fil Jewelry		
Occupation (Required) Business Owner	Aggregate year-to-date	\$300.00
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 Joe Goldenson	08/30/2023	\$250.00
Mailing Address 1406 Cypress St		
City, State, Zip Code Berkeley, CA 94703-1033		
Name of Employer (Required) Self Employed		
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 John B. Clark	09/21/2023	\$100.00
Mailing Address 167 Rolling Meadows Rd		
City, State, Zip Code Ridgeland, MS 39157-9488		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,850.00
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 Constance S. Harvey	08/21/2023	\$500.00
Mailing Address PO Box 88		
City, State, Zip Code Forest, MS 39074-0088		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00

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 Sanford Johnson Mailing Address 643 W 2nd St City, State, Zip Code Clarksdale, MS 38614-3801 Name of Employer (Required) Teach Plus Occupation (Required) State Director	08/31/2023	\$100.00
Aggregate year-to-date		\$650.00
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 Democratic Governors Association Mailing Address 1225 Eye St NW City, State, Zip Code Washington, DC 20005-3914 Name of Employer (Required) Occupation (Required)	09/11/2023	\$750,000.00
Aggregate year-to-date		\$3,700,171.72
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 Peter Smith Mailing Address 403 Whippoorwill Rd City, State, Zip Code Brandon, MS 39047-6434 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/12/2023	\$100.00
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 Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/12/2023	\$100.00
Aggregate year-to-date		\$3,000.00

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 Kenneth Nash Mailing Address 1201 Mission Park Dr City, State, Zip Code Vicksburg, MS 39180-3747 Name of Employer (Required) Nash Family Dentistry Occupation (Required) Dentist	09/23/2023	\$500.00
Aggregate year-to-date		\$1,100.00
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 Gail Hester Mailing Address 470 Fairway Dr City, State, Zip Code New Orleans, LA 70124-1023 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/03/2023	\$3.00
Aggregate year-to-date		\$553.00
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 Campbell Wallace Mailing Address 562 W End Ave City, State, Zip Code New York, NY 10024-2747 Name of Employer (Required) Teneo Occupation (Required) Senior Associate	09/13/2023	\$500.00
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 Robert F. Wilkins Mailing Address 2217 Heritage Hill Dr City, State, Zip Code Jackson, MS 39211-5822 Name of Employer (Required) Morgan & Morgan Occupation (Required) Attorney	08/04/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Charles R. Wilson	09/14/2023	\$50.00
Mailing Address 114 Leighton Rd		
City, State, Zip Code Oxford, MS 38655-2010		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00
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 Jean Fenwick	08/05/2023	\$25.00
Mailing Address 208 S Madison St		
City, State, Zip Code Kosciusko, MS 39090-3946		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,000.00
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 Rheta Johnson	08/25/2023	\$25.00
Mailing Address 117 County Road 259		
City, State, Zip Code Iuka, MS 38852-8542		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,446.00
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 Alexandra Van Beuren	09/05/2023	\$250.00
Mailing Address 509 Wagner St		
City, State, Zip Code Water Valley, MS 38965-2301		
Name of Employer (Required) The B.T.C. Old-Fashioned Grocery		
Occupation (Required) Business Owner	Aggregate year-to-date	\$500.00

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 Craig Mailing Address 434 S Pierce St City, State, Zip Code New Orleans, LA 70119-6802 Name of Employer (Required) Roderick & Solange MacArthur Justice Center Occupation (Required) Attorney	09/26/2023	\$50.00
Aggregate year-to-date		\$225.00
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 Margaret Wodetzki Mailing Address 200 Dominican Dr City, State, Zip Code Madison, MS 39110-8630 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/26/2023	\$250.00
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 Randy Wadkins Mailing Address 1605 Pierce Avenue Ext City, State, Zip Code Oxford, MS 38655-4459 Name of Employer (Required) University of Mississippi Occupation (Required) Scientist	08/06/2023	\$25.00
Aggregate year-to-date		\$275.00
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 Parkside Properties LLC Mailing Address 406 3rd Ave N City, State, Zip Code Columbus, MS 39701-3917 Name of Employer (Required) 	08/07/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00

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 Sally Faulkner Mailing Address 108 Sumach St City, State, Zip Code Lookout Mountai, TN 37350-1132 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/17/2023	\$2,500.00
Aggregate year-to-date		\$3,025.00
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 K. C. Grist Mailing Address 2611 Pemberton Ave City, State, Zip Code Tupelo, MS 38801-4131 Name of Employer (Required) North MS State Hospital Occupation (Required) Chief Financial Officer	08/17/2023	\$250.00
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 Shirley Gray Mailing Address 520 College Hill Rd City, State, Zip Code Oxford, MS 38655-2000 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/27/2023	\$50.00
Aggregate year-to-date		\$1,249.85
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 Faye Cox Mailing Address 704 Northpointe Cv City, State, Zip Code Oxford, MS 38655-7708 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/18/2023	\$25.00
Aggregate year-to-date		\$250.00

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 Bethany Theilman Mailing Address 131 Redbud Trl City, State, Zip Code Brandon, MS 39047-6402 Name of Employer (Required) Diabetes Foundation of MS Occupation (Required) Secretary	09/20/2023	\$5.00
Aggregate year-to-date		\$217.10
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 Carl Pechman Mailing Address 4414 Albemarle St NW City, State, Zip Code Washington, DC 20016-2014 Name of Employer (Required) KeyLogic Occupation (Required) Economist	09/20/2023	\$250.00
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 Theresa Guthrie Mailing Address 661 Arm Rd City, State, Zip Code Silver Creek, MS 39663-2423 Name of Employer (Required) Harrell & Nowak, LLC Occupation (Required) Office Manager	08/10/2023	\$5.00
Aggregate year-to-date		\$236.00
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 Anthony Vita Mailing Address 65 Vaiden Dr City, State, Zip Code Hernando, MS 38632-2313 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$500.00
Aggregate year-to-date		\$750.00

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 Janice Walker Mailing Address 5950 B N Colony Blvd City, State, Zip Code Jackson, MS 39206-2404 Name of Employer (Required) Federal Emergency Management Agency	08/31/2023	\$25.00
Occupation (Required) Administrative Support Specialist	Aggregate year-to-date	\$625.00
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 Joanne Edgar Mailing Address 333 W 86th St City, State, Zip Code New York, NY 10024-3114 Name of Employer (Required) Self Employed	08/31/2023	\$25.00
Occupation (Required) Writer	Aggregate year-to-date	\$222.00
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 Byrd Mailing Address 701 N Fulton St City, State, Zip Code Iuka, MS 38852-2411 Name of Employer (Required) Not Employed	09/23/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$235.00
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 S. Jones Mailing Address 204 Eastbrooke St City, State, Zip Code Jackson, MS 39216-4716 Name of Employer (Required) Not Employed	08/03/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$350.00

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 Donald Blaize Mailing Address 10205 Belle Vue Rd City, State, Zip Code Diberville, MS 39540-4654 Name of Employer (Required) CMG Home Loans	08/23/2023	\$500.00
Occupation (Required) Loan Originator	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) _____		
Full Name David Rushing Mailing Address 102 N Sunflower Ave City, State, Zip Code Indianola, MS 38751-2552 Name of Employer (Required) Not Employed	08/14/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$714.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Paul Pearson Mailing Address 325 Pearson Rd City, State, Zip Code Lyon, MS 38645-9548 Name of Employer (Required) Delta, Inc.	08/24/2023	\$100.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kelly O'Neal Mailing Address 56 J C Bryant Rd City, State, Zip Code Hattiesburg, MS 39401-8447 Name of Employer (Required) Not Employed	09/14/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

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 Efstratios Gavas Mailing Address 340 E 93rd St City, State, Zip Code New York, NY 10128-5552 Name of Employer (Required) City of New York Occupation (Required) Cyber Security	09/14/2023	\$250.00
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 Leslie Steverson Mailing Address 2313 Farrell Cir City, State, Zip Code Gulfport, MS 39507-2222 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/25/2023	\$25.00
Aggregate year-to-date		\$320.00
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 Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/15/2023	\$100.00
Aggregate year-to-date		\$2,150.00
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 Janet Bland Mailing Address 810 Sample Rd City, State, Zip Code Belden, MS 38826-9650 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/26/2023	\$50.00
Aggregate year-to-date		\$273.60

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 Carol Hopkins	09/26/2023	\$25.00
Mailing Address 711 Long Meadow Dr		
City, State, Zip Code Oxford, MS 38655-9742		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$233.00
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 Hooks	08/16/2023	\$50.00
Mailing Address 1018 Highland Colony Pkwy		
City, State, Zip Code Ridgeland, MS 39157-2057		
Name of Employer (Required) Adams and Reese LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$300.00
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 Jean Fenwick	09/27/2023	\$100.00
Mailing Address 208 S Madison St		
City, State, Zip Code Kosciusko, MS 39090-3946		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,000.00
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 Barbara M. Brandon	08/07/2023	\$200.00
Mailing Address 1005 4th Ave N		
City, State, Zip Code Columbus, MS 39701-4653		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$215.00

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 Jerry Fortenberry <hr/> Mailing Address 211 Chapman Rd <hr/> City, State, Zip Code Columbus, MS 39705-1666 <hr/> Name of Employer (Required) Mississippi Association of Recovering Pharmacists	08/07/2023	\$100.00
Occupation (Required) Pharmacist	Aggregate year-to-date	\$265.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mary Entrekin <hr/> Mailing Address 129 Whispering Oaks Xing <hr/> City, State, Zip Code Pearl, MS 39208-4152 <hr/> Name of Employer (Required) United Methodist Church	09/18/2023	\$5.00
Occupation (Required) Compliance Analyst	Aggregate year-to-date	\$380.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Vonda Reeves-Darby <hr/> Mailing Address 3866 Forest Hill Rd <hr/> City, State, Zip Code Jackson, MS 39212-5301 <hr/> Name of Employer (Required) GI Alliance	09/28/2023	\$25.00
Occupation (Required) Physician	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jonathan McBride <hr/> Mailing Address 7697 Eureka Rd <hr/> City, State, Zip Code Courtland, MS 38620-9456 <hr/> Name of Employer (Required) McBride Cattle Company	09/18/2023	\$500.00
Occupation (Required) Farmer	Aggregate year-to-date	\$500.00

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 Maureen McKerns <hr/> Mailing Address 813 42nd Ave <hr/> City, State, Zip Code Gulfport, MS 39501-1451 <hr/> Name of Employer (Required) Not Employed	08/08/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name James Raymond <hr/> Mailing Address 733 Huckleberry Rd <hr/> City, State, Zip Code Bay Saint Louis, MS 39520-1621 <hr/> Name of Employer (Required) Self Employed	08/18/2023	\$500.00
Occupation (Required) Financial Consultant	Aggregate year-to-date	\$4,080.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brent Buehrer <hr/> Mailing Address 3249 Pepper Ridge Dr <hr/> City, State, Zip Code Maumee, OH 43537-9697 <hr/> Name of Employer (Required) Buehrer Group Architecture & Engineering	08/29/2023	\$25.00
Occupation (Required) Architect	Aggregate year-to-date	\$225.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Eleanor Haimsohn <hr/> Mailing Address 4700 Treadway Rd <hr/> City, State, Zip Code Hernando, MS 38632-9149 <hr/> Name of Employer (Required) Not Employed	09/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

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 Christy Jones Mailing Address 205 Duck Cv City, State, Zip Code Madison, MS 39110-9280 Name of Employer (Required) Not Employed	09/30/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$575.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Marc Doyle Mailing Address 704 State St City, State, Zip Code Natchez, MS 39120-3543 Name of Employer (Required) Not Employed	07/30/2023	\$25.00
Occupation (Required) Not Employed	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) _____		
Full Name Judi Leake Mailing Address 5645 Traceside Dr City, State, Zip Code Nashville, TN 37221-4093 Name of Employer (Required) Not Employed	09/22/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$310.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name C&B Enterprise Inc Mailing Address PO Box 2816 City, State, Zip Code Madison, MS 39130-2816 Name of Employer (Required) 	09/22/2023	\$300.00
Occupation (Required)	Aggregate year-to-date	\$300.00

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 Karen Smith	08/02/2023	\$10.00
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Carol Taff	08/22/2023	\$1,000.00
Mailing Address 1705 Myrtle St		
City, State, Zip Code Jackson, MS 39202-1336		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,530.00
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 Alvin Williams	08/22/2023	\$200.00
Mailing Address 508 Green Hills Dr		
City, State, Zip Code Hattiesburg, MS 39402-9208		
Name of Employer (Required) University of South Alabama		
Occupation (Required) Professor	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 Debra Warner	09/12/2023	\$10.00
Mailing Address 502 E Lakeshore Dr		
City, State, Zip Code Carriere, MS 39426-7905		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00

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 E. K. Pruitt Mailing Address 4217 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3420 Name of Employer (Required) Not Employed	09/13/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Martha Swan Mailing Address 1665 Toccopola Junction Rd City, State, Zip Code Thaxton, MS 38871-9005 Name of Employer (Required) Not Employed	08/14/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name James Hutto Mailing Address 62 Redfern Trl City, State, Zip Code Petal, MS 39465-9415 Name of Employer (Required) Self Employed	08/24/2023	\$7.50
Occupation (Required) Education Consultant	Aggregate year-to-date	\$662.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Linda Cox Mailing Address 12 Estate Dr City, State, Zip Code Long Beach, MS 39560-3912 Name of Employer (Required) Veterans Health Administration	09/14/2023	\$50.00
Occupation (Required) Psychologist	Aggregate year-to-date	\$675.00

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 Thomas Adams <hr/> Mailing Address 4527 Union Ave <hr/> City, State, Zip Code Nettleton, MS 38858-6037 <hr/> Name of Employer (Required) MS Public Service Commission	09/15/2023	\$50.00
Occupation (Required) Chief Investigator	Aggregate year-to-date	\$223.00
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 Ann J. Abadie <hr/> Mailing Address 2238 Lee Loop <hr/> City, State, Zip Code Oxford, MS 38655-4920 <hr/> Name of Employer (Required) Not Employed	09/15/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$790.00
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 Wilemon <hr/> Mailing Address 103 Davis Dr <hr/> City, State, Zip Code Aberdeen, MS 39730-2909 <hr/> Name of Employer (Required) Euphrates Consulting Group, LLC	09/16/2023	\$25.00
Occupation (Required) Chemical Engineer	Aggregate year-to-date	\$320.00
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 Wilbur O. Colom <hr/> Mailing Address 800 2nd St S <hr/> City, State, Zip Code Columbus, MS 39701-7202 <hr/> Name of Employer (Required) The Colom Law Firm LLC	08/07/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,000.00

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 Joe York	09/28/2023	\$100.00
Mailing Address 315 Panola St		
City, State, Zip Code Water Valley, MS 38965-2408		
Name of Employer (Required) Self Employed		
Occupation (Required) Video	Aggregate year-to-date	\$600.00
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 Eric Hampton	09/18/2023	\$5,000.00
Mailing Address PO Box 3295		
City, State, Zip Code Tupelo, MS 38803-3295		
Name of Employer (Required) Social Security Consultants		
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 David Mckinnis	08/18/2023	\$2,000.00
Mailing Address 301 Sasco Hill Rd		
City, State, Zip Code Fairfield, CT 06824-5649		
Name of Employer (Required) David McKinnis Consulting, LLC		
Occupation (Required) Software Engineering Consultant	Aggregate year-to-date	\$5,051.90
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 Cynthia Morse	08/28/2023	\$25.00
Mailing Address 8601 Zimpel St		
City, State, Zip Code New Orleans, LA 70118-1139		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00

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 Linda Cox Mailing Address 12 Estate Dr City, State, Zip Code Long Beach, MS 39560-3912 Name of Employer (Required) Veterans Health Administration Occupation (Required) Psychologist	08/09/2023	\$50.00
Aggregate year-to-date		\$675.00
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 Onellis Stanford Mailing Address 26287 Niolet Rd City, State, Zip Code Pass Christian, MS 39571-9422 Name of Employer (Required) Memorial Health Occupation (Required) Nurse Practitioner	08/29/2023	\$25.00
Aggregate year-to-date		\$205.00
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 Keller Wilson Mailing Address 244 Old Magee Rd City, State, Zip Code Magee, MS 39111-3349 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/09/2023	\$50.00
Aggregate year-to-date		\$220.00
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 Gloria Williamson Mailing Address 521 Holland Ave City, State, Zip Code Philadelphia, MS 39350-2437 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/20/2023	\$100.00
Aggregate year-to-date		\$7,010.00

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 Tadlock Mailing Address 2985 Beaumont Cv City, State, Zip Code Pearl, MS 39208-5324 Name of Employer (Required) Broderick Advertising	07/30/2023	\$25.00
Occupation (Required) Creative Director	Aggregate year-to-date	\$295.00
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 Glenn Taylor Mailing Address 3644 Old Canton Rd City, State, Zip Code Jackson, MS 39216-3313 Name of Employer (Required) Copeland Cook Taylor & Bush	09/10/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$525.00
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 Melissa Roberson Mailing Address PO Box 85 City, State, Zip Code Taylor, MS 38673-0085 Name of Employer (Required) Not Employed	09/21/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
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 Cristen Hemmins Mailing Address 101 County Road 178 City, State, Zip Code Oxford, MS 38655-8479 Name of Employer (Required) Self Employed	08/31/2023	\$100.00
Occupation (Required) Ad Sales	Aggregate year-to-date	\$350.00

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 Patrick Benvenuto Mailing Address PO Box 2014 City, State, Zip Code Bay Saint Louis, MS 39521-2014 Name of Employer (Required) Bay Motor Winding	08/31/2023	\$100.00
Occupation (Required) Vice President of Sales & Marketing	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 Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	08/31/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Glen Davidson Jr Mailing Address 1123 Quail Creek Cv City, State, Zip Code Tupelo, MS 38801-7257 Name of Employer (Required) Not Employed	09/11/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$258.00
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 Goodman Mailing Address 42 Rolling Ridge Rd City, State, Zip Code Upper Saddle Ri, NJ 07458-1705 Name of Employer (Required) Not Employed	09/11/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,000.00

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 Tadlock Mailing Address 2985 Beaumont Cv City, State, Zip Code Pearl, MS 39208-5324 Name of Employer (Required) Broderick Advertising	08/12/2023	\$10.00
Occupation (Required) Creative Director	Aggregate year-to-date	\$295.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Debra Warner Mailing Address 502 E Lakeshore Dr City, State, Zip Code Carriere, MS 39426-7905 Name of Employer (Required) Not Employed	08/22/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mike Brown Mailing Address 120 N Congress St City, State, Zip Code Jackson, MS 39201-2684 Name of Employer (Required) The Michael R. Brown Law Offices, PLLC	08/03/2023	\$250.00
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) _____		
Full Name Betty Wong Mailing Address 533 Windy Ridge Ln City, State, Zip Code Madison, MS 39110-8523 Name of Employer (Required) New Stage Theatre	08/23/2023	\$250.00
Occupation (Required) Administrator	Aggregate year-to-date	\$250.00

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 Jean Fenwick <hr/> Mailing Address 208 S Madison St <hr/> City, State, Zip Code Kosciusko, MS 39090-3946 <hr/> Name of Employer (Required) Not Employed	08/23/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,000.00
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 Melita Thorpe <hr/> Mailing Address 5 Douglas Rd <hr/> City, State, Zip Code Ellisville, MS 39437-4805 <hr/> Name of Employer (Required) Not Employed	08/04/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
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 B. Schimmel <hr/> Mailing Address 3630 Kings Hwy <hr/> City, State, Zip Code Jackson, MS 39216-3321 <hr/> Name of Employer (Required) Not Employed	09/04/2023	\$1,250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$15,850.00
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 Buchanan <hr/> Mailing Address 155 Bryant St <hr/> City, State, Zip Code Palo Alto, CA 94301-1104 <hr/> Name of Employer (Required) Not Employed	09/25/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,061.50

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 Lynch	09/26/2023	\$100.00
Mailing Address 617 Camelia Trl		
City, State, Zip Code Brandon, MS 39047-6316		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,075.00
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 Raymond	09/26/2023	\$25.00
Mailing Address 733 Huckleberry Rd		
City, State, Zip Code Bay Saint Louis, MS 39520-1621		
Name of Employer (Required) Self Employed		
Occupation (Required) Financial Consultant	Aggregate year-to-date	\$4,080.00
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 Blancato	09/06/2023	\$250.00
Mailing Address 1860 Neushore Ct		
City, State, Zip Code Winston Salem, NC 27127-7287		
Name of Employer (Required) Blancato Legal Services PLLC		
Occupation (Required) Attorney	Aggregate year-to-date	\$2,750.00
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 Janet Shanks	09/06/2023	\$200.00
Mailing Address 125 Northpointe Pkwy		
City, State, Zip Code Jackson, MS 39211-2411		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,050.00

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 Jane D. Thomley Mailing Address 18 Bridgewater Dr City, State, Zip Code Hattiesburg, MS 39402-1667 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/17/2023	\$25.00
Aggregate year-to-date		\$400.00
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 Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	09/28/2023	\$25.00
Aggregate year-to-date		\$1,197.00
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 Gail Tapscott Mailing Address 1711 Anderson Rd City, State, Zip Code Oxford, MS 38655-2570 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$100.00
Aggregate year-to-date		\$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 Diane Cockrum Mailing Address 600 County Road 515 City, State, Zip Code Ripley, MS 38663-8347 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$25.00
Aggregate year-to-date		\$275.00

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 Brenda Plunkett <hr/> Mailing Address 138 N Ridge Dr <hr/> City, State, Zip Code Saltillo, MS 38866-5763 <hr/> Name of Employer (Required) Not Employed	08/08/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$2,078.45
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mary McGarry <hr/> Mailing Address 65 W 13th St <hr/> City, State, Zip Code New York, NY 10011-7910 <hr/> Name of Employer (Required) Not Employed	08/28/2023	\$500.00
Occupation (Required) Not Employed	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) _____		
Full Name Mary J. Westerlund <hr/> Mailing Address 1201 Cowden Dr <hr/> City, State, Zip Code Amory, MS 38821-1306 <hr/> Name of Employer (Required) Not Employed	09/08/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jason L. Shelton <hr/> Mailing Address PO Box 1310 <hr/> City, State, Zip Code Tupelo, MS 38802-1310 <hr/> Name of Employer (Required) Self Employed	09/19/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00

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 Zilla Spencer Mailing Address 382 Highway 342 S City, State, Zip Code Vardaman, MS 38878 Name of Employer (Required) Not Employed	08/09/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$355.00
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 Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed	09/09/2023	\$10.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$335.00
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 Andrew Jenkins Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Technical Services	09/20/2023	\$100.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$4,850.00
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 Elwin Hall Mailing Address 2204 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-4104 Name of Employer (Required) Not Employed	08/30/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

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 Eric Beamon Mailing Address 15055 Swan Lake Blvd City, State, Zip Code Gulfport, MS 39503-8613 Name of Employer (Required) Not Employed	09/10/2023	\$35.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Barbara Hogan Mailing Address 715 Highleadon Pl City, State, Zip Code Madison, MS 39110-7058 Name of Employer (Required) Not Employed	09/21/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Chris Jones Mailing Address 2 Hoggards Rdg City, State, Zip Code Little Rock, AR 72211-3795 Name of Employer (Required) Self Employed	07/31/2023	\$250.00
Occupation (Required) Author	Aggregate year-to-date	\$2,250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Thomas Adams Mailing Address 4527 Union Ave City, State, Zip Code Nettleton, MS 38858-6037 Name of Employer (Required) MS Public Service Commission	08/31/2023	\$5.00
Occupation (Required) Chief Investigator	Aggregate year-to-date	\$223.00

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 Mark McLain Mailing Address 120 Hickory Gln City, State, Zip Code Madison, MS 39110-7605 Name of Employer (Required) MS Neuropsychiatric Center	09/11/2023	\$25.00
Occupation (Required) Psychiatrist	Aggregate year-to-date	\$444.60
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 S. H. Yarbrough Mailing Address 516 Cook St City, State, Zip Code Philadelphia, MS 39350-2404 Name of Employer (Required) Not Employed	09/22/2023	\$250.00
Occupation (Required) Not Employed	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 Wayne Minyard Mailing Address 324 Longmeadow Ct S City, State, Zip Code Ridgeland, MS 39157-3541 Name of Employer (Required) Sanderson Farms	08/12/2023	\$5.00
Occupation (Required) Accountant	Aggregate year-to-date	\$215.00
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. Ralph Eubanks Mailing Address 133 U St NE City, State, Zip Code Washington, DC 20002-1319 Name of Employer (Required) University of Mississippi	09/23/2023	\$250.00
Occupation (Required) Professor	Aggregate year-to-date	\$500.00

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 Forrest Morris Mailing Address 600 N Beach Blvd City, State, Zip Code Bay Saint Louis, MS 39520-4604 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/03/2023	\$500.00
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 Porter Mailing Address 1830 Hubbard Rd City, State, Zip Code Courtland, MS 38620-9741 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/03/2023	\$1,000.00
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 Robert Kyle Mailing Address 107 Carriage Ln City, State, Zip Code Madison, MS 39110-9205 Name of Employer (Required) Kyle, Wynn & Associates Occupation (Required) Attorney	08/23/2023	\$1,000.00
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 Elizabeth Payne Mailing Address 633 Park Dr City, State, Zip Code Oxford, MS 38655-2824 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/14/2023	\$1,000.00
Aggregate year-to-date		\$4,025.00

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 Bert Ehrhardt Mailing Address 200 Windsor Rdg City, State, Zip Code Oxford, MS 38655-6265 Name of Employer (Required) Not Employed	09/14/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,115.00
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 Lana Richardson Mailing Address 10611 County Road 500 City, State, Zip Code Ripley, MS 38663-9199 Name of Employer (Required) Not Employed	08/25/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$655.00
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 Ralph Weimer Mailing Address 5601 N Lake Dr City, State, Zip Code Meridian, MS 39307-4140 Name of Employer (Required) Not Employed	09/05/2023	\$200.00
Occupation (Required) Not Employed	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 Elise Gomez-Sanchez Mailing Address 536 Countryside Pl City, State, Zip Code Madison, MS 39110-9301 Name of Employer (Required) University of Mississippi Medical Center	09/16/2023	\$1,000.00
Occupation (Required) Professor	Aggregate year-to-date	\$3,500.00

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 Sheila Newtown Mailing Address 3893 County Route 10 City, State, Zip Code De Peyster, NY 13633-3405 Name of Employer (Required) Not Employed	09/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$240.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Allen Salyer Mailing Address 1657 Welling Dr City, State, Zip Code Troy, MI 48085-5022 Name of Employer (Required) HUF North America	08/07/2023	\$250.00
Occupation (Required) CAD Engineer	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) _____		
Full Name Staci Morgan Mailing Address 6946 Weir Panhandle Rd City, State, Zip Code Weir, MS 39772 Name of Employer (Required) Self Employed	08/07/2023	\$100.00
Occupation (Required) Conference Director	Aggregate year-to-date	\$1,339.15
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Obie M. McNair Jr Mailing Address 102 Cirencester Dr City, State, Zip Code Ridgeland, MS 39157-9788 Name of Employer (Required) Central Mississippi Medical Center	08/17/2023	\$100.00
Occupation (Required) Health Care	Aggregate year-to-date	\$525.00

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 Suzanne Baer	09/28/2023	\$500.00
Mailing Address 1000 Riverview Dr		
City, State, Zip Code Biloxi, MS 39532-3319		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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) _____		
Full Name Marilyn Vandemark	09/28/2023	\$50.00
Mailing Address 412 Highpoint Dr		
City, State, Zip Code Diamondhead, MS 39525-3719		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,050.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Bud Coley	08/08/2023	\$1,000.00
Mailing Address PO Box 3068		
City, State, Zip Code Tupelo, MS 38803-3068		
Name of Employer (Required) Bud Coley Trucking		
Occupation (Required) Business 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) _____		
Full Name Mike B. McMahan	08/28/2023	\$500.00
Mailing Address 46 Longwood Dr		
City, State, Zip Code Hattiesburg, MS 39402-3083		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00

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 Jim Hawkins <hr/> Mailing Address 210 W 101st St <hr/> City, State, Zip Code New York, NY 10025-5039 <hr/> Name of Employer (Required) Not Employed	08/28/2023	\$500.00
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) _____		
Full Name Nathan Prescott <hr/> Mailing Address 309 Live Oak Ave <hr/> City, State, Zip Code Ocean Springs, MS 39564-3909 <hr/> Name of Employer (Required) Self Employed	09/29/2023	\$100.00
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) _____		
Full Name William Himel <hr/> Mailing Address 5155 Madison St <hr/> City, State, Zip Code Skokie, IL 60077-5233 <hr/> Name of Employer (Required) Not Employed	09/29/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Frances M. Coleman <hr/> Mailing Address 108 Royal Garden Ter <hr/> City, State, Zip Code Madison, MS 39110-7637 <hr/> Name of Employer (Required) Not Employed	09/29/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$440.00

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 Gordon Macinnes Mailing Address 24 Raven Dr City, State, Zip Code Morristown, NJ 07960-6412 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/09/2023	\$250.00
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 Marcy Petrini Mailing Address 950 Fairfax Cir City, State, Zip Code Jackson, MS 39211-4250 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$50.00
Aggregate year-to-date		\$300.00
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 Dot Courson Mailing Address 63 Hidden Crk City, State, Zip Code Pontotoc, MS 38863-7514 Name of Employer (Required) Self Employed Occupation (Required) Artist	08/01/2023	\$250.00
Aggregate year-to-date		\$325.00
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 Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$10.00
Aggregate year-to-date		\$796.00

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 Gloria Williamson Mailing Address 521 Holland Ave City, State, Zip Code Philadelphia, MS 39350-2437 Name of Employer (Required) Not Employed	08/31/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$7,010.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elise Gomez-Sanchez Mailing Address 536 Countryside Pl City, State, Zip Code Madison, MS 39110-9301 Name of Employer (Required) University of Mississippi Medical Center	09/01/2023	\$500.00
Occupation (Required) Professor	Aggregate year-to-date	\$3,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ian Gustafson Mailing Address 7520 Ruby Ct City, State, Zip Code Ocean Springs, MS 39564-1801 Name of Employer (Required) MS Center for Justice	09/11/2023	\$100.00
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) _____		
Full Name James Evans Mailing Address PO Box 1167 City, State, Zip Code Jackson, MS 39215-1167 Name of Employer (Required) Not Employed	09/22/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00

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 Brenda F. Hyde	08/02/2023	\$50.00
Mailing Address PO Box 13646		
City, State, Zip Code Jackson, MS 39236-3646		
Name of Employer (Required) Southern Echo Inc.		
Occupation (Required) Assistant Director	Aggregate year-to-date	\$425.25
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 Sittman	09/23/2023	\$50.00
Mailing Address 1822 Devine St		
City, State, Zip Code Jackson, MS 39202-1317		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,550.00
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 Steve Tadlock	08/03/2023	\$10.00
Mailing Address 2985 Beaumont Cv		
City, State, Zip Code Pearl, MS 39208-5324		
Name of Employer (Required) Broderick Advertising		
Occupation (Required) Creative Director	Aggregate year-to-date	\$295.00
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 Ott	08/03/2023	\$250.00
Mailing Address 106 Broadfoot Cir		
City, State, Zip Code Ridgeland, MS 39157-9793		
Name of Employer (Required) Morgan and Morgan		
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00

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 Ricky Johnston <hr/> Mailing Address 419 3rd St S <hr/> City, State, Zip Code Columbus, MS 39701-5632 <hr/> Name of Employer (Required) Gastroenterology Associates of Columbus	09/13/2023	\$25.00
Occupation (Required) Gastroenterologist	Aggregate year-to-date	\$750.00
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 Angelos Vamvakas <hr/> Mailing Address 3161 Wayne Dr <hr/> City, State, Zip Code Diberville, MS 39540-8554 <hr/> Name of Employer (Required) Self Employed	09/24/2023	\$25.00
Occupation (Required) Psychiatrist	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 Harold D. Copeland <hr/> Mailing Address PO Box 631145 <hr/> City, State, Zip Code Houston, TX 77263-1145 <hr/> Name of Employer (Required) Not Employed	09/24/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$297.50
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 Ron Coleman <hr/> Mailing Address 316 Quail Creek Dr <hr/> City, State, Zip Code Oxford, MS 38655-6108 <hr/> Name of Employer (Required) Not Employed	09/25/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00

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 Reilly Morse <hr/> Mailing Address 929 Bridge St <hr/> City, State, Zip Code Gulfport, MS 39507-3432 <hr/> Name of Employer (Required) Not Employed	09/26/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,825.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jan Garrick <hr/> Mailing Address 4217 Oakridge Dr <hr/> City, State, Zip Code Jackson, MS 39216-3420 <hr/> Name of Employer (Required) Not Employed	08/06/2023	\$50.00
Occupation (Required) Not Employed	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) _____		
Full Name Mary J. Westerlund <hr/> Mailing Address 1201 Cowden Dr <hr/> City, State, Zip Code Amory, MS 38821-1306 <hr/> Name of Employer (Required) Not Employed	08/16/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Bonnie Allen <hr/> Mailing Address 7688 Highway 19 N <hr/> City, State, Zip Code Collinsville, MS 39325-9390 <hr/> Name of Employer (Required) Not Employed	08/26/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00

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 Lynch Mailing Address 617 Camelia Trl City, State, Zip Code Brandon, MS 39047-6316 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/06/2023	\$100.00
Aggregate year-to-date		\$1,075.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Heather McTeer-Toney Mailing Address 298 Highway 7 N City, State, Zip Code Oxford, MS 38655-8423 Name of Employer (Required) Environmental Defense Fund Occupation (Required) Vice President	09/06/2023	\$250.00
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) _____ Full Name Jamie Barnett Mailing Address 801 Yorkshire Ct City, State, Zip Code Oxford, MS 38655-4441 Name of Employer (Required) Viasat, Inc Occupation (Required) Satellite Executive	09/17/2023	\$500.00
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) _____ Full Name Beverly Dale Mailing Address 245 Del Monte Ave City, State, Zip Code Los Altos, CA 94022-1206 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/08/2023	\$100.00
Aggregate year-to-date		\$5,100.00

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 Wayne Drinkwater Mailing Address PO Box 1789 City, State, Zip Code Jackson, MS 39215-1789 Name of Employer (Required) Bradley Arant Boulton Cummings Occupation (Required) Attorney	08/28/2023	\$500.00
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 James P. Smith Mailing Address 14077 W Old River Trl City, State, Zip Code Gulfport, MS 39503-9057 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/29/2023	\$500.00
Aggregate year-to-date		\$1,600.00
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 Eva Lantrip Mailing Address 3239 Big Ben S City, State, Zip Code Hernando, MS 38632-6918 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/29/2023	\$50.00
Aggregate year-to-date		\$260.00
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 Lillie Randolph Mailing Address 117 Harris St City, State, Zip Code Nettleton, MS 38858-5964 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/29/2023	\$10.00
Aggregate year-to-date		\$215.00

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 Vicki Hartley <hr/> Mailing Address 813 Harvard St <hr/> City, State, Zip Code Cleveland, MS 38732-3629 <hr/> Name of Employer (Required) St. Joe Greenville	09/30/2023	\$250.00
Occupation (Required) Teacher	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) _____		
Full Name Mary Vi Risser <hr/> Mailing Address 377 County Road 653B <hr/> City, State, Zip Code Saltillo, MS 38866-5716 <hr/> Name of Employer (Required) Not Employed	08/10/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Francisco J. Sierra <hr/> Mailing Address 425 Locust Ln <hr/> City, State, Zip Code Tupelo, MS 38801-9457 <hr/> Name of Employer (Required) Monroe Hospital	08/30/2023	\$25.00
Occupation (Required) Physician	Aggregate year-to-date	\$2,100.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Don Keim <hr/> Mailing Address 202 S Deer Creek Dr W <hr/> City, State, Zip Code Leland, MS 38756-3129 <hr/> Name of Employer (Required) Not Employed	07/31/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00

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 Karen Smith <hr/> Mailing Address 14624 S Vandalia Ave <hr/> City, State, Zip Code Bixby, OK 74008-3754 <hr/> Name of Employer (Required) Not Employed	08/11/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Michael Henderson <hr/> Mailing Address 900 E Sherwood Rd <hr/> City, State, Zip Code Williamston, MI 48895-9328 <hr/> Name of Employer (Required) Advanced Radiology	09/01/2023	\$250.00
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) _____		
Full Name Denise Pilgrim <hr/> Mailing Address 108 Bellingham Dr <hr/> City, State, Zip Code Madison, MS 39110-8524 <hr/> Name of Employer (Required) Not Employed	09/22/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$667.90
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Miriam Harrington <hr/> Mailing Address 3800 Fairfax Dr <hr/> City, State, Zip Code Arlington, VA 22203-1720 <hr/> Name of Employer (Required) Not Employed	08/02/2023	\$28.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$418.00

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 Gray	08/12/2023	\$50.00
Mailing Address 1425 Jackson St		
City, State, Zip Code Corinth, MS 38834-3423		
Name of Employer (Required) Self Employed		
Occupation (Required) Architect	Aggregate year-to-date	\$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) _____		
Full Name Charles Lacavera	08/22/2023	\$50.00
Mailing Address 1459 Forbes Dr		
City, State, Zip Code Byram, MS 39272-9459		
Name of Employer (Required) Eastpointe		
Occupation (Required) Utilization Management	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jan F. Gadow	09/12/2023	\$100.00
Mailing Address 144 Brae Burn Dr		
City, State, Zip Code Jackson, MS 39211-2501		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Bert Ehrhardt	08/13/2023	\$500.00
Mailing Address 200 Windsor Rdg		
City, State, Zip Code Oxford, MS 38655-6265		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,115.00

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 Brombacher Mailing Address 108 Coachmans Rd City, State, Zip Code Madison, MS 39110-9227 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/24/2023	\$50.00
Aggregate year-to-date		\$800.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Tamara Brown Mailing Address PO Box 1808 City, State, Zip Code New Milford, CT 06776-1808 Name of Employer (Required) Linde Occupation (Required) Vice President	09/24/2023	\$1,000.00
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) _____ Full Name Fraser Hunter Mailing Address 645 W End Ave City, State, Zip Code New York, NY 10025-7322 Name of Employer (Required) WilmerHale LLP Occupation (Required) Attorney	08/04/2023	\$1,000.00
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) _____ Full Name James Raymond Mailing Address 733 Huckleberry Rd City, State, Zip Code Bay Saint Louis, MS 39520-1621 Name of Employer (Required) Self Employed Occupation (Required) Financial Consultant	08/26/2023	\$25.00
Aggregate year-to-date		\$4,080.00

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 Anderson Mailing Address 2106 Harris Dr City, State, Zip Code Oxford, MS 38655-4223 Name of Employer (Required) Not Employed	09/07/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$208.60
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 Carol C. Mann Mailing Address 316 Sonoma Cv City, State, Zip Code Madison, MS 39110-9549 Name of Employer (Required) Not Employed	09/07/2023	\$250.00
Occupation (Required) Retired	Aggregate year-to-date	\$685.00
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 Elliott Andalman Mailing Address 6 Montgomery Ave City, State, Zip Code Takoma Park, MD 20912-4615 Name of Employer (Required) Andalman & Flynn	09/18/2023	\$250.00
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed	08/18/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$833.50

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 Eva Lantrip	09/29/2023	\$50.00
Mailing Address 3239 Big Ben S		
City, State, Zip Code Hernando, MS 38632-6918		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ted B. Atkinson	09/29/2023	\$25.00
Mailing Address 1000 E Broad St		
City, State, Zip Code West Point, MS 39773-3236		
Name of Employer (Required) Mississippi State University		
Occupation (Required) Professor	Aggregate year-to-date	\$410.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Nikolaos Kritzilis	08/29/2023	\$100.00
Mailing Address 514 Fawn Cv		
City, State, Zip Code Canton, MS 39046-9417		
Name of Employer (Required) C Spire		
Occupation (Required) Electrical Engineer	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Wayne Minyard	08/29/2023	\$25.00
Mailing Address 324 Longmeadow Ct S		
City, State, Zip Code Ridgeland, MS 39157-3541		
Name of Employer (Required) Sanderson Farms		
Occupation (Required) Accountant	Aggregate year-to-date	\$215.00

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 Griffith Mailing Address PO Box 2248 City, State, Zip Code Oxford, MS 38655-7248 Name of Employer (Required) Griffith Law Firm Occupation (Required) Attorney	09/20/2023	\$100.00
Aggregate year-to-date		\$1,025.00
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 Christie Yoste Mailing Address 1514 19th Ave City, State, Zip Code Gulfport, MS 39501-2124 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$100.00
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 Feeley Mailing Address 7371 N Aberdeen Dr City, State, Zip Code Pass Christian, MS 39571-7012 Name of Employer (Required) Self Employed Occupation (Required) Engineer	08/30/2023	\$10.00
Aggregate year-to-date		\$300.00
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	07/31/2023	\$25.00
Aggregate year-to-date		\$833.50

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 Stewart Mailing Address 321 County Road 416 City, State, Zip Code Vardaman, MS 38878-9708 Name of Employer (Required) Not Employed	09/01/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John C. Henegan Mailing Address 1921 E Bourne Pl City, State, Zip Code Jackson, MS 39211-6714 Name of Employer (Required) Not Employed	09/22/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$6,287.27
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Tor Kwembe Mailing Address 4100 Poplar Ave City, State, Zip Code Richton Park, IL 60471-1236 Name of Employer (Required) Jackson State University	08/12/2023	\$25.00
Occupation (Required) Professor	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) _____		
Full Name Barbara Rankin Mailing Address PO Box 219 City, State, Zip Code Braxton, MS 39044-0219 Name of Employer (Required) Not Employed	09/12/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$900.00

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 Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/23/2023	\$100.00
Aggregate year-to-date		\$1,050.00
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 Alan Arendale Mailing Address 345 Woodstone Rd City, State, Zip Code Clinton, MS 39056-4948 Name of Employer (Required) Cannon Toyota Vicksburg Occupation (Required) Sales Consultant	08/23/2023	\$25.00
Aggregate year-to-date		\$230.00
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 Gambetta Mailing Address 130 Harvesters Sq City, State, Zip Code Tupelo, MS 38801-9510 Name of Employer (Required) Mueller Co. Occupation (Required) Engineer	08/04/2023	\$10.00
Aggregate year-to-date		\$402.50
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 Leslee Linn Mailing Address 601 Thrasher Pt City, State, Zip Code Oxford, MS 38655-5971 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/04/2023	\$550.00
Aggregate year-to-date		\$1,000.00

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 Karen Smith	09/14/2023	\$20.00
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Hamilton	08/16/2023	\$25.00
Mailing Address 707 Randolph Ave SE		
City, State, Zip Code Huntsville, AL 35801-3606		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$748.47
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 Dot Courson	08/16/2023	\$75.00
Mailing Address 63 Hidden Crk		
City, State, Zip Code Pontotoc, MS 38863-7514		
Name of Employer (Required) Self Employed		
Occupation (Required) Artist	Aggregate year-to-date	\$325.00
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 Williams	08/27/2023	\$25.00
Mailing Address 122 Madison Pl		
City, State, Zip Code Hattiesburg, MS 39402-8339		
Name of Employer (Required) Bristow Helicopters		
Occupation (Required) Pilot	Aggregate year-to-date	\$700.00

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 Gloria D. Kellum <hr/> Mailing Address 213 Colonial Rd <hr/> City, State, Zip Code Oxford, MS 38655-2634 <hr/> Name of Employer (Required) Not Employed	09/07/2023	\$500.00
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 Shirley Gray <hr/> Mailing Address 520 College Hill Rd <hr/> City, State, Zip Code Oxford, MS 38655-2000 <hr/> Name of Employer (Required) Not Employed	09/18/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,249.85
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 Reed Hillen <hr/> Mailing Address 2595 Mount Vernon Rd <hr/> City, State, Zip Code Tupelo, MS 38804-7102 <hr/> Name of Employer (Required) Hillen, Wicker & Tapscott, P.A.	08/18/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$750.00
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 Clark <hr/> Mailing Address 110 Olympia Flds <hr/> City, State, Zip Code Jackson, MS 39211-2509 <hr/> Name of Employer (Required) Not Employed	09/08/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$19,003.00

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 Clarissa A. Jordan <hr/> Mailing Address 913 Sleepy Hollow Cv <hr/> City, State, Zip Code Oxford, MS 38655-8494 <hr/> Name of Employer (Required) Not Employed	09/29/2023	\$100.00
Occupation (Required) Not Employed	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) _____		
Full Name Jacqueline Amos <hr/> Mailing Address 168 Kilkenny Blvd <hr/> City, State, Zip Code Jackson, MS 39209-3744 <hr/> Name of Employer (Required) The City of Canton	09/29/2023	\$25.00
Occupation (Required) City Administrator	Aggregate year-to-date	\$305.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joe Love <hr/> Mailing Address PO Box 802 <hr/> City, State, Zip Code Summit, MS 39666-0802 <hr/> Name of Employer (Required) Not Employed	08/09/2023	\$100.00
Occupation (Required) Not Employed	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) _____		
Full Name Sheila Newtown <hr/> Mailing Address 3893 County Route 10 <hr/> City, State, Zip Code De Peyster, NY 13633-3405 <hr/> Name of Employer (Required) Not Employed	08/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$240.00

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 Nan Tarlton Mailing Address 210 Meadowlane Dr City, State, Zip Code Madison, MS 39110-9611 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/10/2023	\$100.00
Aggregate year-to-date		\$1,400.00
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 Mary Haskell Mailing Address 6 Trotting Horse Dr City, State, Zip Code Lexington, MA 02421-6339 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/20/2023	\$100.00
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 Ginny Troutt Mailing Address 185 Oakley Rd City, State, Zip Code Senatobia, MS 38668-6481 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/10/2023	\$100.00
Aggregate year-to-date		\$375.00
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 Will Manuel Mailing Address 827 Beaumont Dr City, State, Zip Code Madison, MS 39110-7494 Name of Employer (Required) Bradley Arant Occupation (Required) Attorney	08/21/2023	\$1,000.00
Aggregate year-to-date		\$2,000.00

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 Charles Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/11/2023	\$25.00
Aggregate year-to-date		\$1,061.50
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 Joanne Edgar Mailing Address 333 W 86th St City, State, Zip Code New York, NY 10024-3114 Name of Employer (Required) Self Employed Occupation (Required) Writer	09/22/2023	\$100.00
Aggregate year-to-date		\$222.00
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 Joan Santa Cruz Mailing Address 5825 Cedar Rd City, State, Zip Code Ocean Springs, MS 39564-2250 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/22/2023	\$50.00
Aggregate year-to-date		\$310.00
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 Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/12/2023	\$25.00
Aggregate year-to-date		\$3,400.00

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 Cynthia Morse Mailing Address 8601 Zimpel St City, State, Zip Code New Orleans, LA 70118-1139 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/12/2023	\$25.00
Aggregate year-to-date		\$225.00
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 Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	09/12/2023	\$10.00
Aggregate year-to-date		\$1,197.00
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 Mary Entrekin Mailing Address 129 Whispering Oaks Xing City, State, Zip Code Pearl, MS 39208-4152 Name of Employer (Required) United Methodist Church Occupation (Required) Compliance Analyst	08/13/2023	\$5.00
Aggregate year-to-date		\$380.60
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 L. V. Holland Mailing Address 17 New Bethel Rd City, State, Zip Code Tylertown, MS 39667-6608 Name of Employer (Required) Self Employed Occupation (Required) Farmer	09/03/2023	\$500.00
Aggregate year-to-date		\$4,500.00

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. K. McCarthy	09/14/2023	\$100.00
Mailing Address 22332 Freddie Frank Rd		
City, State, Zip Code Long Beach, MS 39560-9728		
Name of Employer (Required) US Dept of Housing and Urban Development		
Occupation (Required) Investigator	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Caroline M. Hoff	08/24/2023	\$200.00
Mailing Address 431 Twin Lks N		
City, State, Zip Code Clinton, MS 39056-6157		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Gail Linson	08/24/2023	\$25.00
Mailing Address 133 Northshore Pt		
City, State, Zip Code Madison, MS 39110-7272		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ed Hargett	09/25/2023	\$100.00
Mailing Address 1007 Hargett Dr		
City, State, Zip Code Charleston, MS 38921-9726		
Name of Employer (Required) Self Employed		
Occupation (Required) Corrections	Aggregate year-to-date	\$1,200.00

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 Karen Hinton <hr/> Mailing Address 817 Chartres St <hr/> City, State, Zip Code New Orleans, LA 70116-3206 <hr/> Name of Employer (Required) Not Employed	08/05/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elizabeth Cagle <hr/> Mailing Address 411 N Montgomery St <hr/> City, State, Zip Code Starkville, MS 39759-2605 <hr/> Name of Employer (Required) MS State University	08/05/2023	\$25.00
Occupation (Required) Instructor	Aggregate year-to-date	\$332.25
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Stephen Schear <hr/> Mailing Address 805 Santa Ray Ave <hr/> City, State, Zip Code Oakland, CA 94610-1738 <hr/> Name of Employer (Required) Self Employed	08/05/2023	\$1,000.00
Occupation (Required) Attorney	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) _____		
Full Name Theresa Guthrie <hr/> Mailing Address 661 Arm Rd <hr/> City, State, Zip Code Silver Creek, MS 39663-2423 <hr/> Name of Employer (Required) Harrell & Nowak, LLC	08/06/2023	\$5.00
Occupation (Required) Office Manager	Aggregate year-to-date	\$236.00

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 Michelle Zeng Mailing Address 536 Dampier Dr City, State, Zip Code Greenville, MS 38701-7430 Name of Employer (Required) Accenture Occupation (Required) Consultant	08/07/2023	\$25.00
Aggregate year-to-date		\$321.00
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 Deonne Linenberger Mailing Address 2584 Rue Palafox City, State, Zip Code Biloxi, MS 39531-3733 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/17/2023	\$25.00
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 Philip Kuhn Mailing Address PO Box 82 City, State, Zip Code Raymond, MS 39154-0082 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/18/2023	\$50.00
Aggregate year-to-date		\$290.00
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 Jadonna Whitson Mailing Address 5405 Martin Cv City, State, Zip Code Olive Branch, MS 38654-5953 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/08/2023	\$100.00
Aggregate year-to-date		\$300.00

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 Susan Riddell Mailing Address 519 E Peace St City, State, Zip Code Canton, MS 39046-4712 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/19/2023	\$2,000.00
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 Steve Leeds Mailing Address 6410 Radiant Trce City, State, Zip Code Atlanta, GA 30328-2897 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/29/2023	\$500.00
Aggregate year-to-date		\$3,000.00
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 Phillip Pinkston Mailing Address 540 Shadow View Dr E City, State, Zip Code Hernando, MS 38632-6562 Name of Employer (Required) Orgill, Inc. Occupation (Required) Senior Programmer Analyst	08/29/2023	\$250.00
Aggregate year-to-date		\$350.00
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 Karen Logan Mailing Address 1829 Cedarbrook Cir City, State, Zip Code Belden, MS 38826-9528 Name of Employer (Required) Tupelo Public School District Occupation (Required) Educator	09/09/2023	\$250.00
Aggregate year-to-date		\$250.00

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 Janis Shibata Mailing Address 10433 Larwin Ave City, State, Zip Code Chatsworth, CA 91311-2059 Name of Employer (Required) Self Employed Occupation (Required) Insurance Broker	07/30/2023	\$50.00
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 Robert Rubin Mailing Address 911 Park Ave City, State, Zip Code New York, NY 10075-0385 Name of Employer (Required) Centerview Partners Occupation (Required) Senior Counselor	08/30/2023	\$5,000.00
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 Mary Miller Mailing Address 510 E 86th St City, State, Zip Code New York, NY 10028-7507 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$25.00
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 Mary Vi Risser Mailing Address 377 County Road 653B City, State, Zip Code Saltillo, MS 38866-5716 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/10/2023	\$250.00
Aggregate year-to-date		\$2,400.00

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 Debra Warner	07/31/2023	\$10.00
Mailing Address 502 E Lakeshore Dr		
City, State, Zip Code Carriere, MS 39426-7905		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
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 Raymond E. Mabus Jr	08/21/2023	\$1,000.00
Mailing Address 74 Woodcutters Ln		
City, State, Zip Code Harpers Ferry, WV 25425-7121		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	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 Lori Karny	08/31/2023	\$10.00
Mailing Address 6230 Wilshire Blvd		
City, State, Zip Code Los Angeles, CA 90048-5126		
Name of Employer (Required) Self Employed		
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$602.00
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 Rheta Johnson	09/22/2023	\$100.00
Mailing Address 117 County Road 259		
City, State, Zip Code Iuka, MS 38852-8542		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,446.00

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 Martha Samuelson <hr/> Mailing Address 17 Winthrop St <hr/> City, State, Zip Code West Newton, MA 02465-2308 <hr/> Name of Employer (Required) Anaylsis Group	08/02/2023	\$25,000.00
Occupation (Required) CEO	Aggregate year-to-date	\$40,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Susan Adams <hr/> Mailing Address 3203 Melinda Ln <hr/> City, State, Zip Code Corinth, MS 38834-2219 <hr/> Name of Employer (Required) Not Employed	08/12/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ron Coleman <hr/> Mailing Address 316 Quail Creek Dr <hr/> City, State, Zip Code Oxford, MS 38655-6108 <hr/> Name of Employer (Required) Not Employed	09/12/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Nan Tarlton <hr/> Mailing Address 210 Meadowlane Dr <hr/> City, State, Zip Code Madison, MS 39110-9611 <hr/> Name of Employer (Required) Not Employed	09/13/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,400.00

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 Bill Blancato Mailing Address 1860 Neushore Ct City, State, Zip Code Winston Salem, NC 27127-7287 Name of Employer (Required) Blancato Legal Services PLLC Occupation (Required) Attorney	09/13/2023	\$2,500.00
Aggregate year-to-date		\$2,750.00
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 D. Campbell Mailing Address 111 Lakeshore Dr City, State, Zip Code Brandon, MS 39047-6019 Name of Employer (Required) Southern Resource Service Inc. Occupation (Required) President	08/24/2023	\$100.00
Aggregate year-to-date		\$400.00
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 Slifka Mailing Address 41 Purdy Ave City, State, Zip Code Rye, NY 10580-7501 Name of Employer (Required) Self Employed Occupation (Required) Investments	09/04/2023	\$5,000.00
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 Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/25/2023	\$25.00
Aggregate year-to-date		\$680.50

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 William A. Cox Mailing Address 1739 Swann St NW City, State, Zip Code Washington, DC 20009-5536 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/25/2023	\$1,000.00
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 Susan Multer Mailing Address 15 Penny Ln City, State, Zip Code Ithaca, NY 14850-6267 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/05/2023	\$100.00
Aggregate year-to-date		\$300.00
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 Rozier Mailing Address 303 Woodland Hills Dr City, State, Zip Code Oxford, MS 38655-8429 Name of Employer (Required) MGC Law Occupation (Required) Attorney	08/15/2023	\$250.00
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 Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/05/2023	\$50.00
Aggregate year-to-date		\$325.00

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 Elizabeth Jenkins-Joffe Mailing Address 3825 Legation St NW City, State, Zip Code Washington, DC 20015-2701 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/26/2023	\$50.00
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/06/2023	\$25.00
Aggregate year-to-date		\$833.50
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 Rhoden Mailing Address 778 Gillespie St City, State, Zip Code Jackson, MS 39202-1711 Name of Employer (Required) Self Employed Occupation (Required) Physician	08/07/2023	\$25.00
Aggregate year-to-date		\$685.00
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 Ann T. Pincus Mailing Address 3202 Klingle Rd NW City, State, Zip Code Washington, DC 20008-3403 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/17/2023	\$250.00
Aggregate year-to-date		\$250.00

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 Raymond Mailing Address 733 Huckleberry Rd City, State, Zip Code Bay Saint Louis, MS 39520-1621 Name of Employer (Required) Self Employed Occupation (Required) Financial Consultant	08/28/2023	\$5.00
Aggregate year-to-date		\$4,080.00
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 Abner C. Young Mailing Address PO Box 249 City, State, Zip Code Como, MS 38619-0249 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/08/2023	\$200.00
Aggregate year-to-date		\$300.00
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 Barney McCann Mailing Address 1081 Raymond Bolton Rd City, State, Zip Code Raymond, MS 39154-9394 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/19/2023	\$25.00
Aggregate year-to-date		\$243.00
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 Lele W. Gillespie Mailing Address 1013 S Lamar Blvd City, State, Zip Code Oxford, MS 38655-4739 Name of Employer (Required) University of Mississippi Occupation (Required) Project Coordinator	09/19/2023	\$250.00
Aggregate year-to-date		\$2,100.00

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 Salmon	09/29/2023	\$500.00
Mailing Address 1068 Factory Dr		
City, State, Zip Code Charleston, MS 38921-6620		
Name of Employer (Required) Diabetic Shoppe		
Occupation (Required) Pharmacist	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Brad Coley	09/20/2023	\$500.00
Mailing Address 1118 Highway 348		
City, State, Zip Code Guntown, MS 38849-5306		
Name of Employer (Required) Bud Coley Trucking		
Occupation (Required) Transportation	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) _____		
Full Name Michael O'Neal	09/30/2023	\$25.00
Mailing Address 1011 Adeline St		
City, State, Zip Code Hattiesburg, MS 39401-5022		
Name of Employer (Required) Hattiesburg Clinic		
Occupation (Required) Physician	Aggregate year-to-date	\$2,526.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elwin Hall	09/30/2023	\$10.00
Mailing Address 2204 Popps Ferry Rd		
City, State, Zip Code Biloxi, MS 39532-4104		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

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 Charles Barland Mailing Address 13114 Romola Rd City, State, Zip Code Hermanville, MS 39086-9776 Name of Employer (Required) Self Employed Occupation (Required) Cattle Rancher	08/30/2023	\$100.00
Aggregate year-to-date		\$475.00
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 Johanna Rice Mailing Address 167 Court St City, State, Zip Code West Point, MS 39773-7990 Name of Employer (Required) Johanna Rice, LLC Occupation (Required) Publisher	07/31/2023	\$50.00
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 Sibyl M. Child Mailing Address 1935 E Bourne Pl City, State, Zip Code Jackson, MS 39211-6714 Name of Employer (Required) Keifer's Occupation (Required) Manager	08/21/2023	\$250.00
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 Linda Cox Mailing Address 12 Estate Dr City, State, Zip Code Long Beach, MS 39560-3912 Name of Employer (Required) Veterans Health Administration Occupation (Required) Psychologist	08/31/2023	\$200.00
Aggregate year-to-date		\$675.00

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 Janis Shibata Mailing Address 10433 Larwin Ave City, State, Zip Code Chatsworth, CA 91311-2059 Name of Employer (Required) Self Employed Occupation (Required) Insurance Broker	08/31/2023	\$50.00
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 Donald W. Medley Mailing Address 902 W Pine St City, State, Zip Code Hattiesburg, MS 39401-4262 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/22/2023	\$1,000.00
Aggregate year-to-date		\$2,150.00
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 Russell Smith Mailing Address 158 Arlington Rd City, State, Zip Code Beaumont, MS 39423-2617 Name of Employer (Required) Bentley Systems, Inc. Occupation (Required) Software Development Manager	08/13/2023	\$100.00
Aggregate year-to-date		\$841.40
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 Albert Spann Mailing Address PO Box 621 City, State, Zip Code Jackson, MS 39205-0621 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/24/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Joanna Shows	08/05/2023	\$25.00
Mailing Address 3 S Heron Cv		
City, State, Zip Code Hattiesburg, MS 39402-8723		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$975.00
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 Hamilton	08/25/2023	\$25.00
Mailing Address 707 Randolph Ave SE		
City, State, Zip Code Huntsville, AL 35801-3606		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$748.47
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 Ricky Johnston	09/26/2023	\$100.00
Mailing Address 419 3rd St S		
City, State, Zip Code Columbus, MS 39701-5632		
Name of Employer (Required) Gastroenterology Associates of Columbus		
Occupation (Required) Gastroenterologist	Aggregate year-to-date	\$750.00
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 L. Ducker	09/26/2023	\$500.00
Mailing Address PO Box 217		
City, State, Zip Code Purvis, MS 39475-0217		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00

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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/06/2023	\$5.00
Aggregate year-to-date		\$833.50
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 Tomie Green Mailing Address 114 Pine Island Dr City, State, Zip Code Jackson, MS 39206-3234 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/16/2023	\$25.00
Aggregate year-to-date		\$665.00
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>Committee - Not a PAC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Angela Turner Ford Campaign Mailing Address PO Box 1500 City, State, Zip Code West Point, MS 39773-1500 Name of Employer (Required) Occupation (Required)	08/07/2023	\$1,000.00
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 Robert Alexander Mailing Address 18 Highland Meadows Dr City, State, Zip Code Jackson, MS 39211-5949 Name of Employer (Required) Alexander CPA, LLC Occupation (Required) Accountant	08/17/2023	\$100.00
Aggregate year-to-date		\$900.00

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 Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	08/17/2023	\$25.00
Aggregate year-to-date		\$1,197.00
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 Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/27/2023	\$50.00
Aggregate year-to-date		\$3,000.00
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 Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$25.00
Aggregate year-to-date		\$680.50
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 R. Wilson Mailing Address 114 Leighton Rd City, State, Zip Code Oxford, MS 38655-2010 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/18/2023	\$100.00
Aggregate year-to-date		\$750.00

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 Jesse Johnson	09/08/2023	\$1,000.00
Mailing Address 55 Sunny Hill Rd		
City, State, Zip Code Poplarville, MS 39470-7226		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Diana Simpson	08/19/2023	\$250.00
Mailing Address 704 Concart St		
City, State, Zip Code Hattiesburg, MS 39401-6135		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Ann Smith	09/20/2023	\$10.00
Mailing Address PO Box 1865		
City, State, Zip Code Gulfport, MS 39502-1865		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$390.00
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 Dennis Mehiel	09/20/2023	\$2,500.00
Mailing Address 7 Renaissance Sq		
City, State, Zip Code White Plains, NY 10601-3056		
Name of Employer (Required) Four M Investments, LLC		
Occupation (Required) Business Owner	Aggregate year-to-date	\$7,500.00

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 Nan Tarlton Mailing Address 210 Meadowlane Dr City, State, Zip Code Madison, MS 39110-9611 Name of Employer (Required) Not Employed	09/30/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert Baler Mailing Address 3000 Pineland Dr City, State, Zip Code Gulfport, MS 39501-6239 Name of Employer (Required) Not Employed	09/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$270.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Martha Bergmark Mailing Address 6 Montgomery Ave City, State, Zip Code Takoma Park, MD 20912-4615 Name of Employer (Required) Not Employed	09/30/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Glenda Burns Mailing Address PO Box 110 City, State, Zip Code Okolona, MS 38860-0110 Name of Employer (Required) Bank of Okolona	07/30/2023	\$25.00
Occupation (Required) Loan Operations Officer	Aggregate year-to-date	\$335.00

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 Virден Jones Mailing Address 686 Hazelton Dr City, State, Zip Code Madison, MS 39110-7332 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/20/2023	\$500.00
Aggregate year-to-date		\$3,198.90
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 Kathy Griffith Mailing Address 162 Oxford Creek Dr City, State, Zip Code Oxford, MS 38655-2242 Name of Employer (Required) Griffith Law Firm Occupation (Required) Administrator	08/30/2023	\$50.00
Aggregate year-to-date		\$600.00
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 Cedric Burnett Mailing Address PO Box 961 City, State, Zip Code Tunica, MS 38676-0961 Name of Employer (Required) Mississippi House of Representatives Occupation (Required) Member	08/30/2023	\$500.00
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 Deshun Martin Mailing Address 115 Coals Hill Xing City, State, Zip Code Flora, MS 39071-5002 Name of Employer (Required) Martin & Martin Occupation (Required) Attorney	08/31/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Paul Pavlov Mailing Address 3911 A Government St City, State, Zip Code Ocean Springs, MS 39564-7454 Name of Employer (Required) Singing River Health System	09/11/2023	\$500.00
Occupation (Required) Physician	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) _____		
Full Name Don A. Zatroch Mailing Address 2366 17th Ave NW City, State, Zip Code Saint Paul, MN 55112-5204 Name of Employer (Required) Not Employed	09/13/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Terry Mangialardi Mailing Address 1181 Mcgowan Dr City, State, Zip Code Southaven, MS 38671-8430 Name of Employer (Required) Desoto County Schools	08/14/2023	\$25.00
Occupation (Required) Teacher	Aggregate year-to-date	\$215.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William Boyce Crowell Mailing Address 428 Highway 6 E City, State, Zip Code Batesville, MS 38606-3000 Name of Employer (Required) Not Employed	08/24/2023	\$5,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$10,000.00

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 Thomas Daschle Mailing Address 1155 23rd St NW City, State, Zip Code Washington, DC 20037-3301 Name of Employer (Required) The Daschle Group Occupation (Required) Consultant	09/14/2023	\$1,000.00
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 Diane Barrentine Mailing Address 93 County Road 150 City, State, Zip Code Coila, MS 38923-6751 Name of Employer (Required) Davis Pizza Enterprises, Inc. Occupation (Required) Business Owner	08/25/2023	\$500.00
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 James Lynch Mailing Address 617 Camelia Trl City, State, Zip Code Brandon, MS 39047-6316 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/26/2023	\$100.00
Aggregate year-to-date		\$1,075.00
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 Johnny Wray Mailing Address 731 Milam Rd City, State, Zip Code Cedarbluff, MS 39741-9021 Name of Employer (Required) Self Employed Occupation (Required) Farm	09/27/2023	\$100.00
Aggregate year-to-date		\$925.00

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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	08/27/2023	\$15.00
Aggregate year-to-date		\$602.00
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 Keith Johnson Mailing Address PO Box 421 City, State, Zip Code Nesbit, MS 38651-0421 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/07/2023	\$50.00
Aggregate year-to-date		\$1,150.00
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 Nathan Prescott Mailing Address 309 Live Oak Ave City, State, Zip Code Ocean Springs, MS 39564-3909 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/18/2023	\$100.00
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 Warner McBride Mailing Address 7697 Eureka Rd City, State, Zip Code Courtland, MS 38620-9456 Name of Employer (Required) Mississippi House of Representatives Occupation (Required) Representative	09/18/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Barbara Austin Mailing Address 1435 Saint Ann St City, State, Zip Code Jackson, MS 39202-1847 Name of Employer (Required) Not Employed	08/28/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$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) _____		
Full Name Jonathan Compretta Mailing Address 4254 Berlin Dr City, State, Zip Code Jackson, MS 39211-6017 Name of Employer (Required) Bernstein Litowitz Berger & Grossmann LLP	09/20/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	09/30/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	09/21/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00

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 Raleigh Byars <hr/> Mailing Address 48 County Road 229 <hr/> City, State, Zip Code Oxford, MS 38655-5800 <hr/> Name of Employer (Required) Not Employed	09/22/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$885.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Debra Kaufman <hr/> Mailing Address 156 County Road 303 <hr/> City, State, Zip Code Iuka, MS 38852-7516 <hr/> Name of Employer (Required) Not Employed	09/12/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$277.92
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert Barber <hr/> Mailing Address 25 Arlington St <hr/> City, State, Zip Code Cambridge, MA 02140-2701 <hr/> Name of Employer (Required) Prince Lobel	09/23/2023	\$250.00
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) _____		
Full Name Cynthia Speetjens <hr/> Mailing Address 211 Belle Pointe <hr/> City, State, Zip Code Madison, MS 39110-8289 <hr/> Name of Employer (Required) Self Employed	08/23/2023	\$250.00
Occupation (Required) Attorney	Aggregate year-to-date	\$350.00

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 B. Clark Mailing Address 167 Rolling Meadows Rd City, State, Zip Code Ridgeland, MS 39157-9488 Name of Employer (Required) Not Employed	08/23/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Dana Gonzalez Mailing Address 3663 James Monroe Dr City, State, Zip Code Jackson, MS 39213-3020 Name of Employer (Required) Not Employed	09/14/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$305.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Denotee Martin Mailing Address 1009 County Road 65 City, State, Zip Code New Albany, MS 38652-8923 Name of Employer (Required) Not Employed	08/25/2023	\$7.50
Occupation (Required) Not Employed	Aggregate year-to-date	\$532.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Michael F. Smith Mailing Address 505 Dove Holw City, State, Zip Code Oxford, MS 38655-5178 Name of Employer (Required) Self Employed	08/06/2023	\$10.00
Occupation (Required) Writer	Aggregate year-to-date	\$735.00

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 Debbie Hall	08/16/2023	\$25.00
Mailing Address 127 Sesame Rd		
City, State, Zip Code Tupelo, MS 38801-8615		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Professor	Aggregate year-to-date	\$537.40
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 Hamilton	09/16/2023	\$25.00
Mailing Address 707 Randolph Ave SE		
City, State, Zip Code Huntsville, AL 35801-3606		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$748.47
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 Null	08/07/2023	\$200.00
Mailing Address 624 1st St S		
City, State, Zip Code Columbus, MS 39701-5613		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
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 Cheryl Peters	08/17/2023	\$5.00
Mailing Address 75 Derek Dr		
City, State, Zip Code Columbus, MS 39702-7817		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$255.00

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 Jeff Justis <hr/> Mailing Address 710 Long Meadow Dr <hr/> City, State, Zip Code Oxford, MS 38655-9792 <hr/> Name of Employer (Required) Not Employed	08/27/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$825.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John Mcinnis <hr/> Mailing Address 2509 Promenade Blvd <hr/> City, State, Zip Code Ocean Springs, MS 39564-8720 <hr/> Name of Employer (Required) Not Employed	09/28/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Cris Pickering <hr/> Mailing Address 232 Calumet Dr <hr/> City, State, Zip Code Madison, MS 39110-8685 <hr/> Name of Employer (Required) Not Employed	09/28/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lynn Dobbs <hr/> Mailing Address 43 Dobbs Dr <hr/> City, State, Zip Code Columbus, MS 39701-9619 <hr/> Name of Employer (Required) Not Employed	08/08/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

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 William N. Reed <hr/> Mailing Address 28 Waterford Pl <hr/> City, State, Zip Code Jackson, MS 39211-2945 <hr/> Name of Employer (Required) Self Employed	08/28/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,000.00
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 Lori Karny <hr/> Mailing Address 6230 Wilshire Blvd <hr/> City, State, Zip Code Los Angeles, CA 90048-5126 <hr/> Name of Employer (Required) Self Employed	09/29/2023	\$16.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$602.00
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 Lisa Walker <hr/> Mailing Address 1654 Stonehedge Dr <hr/> City, State, Zip Code Southaven, MS 38671-8876 <hr/> Name of Employer (Required) Not Employed	08/29/2023	\$51.25
Occupation (Required) Retired	Aggregate year-to-date	\$276.25
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 Lori Karny <hr/> Mailing Address 6230 Wilshire Blvd <hr/> City, State, Zip Code Los Angeles, CA 90048-5126 <hr/> Name of Employer (Required) Self Employed	08/29/2023	\$15.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$602.00

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 Ann Smith Mailing Address PO Box 1865 City, State, Zip Code Gulfport, MS 39502-1865 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/20/2023	\$10.00
Aggregate year-to-date		\$390.00
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 Jonathan Harris Mailing Address 9 Marie Ave City, State, Zip Code Cambridge, MA 02139-1002 Name of Employer (Required) Tufts University Occupation (Required) Researcher	07/30/2023	\$25.00
Aggregate year-to-date		\$247.50
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 Baptist Law Firm PLLC Mailing Address 1305 Church Rd E City, State, Zip Code Southaven, MS 38671-9711 Name of Employer (Required) Occupation (Required)	08/30/2023	\$300.00
Aggregate year-to-date		\$300.00
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 Mickey Newsom Mailing Address PO Box 112 City, State, Zip Code Magnolia, MS 39652-0112 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/31/2023	\$100.00
Aggregate year-to-date		\$350.00

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 Steven Smith	09/22/2023	\$10.00
Mailing Address 1439 Briarwood Dr		
City, State, Zip Code Marshfield, MO 65706-2407		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 William Harris	08/23/2023	\$2,500.00
Mailing Address 1010 Waltham St		
City, State, Zip Code Lexington, MA 02421-8061		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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 Andrew Jenkins	08/23/2023	\$100.00
Mailing Address 116 Highland Meadow Rd		
City, State, Zip Code Flora, MS 39071-9553		
Name of Employer (Required) AJA Management & Technical Services		
Occupation (Required) Business Owner	Aggregate year-to-date	\$4,850.00
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 Joan Santa Cruz	08/23/2023	\$10.00
Mailing Address 5825 Cedar Rd		
City, State, Zip Code Ocean Springs, MS 39564-2250		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$310.00

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 Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/13/2023	\$25.00
Aggregate year-to-date		\$885.00
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 B. Farese Mailing Address 112 Westminster Dr City, State, Zip Code Oxford, MS 38655-6099 Name of Employer (Required) Farese Farese & Farese PA Occupation (Required) Attorney	09/24/2023	\$250.00
Aggregate year-to-date		\$2,750.00
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 Mahalia Jackson Mailing Address 470 Hopson Pixley Rd City, State, Zip Code Clarksdale, MS 38614-9044 Name of Employer (Required) Aaron E. Henry Community Health Services Center Occupation (Required) Program Coordinator	08/04/2023	\$50.00
Aggregate year-to-date		\$210.00
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 McQuillan Mailing Address 37 Lancaster St City, State, Zip Code Cambridge, MA 02140-2838 Name of Employer (Required) Triumvirate Environmental, Inc. Occupation (Required) Executive	09/25/2023	\$5,000.00
Aggregate year-to-date		\$5,000.00

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 Raymond Mailing Address 733 Huckleberry Rd City, State, Zip Code Bay Saint Louis, MS 39520-1621 Name of Employer (Required) Self Employed Occupation (Required) Financial Consultant	09/05/2023	\$1,000.00
Aggregate year-to-date		\$4,080.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Michael Andrew Rueff Mailing Address 4325 Dalrymple Ct City, State, Zip Code Jackson, MS 39211-6237 Name of Employer (Required) Lunsford, Baskin & Priebe PLLC Occupation (Required) Attorney	09/06/2023	\$1,000.00
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) _____ Full Name E. K. Pruitt Mailing Address 4217 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3420 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/27/2023	\$30.00
Aggregate year-to-date		\$880.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/17/2023	\$50.00
Aggregate year-to-date		\$3,400.00

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 Elizabeth Stevens Mailing Address 3050 Avon Ln NW City, State, Zip Code Washington, DC 20007-2908 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/27/2023	\$500.00
Aggregate year-to-date		\$3,000.00
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 Ronald Unz Mailing Address 2535 Wright Rd City, State, Zip Code Steens, MS 39766-9129 Name of Employer (Required) Mississippi State University Occupation (Required) Scientist	09/07/2023	\$5.00
Aggregate year-to-date		\$335.00
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 Suzanne H. Robinson Mailing Address 206 Wood St City, State, Zip Code Water Valley, MS 38965-2603 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/28/2023	\$25.00
Aggregate year-to-date		\$1,425.00
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 Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/08/2023	\$25.00
Aggregate year-to-date		\$885.00

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 Charles Jackson Williams	08/08/2023	\$250.00
Mailing Address 305 Market St		
City, State, Zip Code Water Valley, MS 38965-2011		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Teacher	Aggregate year-to-date	\$1,580.60
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 Patrina R. Dace	09/29/2023	\$100.00
Mailing Address 105 Sutter Dr		
City, State, Zip Code Terry, MS 39170-5032		
Name of Employer (Required) Kaleidoscope of Learning		
Occupation (Required) Director	Aggregate year-to-date	\$650.00
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 Clarence E. Smith	09/19/2023	\$100.00
Mailing Address 423 W Franklin St		
City, State, Zip Code Tupelo, MS 38804-3821		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
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 Edson Griswold	09/30/2023	\$30.00
Mailing Address 1699 S Trenton St		
City, State, Zip Code Denver, CO 80231-5602		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00

Reporting Period 7/30/2023 through 9/30/2023

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 Michael O'Neal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic Occupation (Required) Physician	08/10/2023	\$50.00
		Aggregate year-to-date
		\$2,526.00
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 Mary Vi Risser Mailing Address 377 County Road 653B City, State, Zip Code Saltillo, MS 38866-5716 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$100.00
		Aggregate year-to-date
		\$2,400.00
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 Onile Sestokas Mailing Address 15 Christine Ln City, State, Zip Code Media, PA 19063-1519 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/21/2023	\$250.00
		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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	07/31/2023	\$15.00
		Aggregate year-to-date
		\$833.50

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 Amanda Pannell Mailing Address 65 Byhalia Creek Farms Rd E City, State, Zip Code Byhalia, MS 38611-7025 Name of Employer (Required) Ford Occupation (Required) Marketing	08/31/2023	\$500.00
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) _____ Full Name Juanita Boutin Mailing Address PO Box 400 City, State, Zip Code Oxford, MS 38655-0400 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$25.00
Aggregate year-to-date		\$850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Dan Webb Mailing Address PO Box 496 City, State, Zip Code Tupelo, MS 38802-0496 Name of Employer (Required) Webb Sanders Williams & Williams Occupation (Required) Attorney	08/03/2023	\$500.00
Aggregate year-to-date		\$11,750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name James Sones Mailing Address 1225 3rd St City, State, Zip Code New Orleans, LA 70130-5741 Name of Employer (Required) Tulane University Occupation (Required) Consultant	08/03/2023	\$500.00
Aggregate year-to-date		\$500.00

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 Edson Griswold	08/23/2023	\$25.00
Mailing Address 1699 S Trenton St		
City, State, Zip Code Denver, CO 80231-5694		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$833.50
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 L. Chadwick	08/14/2023	\$50.00
Mailing Address 449 Highway 334		
City, State, Zip Code Oxford, MS 38655-6339		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$400.00
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 Harold Fiore	09/04/2023	\$100.00
Mailing Address 118 W Jefferson Ave		
City, State, Zip Code Greenwood, MS 38930-3536		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00
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 Mary Entrekin	08/25/2023	\$100.00
Mailing Address 129 Whispering Oaks Xing		
City, State, Zip Code Pearl, MS 39208-4152		
Name of Employer (Required) United Methodist Church		
Occupation (Required) Compliance Analyst	Aggregate year-to-date	\$380.60

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 Lisa McCollom Mailing Address 201 Hoffman Ln City, State, Zip Code Waveland, MS 39576-4312 Name of Employer (Required) American Airlines	09/16/2023	\$300.00
Occupation (Required) Flight Attendant	Aggregate year-to-date	\$886.75
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 Maureen McKerns Mailing Address 813 42nd Ave City, State, Zip Code Gulfport, MS 39501-1451 Name of Employer (Required) Not Employed	08/16/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
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 Jay Murphy Mailing Address 121 Maison Deville City, State, Zip Code Starkville, MS 39759-4164 Name of Employer (Required) Self Employed	08/07/2023	\$100.00
Occupation (Required) Real Estate Broker	Aggregate year-to-date	\$350.00
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 Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed	08/07/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$478.00

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 Jodie Levin-Epstein <hr/> Mailing Address 3335 Quesada St NW <hr/> City, State, Zip Code Washington, DC 20015-1664 <hr/> Name of Employer (Required) Self Employed	09/28/2023	\$500.00
Occupation (Required) Public Policy Consultant	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 Stacy White <hr/> Mailing Address 1191 County Road 506 <hr/> City, State, Zip Code Shannon, MS 38868-9734 <hr/> Name of Employer (Required) Cadence Bank	08/08/2023	\$250.00
Occupation (Required) Mortgage Loan Officer	Aggregate year-to-date	\$528.40
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 Karen Smith <hr/> Mailing Address 14624 S Vandalia Ave <hr/> City, State, Zip Code Bixby, OK 74008-3754 <hr/> Name of Employer (Required) Not Employed	08/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Patrick Benvenuto <hr/> Mailing Address PO Box 2014 <hr/> City, State, Zip Code Bay Saint Louis, MS 39521-2014 <hr/> Name of Employer (Required) Bay Motor Winding	09/29/2023	\$100.00
Occupation (Required) Vice President of Sales & Marketing	Aggregate year-to-date	\$500.00

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 Thorne Butler Mailing Address 3942 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3411 Name of Employer (Required) Not Employed	09/30/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$670.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required) Not Employed	07/30/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$607.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Roger Bedford Mailing Address 50 Sherwood Dr City, State, Zip Code Tuscaloosa, AL 35401-1170 Name of Employer (Required) Self Employed	08/30/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mack Lowery Mailing Address 5055 Myers Rd City, State, Zip Code Terry, MS 39170-9429 Name of Employer (Required) Aamco Transmission	08/11/2023	\$25.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$530.00

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 Glen W. Fortinberry <hr/> Mailing Address 1900 Eastover Dr <hr/> City, State, Zip Code Jackson, MS 39211-6434 <hr/> Name of Employer (Required) Not Employed	08/11/2023	\$1,000.00
Occupation (Required) Not Employed	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 Taliscia Tobias <hr/> Mailing Address 16224 Lily Orchard Rd <hr/> City, State, Zip Code Moss Point, MS 39562-9002 <hr/> Name of Employer (Required) US Dept of Veterans Affairs	08/31/2023	\$25.00
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$225.00
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 Catherine Mclean <hr/> Mailing Address 5102 Yuma Pl NW <hr/> City, State, Zip Code Washington, DC 20016-4309 <hr/> Name of Employer (Required) Dylan Green	09/22/2023	\$250.00
Occupation (Required) Consultant	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 Cornelis Gispen <hr/> Mailing Address 1112 S 11th St <hr/> City, State, Zip Code Oxford, MS 38655-4610 <hr/> Name of Employer (Required) Not Employed	09/12/2023	\$200.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,175.00

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 Patrick Phillips Mailing Address 653 Ferncliff Dr City, State, Zip Code Jackson, MS 39211-2606 Name of Employer (Required) Not Employed	09/23/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Charles Benvenuti Mailing Address PO Box 2639 City, State, Zip Code Bay Saint Louis, MS 39521-2639 Name of Employer (Required) Not Employed	08/03/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ann Smith Mailing Address PO Box 1865 City, State, Zip Code Gulfport, MS 39502-1865 Name of Employer (Required) Not Employed	09/13/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$390.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name David Kaye Mailing Address 123 Nottingham Ter City, State, Zip Code Buffalo, NY 14216-3504 Name of Employer (Required) University at Buffalo	09/24/2023	\$50.00
Occupation (Required) Faculty	Aggregate year-to-date	\$525.00

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 Jacqueline Scott	09/24/2023	\$100.00
Mailing Address 12025 Springridge Rd		
City, State, Zip Code Terry, MS 39170-8105		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$410.00
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. J. Jones	08/04/2023	\$25.00
Mailing Address PO Box 23		
City, State, Zip Code Coahoma, MS 38617-0023		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
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 Raburn Coln	09/25/2023	\$25.00
Mailing Address 288 County Road 218		
City, State, Zip Code Corinth, MS 38834-7531		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$345.00
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 Lynn Fuller	08/15/2023	\$250.00
Mailing Address 2949 Divisadero St		
City, State, Zip Code San Francisco, CA 94123-3822		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00

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 Sullivan Mailing Address 253 County Road 325 City, State, Zip Code Oxford, MS 38655-9566 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/26/2023	\$250.00
Aggregate year-to-date		\$1,750.00
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 Mahalia Jackson Mailing Address 470 Hopson Pixley Rd City, State, Zip Code Clarksdale, MS 38614-9044 Name of Employer (Required) Aaron E. Henry Community Health Services Center Occupation (Required) Program Coordinator	08/06/2023	\$15.00
Aggregate year-to-date		\$210.00
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 Ann J. Abadie Mailing Address 2238 Lee Loop City, State, Zip Code Oxford, MS 38655-4920 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/16/2023	\$5.00
Aggregate year-to-date		\$790.00
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 Jamie W. Rebentisch Mailing Address 141 Poplar Springs Dr City, State, Zip Code Tupelo, MS 38804-9234 Name of Employer (Required) North Mississippi Health Services Occupation (Required) Pharmacist	08/26/2023	\$25.00
Aggregate year-to-date		\$398.90

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 Dennis J. J. Erby Mailing Address PO Box 2811 City, State, Zip Code Columbus, MS 39704-2811 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/06/2023	\$250.00
Aggregate year-to-date		\$3,275.00
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 Ellen Lake Mailing Address 4230 Lakeshore Ave City, State, Zip Code Oakland, CA 94610-1136 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/27/2023	\$100.00
Aggregate year-to-date		\$400.00
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 Leigh Soares Mailing Address 2605 Pin Oak Dr City, State, Zip Code Starkville, MS 39759-3514 Name of Employer (Required) Mississippi State University Occupation (Required) Professor	09/07/2023	\$75.00
Aggregate year-to-date		\$375.00
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 Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/18/2023	\$100.00
Aggregate year-to-date		\$3,400.00

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 Len Pinkley <hr/> Mailing Address 60010 Indian Cv <hr/> City, State, Zip Code Amory, MS 38821-6007 <hr/> Name of Employer (Required) Not Employed	08/08/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
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 Thomas V. Obrien <hr/> Mailing Address 511 Dabbs St <hr/> City, State, Zip Code Hattiesburg, MS 39401-3941 <hr/> Name of Employer (Required) University of Southern Mississippi	09/29/2023	\$100.00
Occupation (Required) Professor	Aggregate year-to-date	\$300.00
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 Sam Pace <hr/> Mailing Address 2013 N Parc Cir <hr/> City, State, Zip Code Tupelo, MS 38804-9723 <hr/> Name of Employer (Required) Not Employed	09/30/2023	\$250.00
Occupation (Required) Not Employed	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 Richard Courtney <hr/> Mailing Address PO Box 23126 <hr/> City, State, Zip Code Jackson, MS 39225-3126 <hr/> Name of Employer (Required) Courtney Elder Law	09/30/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$775.00

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 Troy Pike Mailing Address 747 Greenview Trl NE City, State, Zip Code Brookhaven, MS 39601-8760 Name of Employer (Required) I.C. Thomasson & Associates Occupation (Required) Mechanical Engineer	08/20/2023	\$1,000.00
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) _____ Full Name Bethany Theilman Mailing Address 131 Redbud Trl City, State, Zip Code Brandon, MS 39047-6402 Name of Employer (Required) Diabetes Foundation of MS Occupation (Required) Secretary	07/31/2023	\$25.00
Aggregate year-to-date		\$217.10
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Suzanne Walsh Mailing Address 2725 White Wing Ln City, State, Zip Code West Palm Beach, FL 33409-2032 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/11/2023	\$25.00
Aggregate year-to-date		\$203.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Angelos Vamvakas Mailing Address 3161 Wayne Dr City, State, Zip Code Diberville, MS 39540-8554 Name of Employer (Required) Self Employed Occupation (Required) Psychiatrist	09/01/2023	\$100.00
Aggregate year-to-date		\$250.00

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 Desiree Hensley	09/22/2023	\$250.00
Mailing Address 210 Longest Rd		
City, State, Zip Code Oxford, MS 38655-2216		
Name of Employer (Required) University of Mississippi School of Law		
Occupation (Required) Professor	Aggregate year-to-date	\$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) _____		
Full Name David R. Mann	09/22/2023	\$100.00
Mailing Address 316 Sonoma Cv		
City, State, Zip Code Madison, MS 39110-9549		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$800.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elizabeth West	08/12/2023	\$50.00
Mailing Address PO Box 40		
City, State, Zip Code Pickwick Dam, TN 38365-0040		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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) _____		
Full Name David Elliott III	08/22/2023	\$25.00
Mailing Address 205 Autumn Ridge Dr		
City, State, Zip Code Jackson, MS 39211-5955		
Name of Employer (Required) Episcopal Church		
Occupation (Required) Priest	Aggregate year-to-date	\$225.00

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 Johnie Seal <hr/> Mailing Address 1286 John Amacker Rd <hr/> City, State, Zip Code Poplarville, MS 39470-6396 <hr/> Name of Employer (Required) Not Employed	08/04/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$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) _____		
Full Name Curtis Wilkie <hr/> Mailing Address 4 Colebrook Rd <hr/> City, State, Zip Code Little Compton, RI 02837-2042 <hr/> Name of Employer (Required) Akamai	08/15/2023	\$250.00
Occupation (Required) Senior Director	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) _____		
Full Name Kathryn Goff <hr/> Mailing Address 108 Formosa Dr <hr/> City, State, Zip Code Brandon, MS 39047-7911 <hr/> Name of Employer (Required) Carson Law Group	08/16/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$306.85
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elizabeth Cagle <hr/> Mailing Address 411 N Montgomery St <hr/> City, State, Zip Code Starkville, MS 39759-2605 <hr/> Name of Employer (Required) MS State University	09/16/2023	\$25.00
Occupation (Required) Instructor	Aggregate year-to-date	\$332.25

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 Stephen Baylot <hr/> Mailing Address 9269 Highway 18 <hr/> City, State, Zip Code Raymond, MS 39154-8914 <hr/> Name of Employer (Required) Mardi Gras Motors	08/07/2023	\$300.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$1,400.00
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 Andrew Jenkins <hr/> Mailing Address 116 Highland Meadow Rd <hr/> City, State, Zip Code Flora, MS 39071-9553 <hr/> Name of Employer (Required) AJA Management & Technical Services	09/07/2023	\$100.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$4,850.00
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 S. Jones <hr/> Mailing Address 204 Eastbrooke St <hr/> City, State, Zip Code Jackson, MS 39216-4716 <hr/> Name of Employer (Required) Not Employed	09/07/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$350.00
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 Beth Stoor <hr/> Mailing Address 9314 SW 97th Ln <hr/> City, State, Zip Code Ocala, FL 34481-7573 <hr/> Name of Employer (Required) Not Employed	09/18/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$295.00

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 Jane Alexander Mailing Address 2015 E Northside Dr City, State, Zip Code Jackson, MS 39211-6125 Name of Employer (Required) Not Employed	08/18/2023	\$33.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$383.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Terry Dwyer Mailing Address 950 Fairfax Cir City, State, Zip Code Jackson, MS 39211-4250 Name of Employer (Required) Not Employed	09/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed	09/29/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$885.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Peggy B. Peterson Mailing Address 604 Abbots Ln City, State, Zip Code Ridgeland, MS 39157-2852 Name of Employer (Required) Not Employed	09/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

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 Ricky Johnston <hr/> Mailing Address 419 3rd St S <hr/> City, State, Zip Code Columbus, MS 39701-5632 <hr/> Name of Employer (Required) Gastroenterology Associates of Columbus	08/09/2023	\$250.00
Occupation (Required) Gastroenterologist	Aggregate year-to-date	\$750.00
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 Tomie Green <hr/> Mailing Address 114 Pine Island Dr <hr/> City, State, Zip Code Jackson, MS 39206-3234 <hr/> Name of Employer (Required) Not Employed	08/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$665.00
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 Maureen McKerns <hr/> Mailing Address 813 42nd Ave <hr/> City, State, Zip Code Gulfport, MS 39501-1451 <hr/> Name of Employer (Required) Not Employed	08/29/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
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 Daniel Pair <hr/> Mailing Address 968 Road 261 <hr/> City, State, Zip Code Tupelo, MS 38801-7600 <hr/> Name of Employer (Required) Social Security Administration	09/09/2023	\$25.00
Occupation (Required) Claims Specialist	Aggregate year-to-date	\$400.00

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 Glenn Taylor <hr/> Mailing Address 3644 Old Canton Rd <hr/> City, State, Zip Code Jackson, MS 39216-3313 <hr/> Name of Employer (Required) Copeland Cook Taylor & Bush	08/20/2023	\$50.00
Occupation (Required) Attorney	Aggregate year-to-date	\$525.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Reilly Morse <hr/> Mailing Address 929 Bridge St <hr/> City, State, Zip Code Gulfport, MS 39507-3432 <hr/> Name of Employer (Required) Not Employed	08/30/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,825.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Don A. Zatroch <hr/> Mailing Address 2366 17th Ave NW <hr/> City, State, Zip Code Saint Paul, MN 55112-5204 <hr/> Name of Employer (Required) Not Employed	08/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Charles Barland <hr/> Mailing Address 13114 Romola Rd <hr/> City, State, Zip Code Hermanville, MS 39086-9776 <hr/> Name of Employer (Required) Self Employed	08/31/2023	\$100.00
Occupation (Required) Cattle Rancher	Aggregate year-to-date	\$475.00

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 Roger Byrd Mailing Address 701 N Fulton St City, State, Zip Code Iuka, MS 38852-2411 Name of Employer (Required) Not Employed	08/12/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$235.00
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 Sarah Faulkner Mailing Address 108 Sumach St City, State, Zip Code Lookout Mountai, TN 37350-1132 Name of Employer (Required) None	09/12/2023	\$10,000.00
Occupation (Required) Homemaker	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 Susan M. Glisson Mailing Address 9 Meaders Ln City, State, Zip Code Oxford, MS 38655-6074 Name of Employer (Required) Self Employed	08/03/2023	\$100.00
Occupation (Required) Facilitator	Aggregate year-to-date	\$290.75
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 Renee Jones Mailing Address 2 Grove Park Pl City, State, Zip Code Jackson, MS 39216-3615 Name of Employer (Required) Not Employed	08/23/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,101.00

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 Rose M. Juzang Mailing Address 601 N Forest Dr City, State, Zip Code Gulfport, MS 39507-2031 Name of Employer (Required) Not Employed	09/14/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kathy Griffith Mailing Address 162 Oxford Creek Dr City, State, Zip Code Oxford, MS 38655-2242 Name of Employer (Required) Griffith Law Firm	08/04/2023	\$100.00
Occupation (Required) Administrator	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Billy Wilemon Mailing Address 103 Davis Dr City, State, Zip Code Aberdeen, MS 39730-2909 Name of Employer (Required) Euphrates Consulting Group, LLC	09/25/2023	\$25.00
Occupation (Required) Chemical Engineer	Aggregate year-to-date	\$320.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required) Not Employed	08/16/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$607.60

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 Audrey McBride	08/16/2023	\$100.00
Mailing Address 1250 E Lakeshore Dr		
City, State, Zip Code Starkville, MS 39759-2482		
Name of Employer (Required) McBride & Co Real Estate		
Occupation (Required) Broker	Aggregate year-to-date	\$490.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Suzanne Walsh	08/18/2023	\$33.00
Mailing Address 2725 White Wing Ln		
City, State, Zip Code West Palm Beach, FL 33409-2032		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$203.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Bethany Theilman	08/18/2023	\$25.00
Mailing Address 131 Redbud Trl		
City, State, Zip Code Brandon, MS 39047-6402		
Name of Employer (Required) Diabetes Foundation of MS		
Occupation (Required) Secretary	Aggregate year-to-date	\$217.10
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Marsha L. Tapscott	09/29/2023	\$250.00
Mailing Address 1014 Belledeer Dr		
City, State, Zip Code Tupelo, MS 38804-1912		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$450.00

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 Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed	08/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Darrylinn Todd Mailing Address 3616 Roman Forest Dr City, State, Zip Code Southaven, MS 38672-6784 Name of Employer (Required) University of Tennessee Health Science Center	09/09/2023	\$100.00
Occupation (Required) Administrator	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Don A. Zatroch Mailing Address 2366 17th Ave NW City, State, Zip Code Saint Paul, MN 55112-5204 Name of Employer (Required) Not Employed	09/20/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Marcy Petrini Mailing Address 950 Fairfax Cir City, State, Zip Code Jackson, MS 39211-4250 Name of Employer (Required) Not Employed	09/30/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

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 Elise Gillespie	09/30/2023	\$25.00
Mailing Address 1013 S Lamar Blvd		
City, State, Zip Code Oxford, MS 38655-4739		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$575.00
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 Patrick Benvenuti	08/10/2023	\$100.00
Mailing Address PO Box 2014		
City, State, Zip Code Bay Saint Louis, MS 39521-2014		
Name of Employer (Required) Bay Motor Winding		
Occupation (Required) Vice President of Sales & Marketing	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 Virginia Wilson	08/30/2023	\$100.00
Mailing Address 3696 High Point Dr		
City, State, Zip Code Memphis, TN 38122-3752		
Name of Employer (Required) Epstein Becker Green		
Occupation (Required) Attorney	Aggregate year-to-date	\$205.00
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 Shalala	08/21/2023	\$500.00
Mailing Address 60 Edgewater Dr		
City, State, Zip Code Coral Gables, FL 33133-6970		
Name of Employer (Required) University of Miami		
Occupation (Required) Professor	Aggregate year-to-date	\$600.00

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 Elizabeth Jenkins-Joffe	08/31/2023	\$50.00
Mailing Address 3825 Legation St NW		
City, State, Zip Code Washington, DC 20015-2701		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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 Susan Goldhor	08/31/2023	\$1,000.00
Mailing Address 45 B Museum St		
City, State, Zip Code Cambridge, MA 02138-1921		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 William Denman	09/24/2023	\$10.00
Mailing Address 417 Main St		
City, State, Zip Code Winchester, MA 01890-2925		
Name of Employer (Required) Massachusetts General Physicians Organization		
Occupation (Required) Physician	Aggregate year-to-date	\$618.30
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 E. Fairbank	09/14/2023	\$100.00
Mailing Address 20014 Patton Rd		
City, State, Zip Code Long Beach, MS 39560-3345		
Name of Employer (Required) iResonate		
Occupation (Required) CEO	Aggregate year-to-date	\$1,100.00

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 Linda Bryant-Angotti Mailing Address 129 Hedges Cv City, State, Zip Code Oxford, MS 38655-1146 Name of Employer (Required) Kent State University	09/04/2023	\$50.00
Occupation (Required) Professor	Aggregate year-to-date	\$385.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John Blandford Mailing Address 46 Mayfair Dr City, State, Zip Code Rancho Mirage, CA 92270-2562 Name of Employer (Required) Blandford Group	09/25/2023	\$1,000.00
Occupation (Required) Public Affairs Consultant	Aggregate year-to-date	\$3,500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jo Durst Mailing Address 799 Pine Cir City, State, Zip Code Starkville, MS 39759-3729 Name of Employer (Required) Not Employed	08/05/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert Baler Mailing Address 3000 Pineland Dr City, State, Zip Code Gulfport, MS 39501-6239 Name of Employer (Required) Not Employed	08/05/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$270.00

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 Gail Anderson <hr/> Mailing Address 1329 Willis Rd <hr/> City, State, Zip Code Carthage, MS 39051-9126 <hr/> Name of Employer (Required) Not Employed	08/05/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Graham Slakie <hr/> Mailing Address 4706 Buckingham Dr <hr/> City, State, Zip Code Chattanooga, TN 37421-1108 <hr/> Name of Employer (Required) Regal Cinemas	08/25/2023	\$25.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,197.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Andrew Jenkins <hr/> Mailing Address 116 Highland Meadow Rd <hr/> City, State, Zip Code Flora, MS 39071-9553 <hr/> Name of Employer (Required) AJA Management & Technical Services	08/25/2023	\$50.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$4,850.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Rathi Iyer <hr/> Mailing Address 130 Whippoorwill Rd <hr/> City, State, Zip Code Brandon, MS 39047-6429 <hr/> Name of Employer (Required) Not Employed	09/16/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00

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 Jolee Hussey Mailing Address 209 Woodland Hills Dr City, State, Zip Code Oxford, MS 38655-9771 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/17/2023	\$100.00
Aggregate year-to-date		\$300.00
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 Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/27/2023	\$25.00
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 A. K. McCarthy Mailing Address 22332 Freddie Frank Rd City, State, Zip Code Long Beach, MS 39560-9728 Name of Employer (Required) US Dept of Housing and Urban Development Occupation (Required) Investigator	08/18/2023	\$200.00
Aggregate year-to-date		\$750.00
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 Betsy Krieger Mailing Address 411 Hawthorne Rd City, State, Zip Code Baltimore, MD 21210-2304 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/19/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00

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 Joseph P. Hudson Mailing Address PO Box 908 City, State, Zip Code Gulfport, MS 39502-0908 Name of Employer (Required) Hudson & Smith Attys at Law Occupation (Required) Attorney	09/29/2023	\$250.00
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 Alexander Lawson Mailing Address 224 Cedarhurst Dr City, State, Zip Code Jackson, MS 39206-4005 Name of Employer (Required) Hope Enterprise Corporation Occupation (Required) Banking	09/29/2023	\$250.00
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 Duncan M. Gray III Mailing Address 110 Philip Rd City, State, Zip Code Oxford, MS 38655-2014 Name of Employer (Required) Nativity Episcopal Church Occupation (Required) Clergy	08/29/2023	\$25.00
Aggregate year-to-date		\$675.00
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 Johnny R. Green Mailing Address 973 Dixie Creek Rd City, State, Zip Code Saltillo, MS 38866-9061 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/30/2023	\$200.00
Aggregate year-to-date		\$400.00

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 Anthony Baggett <hr/> Mailing Address 104 N Broadway St <hr/> City, State, Zip Code Tupelo, MS 38804-3967 <hr/> Name of Employer (Required) Busted Spring, LLC	07/30/2023	\$50.00
Occupation (Required) Web Developer	Aggregate year-to-date	\$455.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Eleanor Haimsohn <hr/> Mailing Address 4700 Treadway Rd <hr/> City, State, Zip Code Hernando, MS 38632-9149 <hr/> Name of Employer (Required) Not Employed	08/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Charlie Kireker <hr/> Mailing Address 303 Cow Hill Rd <hr/> City, State, Zip Code Weybridge, VT 05753-9541 <hr/> Name of Employer (Required) Twin Birches Ltd.	08/30/2023	\$250.00
Occupation (Required) Venture Capital	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) _____		
Full Name Anonymous Anonymous <hr/> Mailing Address 611 Pennsylvania Ave SE <hr/> City, State, Zip Code Washington, DC 20003-4303 <hr/> Name of Employer (Required) N/A	08/30/2023	\$200.00
Occupation (Required) N/A	Aggregate year-to-date	\$2,947.00

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 Martha Kirkley	08/11/2023	\$100.00
Mailing Address 1716 Bramblewood Dr		
City, State, Zip Code Columbus, MS 39705-1507		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$675.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Fort Bridgeforth	08/21/2023	\$500.00
Mailing Address 2054 London Ave		
City, State, Zip Code Jackson, MS 39211-6019		
Name of Employer (Required) Pan-American Life Insurance Group		
Occupation (Required) Transportation Practice Leader	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) _____		
Full Name Cindy Brown	09/11/2023	\$50.00
Mailing Address 219 Carol Ln		
City, State, Zip Code Oxford, MS 38655-3403		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$800.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jackie Courson	08/12/2023	\$25.00
Mailing Address 63 Hidden Crk		
City, State, Zip Code Pontotoc, MS 38863-7514		
Name of Employer (Required) Self Employed		
Occupation (Required) Artist	Aggregate year-to-date	\$275.00

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 Gloria Williamson	09/12/2023	\$100.00
Mailing Address 521 Holland Ave		
City, State, Zip Code Philadelphia, MS 39350-2437		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$7,010.00
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 Himel	09/23/2023	\$15.00
Mailing Address 5155 Madison St		
City, State, Zip Code Skokie, IL 60077-5233		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
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 Jim Schott	09/13/2023	\$2,500.00
Mailing Address 9 E Hill Dr		
City, State, Zip Code Jackson, MS 39216-3622		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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 Jolee Hussey	09/04/2023	\$150.00
Mailing Address 209 Woodland Hills Dr		
City, State, Zip Code Oxford, MS 38655-9771		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$300.00

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 Michael E. Stept Mailing Address 1675 Lakeland Dr City, State, Zip Code Jackson, MS 39216-4843 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/15/2023	\$500.00
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 Curtis C. Wilkie Mailing Address 1016 S 11th St City, State, Zip Code Oxford, MS 38655-4608 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/25/2023	\$500.00
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 Elise Gillespie Mailing Address 1013 S Lamar Blvd City, State, Zip Code Oxford, MS 38655-4739 Name of Employer (Required) University of Mississippi Occupation (Required) Administrative Assistant	08/05/2023	\$100.00
Aggregate year-to-date		\$575.00
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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/05/2023	\$25.00
Aggregate year-to-date		\$880.00

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 Roger Klingler Mailing Address 7844 E Sandalwood Dr City, State, Zip Code Scottsdale, AZ 85250-7269 Name of Employer (Required) Not Employed	08/15/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$915.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Suzanne H. Robinson Mailing Address 206 Wood St City, State, Zip Code Water Valley, MS 38965-2603 Name of Employer (Required) Not Employed	09/05/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Roger Klingler Mailing Address 7844 E Sandalwood Dr City, State, Zip Code Scottsdale, AZ 85250-7269 Name of Employer (Required) Not Employed	09/15/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$915.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mary Lindsay Mailing Address 1256 Belvoir Pl City, State, Zip Code Jackson, MS 39202-1205 Name of Employer (Required) City of Jackson	09/26/2023	\$50.00
Occupation (Required) Ward Member	Aggregate year-to-date	\$275.00

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 William L. Latham <hr/> Mailing Address 513 Roses Bluff Dr <hr/> City, State, Zip Code Madison, MS 39110-7545 <hr/> Name of Employer (Required) Not Employed	08/26/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$335.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Marian Kurz <hr/> Mailing Address 1300 Central St <hr/> City, State, Zip Code Evanston, IL 60201-1676 <hr/> Name of Employer (Required) Self Employed	09/16/2023	\$10.00
Occupation (Required) Public Relations	Aggregate year-to-date	\$290.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Gloria Williamson <hr/> Mailing Address 521 Holland Ave <hr/> City, State, Zip Code Philadelphia, MS 39350-2437 <hr/> Name of Employer (Required) Not Employed	08/17/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$7,010.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ronald Janis <hr/> Mailing Address 225 W 83rd St <hr/> City, State, Zip Code New York, NY 10024-4952 <hr/> Name of Employer (Required) Not Employed	08/17/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,250.00

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 Ballard Mailing Address 142 Road 598 City, State, Zip Code Plantersville, MS 38862-4901 Name of Employer (Required) Not Employed	09/07/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$478.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Kathaleen Miller Mailing Address 13509 Circle G Ranch Rd City, State, Zip Code Picayune, MS 39466-9586 Name of Employer (Required) Not Employed	09/17/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joyce Leech Mailing Address 214 Main St S City, State, Zip Code Amory, MS 38821-4218 Name of Employer (Required) Not Employed	09/28/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$650.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Mary Entrekin Mailing Address 129 Whispering Oaks Xing City, State, Zip Code Pearl, MS 39208-4152 Name of Employer (Required) United Methodist Church	09/19/2023	\$5.00
Occupation (Required) Compliance Analyst	Aggregate year-to-date	\$380.60

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 Barney Frank Mailing Address PO Box 1555 City, State, Zip Code Ogunquit, ME 03907-1555 Name of Employer (Required) Signature Bank NY Occupation (Required) Director	09/29/2023	\$500.00
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 Mike Boyd Mailing Address 1139 W Gamwyn Park Dr City, State, Zip Code Greenville, MS 38701-6392 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/29/2023	\$50.00
Aggregate year-to-date		\$204.25
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 Carl Black Mailing Address 1704 Poplar Blvd City, State, Zip Code Jackson, MS 39202-2119 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/20/2023	\$100.00
Aggregate year-to-date		\$233.00
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 Leigh A. Miller Mailing Address 107 Robinhood Rd City, State, Zip Code Vicksburg, MS 39180-8935 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$100.00
Aggregate year-to-date		\$250.00

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 Laura Hamilton	08/30/2023	\$10.00
Mailing Address 707 Randolph Ave SE		
City, State, Zip Code Huntsville, AL 35801-3606		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$748.47
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 H. Williams	08/30/2023	\$50.00
Mailing Address 100 Martins Ky		
City, State, Zip Code Ridgeland, MS 39157-3419		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$535.00
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 Nancy Groninger	07/31/2023	\$50.00
Mailing Address 5361 Saratoga St		
City, State, Zip Code Yorba Linda, CA 92886-4825		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Bonnie Allen	08/01/2023	\$10.00
Mailing Address 7688 Highway 19 N		
City, State, Zip Code Collinsville, MS 39325-9390		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00

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 Beth L. Orlansky Mailing Address 12 Oakleigh Pl City, State, Zip Code Jackson, MS 39211-2204 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/21/2023	\$900.00
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 Kristin Hull Mailing Address 2666 Shasta Rd City, State, Zip Code Berkeley, CA 94708-1922 Name of Employer (Required) MatCap Occupation (Required) Foundation Officer	08/22/2023	\$1,000.00
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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/23/2023	\$10.00
Aggregate year-to-date		\$880.00
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 Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/13/2023	\$25.00
Aggregate year-to-date		\$796.00

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 Alison O. Kelly Mailing Address 188 Reunion Blvd City, State, Zip Code Madison, MS 39110-8096 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/04/2023	\$500.00
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 Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/14/2023	\$100.00
Aggregate year-to-date		\$2,045.00
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 Alton Farris Mailing Address 313 Colony Ridge Ct City, State, Zip Code Ridgeland, MS 39157-2032 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/15/2023	\$2,000.00
Aggregate year-to-date		\$3,542.10
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 Rathi Iyer Mailing Address 130 Whippoorwill Rd City, State, Zip Code Brandon, MS 39047-6429 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/05/2023	\$25.00
Aggregate year-to-date		\$325.00

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 Lisa McCollom <hr/> Mailing Address 201 Hoffman Ln <hr/> City, State, Zip Code Waveland, MS 39576-4312 <hr/> Name of Employer (Required) American Airlines	08/25/2023	\$25.00
Occupation (Required) Flight Attendant	Aggregate year-to-date	\$886.75
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 Joel Brunt <hr/> Mailing Address 5130 Arthur St <hr/> City, State, Zip Code Moss Point, MS 39563-2706 <hr/> Name of Employer (Required) Ochsner	09/26/2023	\$5,000.00
Occupation (Required) Medical Doctor	Aggregate year-to-date	\$9,750.00
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 Clarence E. Smith <hr/> Mailing Address 423 W Franklin St <hr/> City, State, Zip Code Tupelo, MS 38804-3821 <hr/> Name of Employer (Required) Not Employed	08/07/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
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 Cynthia Yap <hr/> Mailing Address 1955 Popps Ferry Rd <hr/> City, State, Zip Code Biloxi, MS 39532-2024 <hr/> Name of Employer (Required) Not Employed	08/07/2023	\$3.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$796.00

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 Shirley Guy Mailing Address 1185 W Topisaw N City, State, Zip Code Ruth, MS 39662-9511 Name of Employer (Required) Not Employed	08/27/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$205.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Richard C. Howorth Mailing Address 310 N 16th St City, State, Zip Code Oxford, MS 38655-3712 Name of Employer (Required) Square Books	08/18/2023	\$250.00
Occupation (Required) Business Owner	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) _____		
Full Name Louis Rowles Mailing Address 145 A Road 1010 City, State, Zip Code Tupelo, MS 38804-9675 Name of Employer (Required) Not Employed	09/08/2023	\$300.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Marjorie Cervantes Mailing Address 2109 Sunset Dr City, State, Zip Code Hattiesburg, MS 39402-2843 Name of Employer (Required) Not Employed	08/29/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00

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 Elizabeth Jenkins-Joffe <hr/> Mailing Address 3825 Legation St NW <hr/> City, State, Zip Code Washington, DC 20015-2701 <hr/> Name of Employer (Required) Not Employed	09/30/2023	\$50.00
Occupation (Required) Retired	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) _____		
Full Name Eugene Perrier <hr/> Mailing Address 5540 Gibson Rd <hr/> City, State, Zip Code Vicksburg, MS 39180-6318 <hr/> Name of Employer (Required) Self Employed	09/30/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elvin Sunds <hr/> Mailing Address 4000 W Tidewater Ln <hr/> City, State, Zip Code Madison, MS 39110-8942 <hr/> Name of Employer (Required) St. Francis of Assisi Church	07/30/2023	\$25.00
Occupation (Required) Clergy	Aggregate year-to-date	\$780.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jonathan Harris <hr/> Mailing Address 9 Marie Ave <hr/> City, State, Zip Code Cambridge, MA 02139-1002 <hr/> Name of Employer (Required) Tufts University	08/30/2023	\$25.00
Occupation (Required) Researcher	Aggregate year-to-date	\$247.50

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 Geoffrey Cowan <hr/> Mailing Address 2240 Mandeville Canyon Rd <hr/> City, State, Zip Code Los Angeles, CA 90049-1827 <hr/> Name of Employer (Required) University of Southern California	08/21/2023	\$250.00
Occupation (Required) Professor	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) _____		
Full Name Barney McCann <hr/> Mailing Address 1081 Raymond Bolton Rd <hr/> City, State, Zip Code Raymond, MS 39154-9394 <hr/> Name of Employer (Required) Not Employed	08/21/2023	\$33.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$243.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Cliff Heaton <hr/> Mailing Address PO Box 158 <hr/> City, State, Zip Code Lyon, MS 38645-0158 <hr/> Name of Employer (Required) Self Employed	08/31/2023	\$2,000.00
Occupation (Required) Farmer	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) _____		
Full Name Glen Davidson Jr <hr/> Mailing Address 1123 Quail Creek Cv <hr/> City, State, Zip Code Tupelo, MS 38801-7257 <hr/> Name of Employer (Required) Not Employed	08/31/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$258.00

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 Susan Dowdy Mailing Address 301 Cherokee Dr City, State, Zip Code Mccomb, MS 39648-6013 Name of Employer (Required) Southwest Broadcast	09/11/2023	\$1,200.00
Occupation (Required) Sales	Aggregate year-to-date	\$2,700.00
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 Jeff Triplette Mailing Address 423 Turnberry Ct City, State, Zip Code Oxford, MS 38655-2578 Name of Employer (Required) Triplette Advisors LLC	08/22/2023	\$500.00
Occupation (Required) Founder	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 Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed	09/23/2023	\$25.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$335.00
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 Thomas Adams Mailing Address 4527 Union Ave City, State, Zip Code Nettleton, MS 38858-6037 Name of Employer (Required) MS Public Service Commission	09/03/2023	\$25.00
Occupation (Required) Chief Investigator	Aggregate year-to-date	\$223.00

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 Eric Beamon Mailing Address 15055 Swan Lake Blvd City, State, Zip Code Gulfport, MS 39503-8613 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/24/2023	\$25.00
Aggregate year-to-date		\$260.00
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 Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/14/2023	\$100.00
Aggregate year-to-date		\$2,045.00
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 Kilgore Mailing Address 730 Forest Park Cir City, State, Zip Code Philadelphia, MS 39350-3314 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/24/2023	\$100.00
Aggregate year-to-date		\$300.00
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 Griffith Mailing Address PO Box 2248 City, State, Zip Code Oxford, MS 38655-7248 Name of Employer (Required) Griffith Law Firm Occupation (Required) Attorney	09/14/2023	\$100.00
Aggregate year-to-date		\$1,025.00

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 Rebecca Long Mailing Address 1496 W Lakeshore Dr City, State, Zip Code Starkville, MS 39759-6343 Name of Employer (Required) Mississippi State University	08/05/2023	\$10.00
Occupation (Required) Professor	Aggregate year-to-date	\$360.00
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 Glen Davidson Jr Mailing Address 1123 Quail Creek Cv City, State, Zip Code Tupelo, MS 38801-7257 Name of Employer (Required) Not Employed	09/26/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$258.00
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 Jim Rasberry Mailing Address 401 Central Ave City, State, Zip Code Laurel, MS 39440-3983 Name of Employer (Required) Rasberry Financial	09/27/2023	\$250.00
Occupation (Required) Financial Advisor	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 Roy Decker Mailing Address 4044 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3413 Name of Employer (Required) DuvallDecker	09/27/2023	\$100.00
Occupation (Required) Architects	Aggregate year-to-date	\$1,700.00

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 Jerry Smith	09/27/2023	\$50.00
Mailing Address 136 St Regis Dr		
City, State, Zip Code Madison, MS 39110-7798		
Name of Employer (Required) Mississippi Baptist Medical Center		
Occupation (Required) Pharmacist	Aggregate year-to-date	\$646.00
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 Emily Liner	08/07/2023	\$100.00
Mailing Address 408 6th St S		
City, State, Zip Code Columbus, MS 39701-6736		
Name of Employer (Required) Friendly City Books		
Occupation (Required) Business Owner	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 Ted B. Atkinson	08/17/2023	\$20.00
Mailing Address 1000 E Broad St		
City, State, Zip Code West Point, MS 39773-3236		
Name of Employer (Required) Mississippi State University		
Occupation (Required) Professor	Aggregate year-to-date	\$410.00
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 Marc Doyle	09/07/2023	\$25.00
Mailing Address 704 State St		
City, State, Zip Code Natchez, MS 39120-3543		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$450.00

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 Elizabeth Cagle Mailing Address 411 N Montgomery St City, State, Zip Code Starkville, MS 39759-2605 Name of Employer (Required) MS State University	08/18/2023	\$50.00
Occupation (Required) Instructor	Aggregate year-to-date	\$332.25
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 Will Smith Mailing Address 6621 Sugarcane Cir City, State, Zip Code Ocean Springs, MS 39564-8955 Name of Employer (Required) US Air Force	08/28/2023	\$3,300.00
Occupation (Required) Cardiothoracic Surgeon	Aggregate year-to-date	\$4,040.00
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 Virден Jones Mailing Address 686 Hazelton Dr City, State, Zip Code Madison, MS 39110-7332 Name of Employer (Required) Not Employed	09/20/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,198.90
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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed	09/30/2023	\$16.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$602.00

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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	09/30/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Gloria Butler Thomas Mailing Address 504 Fairways Dr City, State, Zip Code Vicksburg, MS 39183-8375 Name of Employer (Required) Not Employed	09/30/2023	\$250.00
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) _____		
Full Name Buford Anderson Mailing Address 494 Cassidy St City, State, Zip Code Sumner, MS 38957-9703 Name of Employer (Required) Self Employed	07/31/2023	\$250.00
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) _____		
Full Name Peter Buttross Jr Mailing Address 206 S Rankin St City, State, Zip Code Natchez, MS 39120-3536 Name of Employer (Required) Not Employed	08/31/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$700.00

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 Roy H. Ryan Mailing Address 2800 W Main St City, State, Zip Code Tupelo, MS 38801-3027 Name of Employer (Required) Not Employed	09/01/2023	\$100.00
Occupation (Required) Not Employed	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 Kathy Olsen Mailing Address 4416 Sunnybrook Dr City, State, Zip Code Nashville, TN 37205-3860 Name of Employer (Required) Not Employed	08/22/2023	\$5,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$105,000.00
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 Robert Baler Mailing Address 3000 Pineland Dr City, State, Zip Code Gulfport, MS 39501-6239 Name of Employer (Required) Not Employed	09/02/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$270.00
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 Foy Mailing Address 1881 N Parc Cir City, State, Zip Code Tupelo, MS 38804-9774 Name of Employer (Required) Not Employed	09/23/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$325.00

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 Vaughn McRae Mailing Address 1515 N State St City, State, Zip Code Jackson, MS 39202-1646 Name of Employer (Required) NSS Partnership Occupation (Required) Manager	08/23/2023	\$2,500.00
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 Johnny D. Jones Mailing Address 611 S Pear Orchard Rd City, State, Zip Code Ridgeland, MS 39157-4836 Name of Employer (Required) The DELTA Project Occupation (Required) CEO	08/24/2023	\$133.00
Aggregate year-to-date		\$1,761.50
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 Matt Holleman III Mailing Address 310 Lake Castle Rd City, State, Zip Code Madison, MS 39110-8603 Name of Employer (Required) Galaxie Corp Occupation (Required) President	08/24/2023	\$33.00
Aggregate year-to-date		\$208.00
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 Leslie M. Westbrook Mailing Address 800 College Hill Rd City, State, Zip Code Oxford, MS 38655-2767 Name of Employer (Required) Self Employed Occupation (Required) Marketing	09/15/2023	\$5,000.00
Aggregate year-to-date		\$58,500.00

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 Susan Zachos Mailing Address 1202 Front St City, State, Zip Code Oxford, MS 38655-4904 Name of Employer (Required) Law Offices of Susan G. Zachos Occupation (Required) Attorney	08/27/2023	\$250.00
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 Creel Mailing Address 408 Melissa Dr City, State, Zip Code Biloxi, MS 39531-2308 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/18/2023	\$200.00
Aggregate year-to-date		\$400.00
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 Clark Mailing Address 110 Olympia Flds City, State, Zip Code Jackson, MS 39211-2509 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/28/2023	\$2,000.00
Aggregate year-to-date		\$19,003.00
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 Mary Entrekin Mailing Address 129 Whispering Oaks Xing City, State, Zip Code Pearl, MS 39208-4152 Name of Employer (Required) United Methodist Church Occupation (Required) Compliance Analyst	09/28/2023	\$25.00
Aggregate year-to-date		\$380.60

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 Karen K. Sawyer <hr/> Mailing Address 150 Spence Dr <hr/> City, State, Zip Code Pass Christian, MS 39571-4839 <hr/> Name of Employer (Required) Not Employed	08/18/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,000.00
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 Lise Pearlman <hr/> Mailing Address 1147 Clarendon Cres <hr/> City, State, Zip Code Oakland, CA 94610-1807 <hr/> Name of Employer (Required) Self Employed	08/09/2023	\$50.00
Occupation (Required) Author	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 Robert Conwill <hr/> Mailing Address 1005 County Road 357 <hr/> City, State, Zip Code New Albany, MS 38652-8981 <hr/> Name of Employer (Required) Not Employed	09/09/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
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 Munford <hr/> Mailing Address 5510 Wisconsin Ave <hr/> City, State, Zip Code Chevy Chase, MD 20815-4403 <hr/> Name of Employer (Required) Not Employed	09/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$525.00

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 Onellis Stanford	08/10/2023	\$25.00
Mailing Address 26287 Niolet Rd		
City, State, Zip Code Pass Christian, MS 39571-9422		
Name of Employer (Required) Memorial Health		
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$205.00
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 Union Cemetery of Columbus LLC	08/31/2023	\$1,000.00
Mailing Address PO Box 866		
City, State, Zip Code Columbus, MS 39703-0866		
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 Kathy Howard	09/22/2023	\$25.00
Mailing Address 1213 Huntcliff Way		
City, State, Zip Code Clinton, MS 39056-3425		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
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 Suzanne H. Robinson	08/22/2023	\$30.00
Mailing Address 206 Wood St		
City, State, Zip Code Water Valley, MS 38965-2603		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,425.00

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 Vicki Slater	08/03/2023	\$2,500.00
Mailing Address 115 Leppingwell Dr		
City, State, Zip Code Madison, MS 39110-6526		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	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 Tomie Green	08/03/2023	\$10.00
Mailing Address 114 Pine Island Dr		
City, State, Zip Code Jackson, MS 39206-3234		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$665.00
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 Deloise Jones	08/23/2023	\$500.00
Mailing Address 343 Overlook Cir		
City, State, Zip Code Jackson, MS 39213-2306		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Patrick Phillips	08/23/2023	\$100.00
Mailing Address 653 Ferncliff Dr		
City, State, Zip Code Jackson, MS 39211-2606		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00

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 Trudy Hart Mailing Address 190 Lenny Rd City, State, Zip Code Potsdam, NY 13676-4429 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/24/2023	\$25.00
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 Keith Johnson Mailing Address PO Box 421 City, State, Zip Code Nesbit, MS 38651-0421 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/04/2023	\$50.00
Aggregate year-to-date		\$1,150.00
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 Lele W. Gillespie Mailing Address 1013 S Lamar Blvd City, State, Zip Code Oxford, MS 38655-4739 Name of Employer (Required) University of Mississippi Occupation (Required) Project Coordinator	08/14/2023	\$250.00
Aggregate year-to-date		\$2,100.00
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 Vangela Wade Mailing Address 401 Pembroke Dr City, State, Zip Code Madison, MS 39110-8638 Name of Employer (Required) Mississippi Center for Justice Occupation (Required) Attorney	09/16/2023	\$500.00
Aggregate year-to-date		\$4,000.00

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 Paul Egerman Mailing Address 77 Westcliff Rd City, State, Zip Code Weston, MA 02493-1409 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/26/2023	\$5,000.00
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 Richard H. Molpus Jr Mailing Address 858 North St City, State, Zip Code Jackson, MS 39202-3019 Name of Employer (Required) Molpus Woodlands Group Occupation (Required) Chairman	09/06/2023	\$1,000.00
Aggregate year-to-date		\$51,000.00
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 Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/27/2023	\$50.00
Aggregate year-to-date		\$325.00
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 Mary Entrekin Mailing Address 129 Whispering Oaks Xing City, State, Zip Code Pearl, MS 39208-4152 Name of Employer (Required) United Methodist Church Occupation (Required) Compliance Analyst	09/27/2023	\$5.00
Aggregate year-to-date		\$380.60

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 Lori Pierce	09/28/2023	\$25.00
Mailing Address 1514 Forrest Hill Dr		
City, State, Zip Code Columbus, MS 39701-3500		
Name of Employer (Required) MS School for Mathematics and Science		
Occupation (Required) Teacher	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 Elizabeth Payne	09/08/2023	\$1,000.00
Mailing Address 633 Park Dr		
City, State, Zip Code Oxford, MS 38655-2824		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$4,025.00
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 Edson Griswold	09/08/2023	\$25.00
Mailing Address 1699 S Trenton St		
City, State, Zip Code Denver, CO 80231-5694		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$833.50
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 Witherspoon	09/29/2023	\$100.00
Mailing Address 910 Lincoln Ave		
City, State, Zip Code Oxford, MS 38655-4328		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,350.00

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 Jimmie Rogers <hr/> Mailing Address PO Box 688 <hr/> City, State, Zip Code New Albany, MS 38652-0688 <hr/> Name of Employer (Required) Not Employed	09/19/2023	\$300.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Eric Beamon <hr/> Mailing Address 15055 Swan Lake Blvd <hr/> City, State, Zip Code Gulfport, MS 39503-8613 <hr/> Name of Employer (Required) Not Employed	08/09/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William Himel <hr/> Mailing Address 5155 Madison St <hr/> City, State, Zip Code Skokie, IL 60077-5233 <hr/> Name of Employer (Required) Not Employed	09/30/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Nancy Groninger <hr/> Mailing Address 5361 Saratoga St <hr/> City, State, Zip Code Yorba Linda, CA 92886-4825 <hr/> Name of Employer (Required) Not Employed	08/10/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$255.00

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 Nsombi Lambright	08/30/2023	\$50.00
Mailing Address 927 Woodville Dr		
City, State, Zip Code Jackson, MS 39212-3953		
Name of Employer (Required) One Voice		
Occupation (Required) Non-Profit Manager	Aggregate year-to-date	\$300.00
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 Sheppard	08/31/2023	\$100.00
Mailing Address PO Box 327		
City, State, Zip Code Cuero, TX 77954-0327		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,950.00
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 Hank Dunn	08/31/2023	\$250.00
Mailing Address PO Box 1002		
City, State, Zip Code Oxford, MS 38655-1002		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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 Jean Fenwick	09/22/2023	\$50.00
Mailing Address 208 S Madison St		
City, State, Zip Code Kosciusko, MS 39090-3946		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,000.00

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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/02/2023	\$25.00
Aggregate year-to-date		\$833.50
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 Clarence E. Smith Mailing Address 423 W Franklin St City, State, Zip Code Tupelo, MS 38804-3821 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/23/2023	\$10.00
Aggregate year-to-date		\$375.00
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 Janet Scott Mailing Address 603 Troon Rd City, State, Zip Code Oxford, MS 38655-3596 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/03/2023	\$500.00
Aggregate year-to-date		\$8,500.00
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 David Butts Mailing Address 1914 Patton Ln City, State, Zip Code Austin, TX 78723-1236 Name of Employer (Required) Self Employed Occupation (Required) Political Consultant	08/03/2023	\$250.00
Aggregate year-to-date		\$250.00

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 Barry J. Walker Mailing Address PO Box 1023 City, State, Zip Code Tupelo, MS 38802-1023 Name of Employer (Required) Self Employed	08/23/2023	\$100.00
Occupation (Required) Attorney	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) _____		
Full Name Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	09/14/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Rheta Johnson Mailing Address 117 County Road 259 City, State, Zip Code Iuka, MS 38852-8542 Name of Employer (Required) Not Employed	09/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,446.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Anne Hill Mailing Address 200 Craft St City, State, Zip Code Holly Springs, MS 38635-2912 Name of Employer (Required) Not Employed	08/25/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

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 Charles Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed	08/25/2023	\$30.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,061.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William Fluker Mailing Address 404 Huntington Dr City, State, Zip Code Jackson, MS 39272-4486 Name of Employer (Required) Not Employed	08/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas	09/16/2023	\$25.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,197.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name David R. Mann Mailing Address 316 Sonoma Cv City, State, Zip Code Madison, MS 39110-9549 Name of Employer (Required) Not Employed	08/07/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$800.00

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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed	09/28/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
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 Lena Grillo Mailing Address 5711 Clubview Dr City, State, Zip Code Jackson, MS 39211-4202 Name of Employer (Required) Not Employed	08/18/2023	\$60.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$230.00
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 Carol Puckett Palmer Mailing Address 3 Cypress Ln City, State, Zip Code Jackson, MS 39211-5935 Name of Employer (Required) Not Employed	08/08/2023	\$500.00
Occupation (Required) Not Employed	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 Andrea Hatfield Mailing Address 3509 34th St NW City, State, Zip Code Washington, DC 20008-3204 Name of Employer (Required) Self Employed	09/29/2023	\$500.00
Occupation (Required) Real Estate Agent	Aggregate year-to-date	\$1,250.00

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 Luke M. Dove <hr/> Mailing Address 1941 E Bourne Pl <hr/> City, State, Zip Code Jackson, MS 39211-6714 <hr/> Name of Employer (Required) Not Employed	09/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Thomas Adams <hr/> Mailing Address 4527 Union Ave <hr/> City, State, Zip Code Nettleton, MS 38858-6037 <hr/> Name of Employer (Required) MS Public Service Commission	08/29/2023	\$10.00
Occupation (Required) Chief Investigator	Aggregate year-to-date	\$223.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joshua Phillips <hr/> Mailing Address 184 Sundown Cv <hr/> City, State, Zip Code Madison, MS 39110-8168 <hr/> Name of Employer (Required) Mississippi Asthma and Allergy	09/30/2023	\$100.00
Occupation (Required) Physician	Aggregate year-to-date	\$803.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert Alexander <hr/> Mailing Address 18 Highland Meadows Dr <hr/> City, State, Zip Code Jackson, MS 39211-5949 <hr/> Name of Employer (Required) Alexander CPA, LLC	08/30/2023	\$100.00
Occupation (Required) Accountant	Aggregate year-to-date	\$900.00

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 Carolyn Goren <hr/> Mailing Address PO Box 7189 <hr/> City, State, Zip Code Missoula, MT 59807-7189 <hr/> Name of Employer (Required) Not Employed	08/01/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$315.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Leslie-Burl McLemore <hr/> Mailing Address 7900 Michael Dr <hr/> City, State, Zip Code Lake Cormorant, MS 38641-8211 <hr/> Name of Employer (Required) Not Employed	08/11/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name James Hutto <hr/> Mailing Address 62 Redfern Trl <hr/> City, State, Zip Code Petal, MS 39465-9415 <hr/> Name of Employer (Required) Self Employed	08/31/2023	\$10.00
Occupation (Required) Education Consultant	Aggregate year-to-date	\$662.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John D. Giddens <hr/> Mailing Address 226 N President St <hr/> City, State, Zip Code Jackson, MS 39201-1903 <hr/> Name of Employer (Required) Self Employed	09/01/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$1,000.00

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 Kate Lehrer	09/11/2023	\$200.00
Mailing Address 3556 Macomb St NW		
City, State, Zip Code Washington, DC 20016-3162		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$300.00
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 Barbara Hogan	08/12/2023	\$50.00
Mailing Address 715 Highleadon Pl		
City, State, Zip Code Madison, MS 39110-7058		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
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 Stallings	09/02/2023	\$25.00
Mailing Address PO Box 1141		
City, State, Zip Code Oxford, MS 38655-1141		
Name of Employer (Required) State of Mississippi		
Occupation (Required) Attorney	Aggregate year-to-date	\$275.00
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 Ronald Janis	08/03/2023	\$250.00
Mailing Address 225 W 83rd St		
City, State, Zip Code New York, NY 10024-4952		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$3,250.00

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 Veronica Starling <hr/> Mailing Address 2210 Talbert Dr <hr/> City, State, Zip Code Yazoo City, MS 39194-2545 <hr/> Name of Employer (Required) Self Employed	08/13/2023	\$5,000.00
Occupation (Required) Registered Nurse	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 Lynch <hr/> Mailing Address 617 Camelia Trl <hr/> City, State, Zip Code Brandon, MS 39047-6316 <hr/> Name of Employer (Required) Not Employed	09/24/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,075.00
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 Douglas Masterson <hr/> Mailing Address 43 Palm Tree Loop <hr/> City, State, Zip Code Petal, MS 39465-9251 <hr/> Name of Employer (Required) University of Southern Mississippi	09/05/2023	\$10.00
Occupation (Required) Chemist	Aggregate year-to-date	\$565.00
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 Patrina R. Dace <hr/> Mailing Address 105 Sutter Dr <hr/> City, State, Zip Code Terry, MS 39170-5032 <hr/> Name of Employer (Required) Kaleidoscope of Learning	08/06/2023	\$50.00
Occupation (Required) Director	Aggregate year-to-date	\$650.00

Reporting Period 7/30/2023 through 9/30/2023

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 Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/06/2023	\$15.00
		Aggregate year-to-date \$680.50
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 Louise Cole Mailing Address 518 N Church St City, State, Zip Code Okolona, MS 38860-1017 Name of Employer (Required) Brandon Presley for Governor Occupation (Required) Field Organizer	09/06/2023	\$100.00
		Aggregate year-to-date \$535.00
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 Janice Antonow Mailing Address 3336 Whippoorwill Ln City, State, Zip Code Oxford, MS 38655-5311 Name of Employer (Required) City of Oxford Occupation (Required) Alderman	09/06/2023	\$100.00
		Aggregate year-to-date \$750.00
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 Constance Murray Mailing Address 10 Oak Meadow Ln City, State, Zip Code Carmel Valley, CA 93924-9455 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/27/2023	\$250.00
		Aggregate year-to-date \$550.00

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 Vivian Neill Mailing Address 328 County Road 418 City, State, Zip Code Oxford, MS 38655-6398 Name of Employer (Required) Oxford Treehouse Gallery Occupation (Required) Business Owner	09/07/2023	\$250.00
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 Elizabeth Jenkins-Joffe Mailing Address 3825 Legation St NW City, State, Zip Code Washington, DC 20015-2701 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/18/2023	\$75.00
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 Joe Davis Mailing Address PO Box 29 City, State, Zip Code New Albany, MS 38652-0029 Name of Employer (Required) Rutledge and Davis PLLC Occupation (Required) Attorney	09/19/2023	\$500.00
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 Engineers Political Education Committee Mailing Address 1125 17th St NW City, State, Zip Code Washington, DC 20036-4709 Name of Employer (Required) Occupation (Required)	09/29/2023	\$30,000.00
Aggregate year-to-date		\$30,000.00

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 Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	08/09/2023	\$50.00
Aggregate year-to-date		\$1,197.00
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 Craig Mailing Address 434 S Pierce St City, State, Zip Code New Orleans, LA 70119-6802 Name of Employer (Required) Roderick & Solange MacArthur Justice Center Occupation (Required) Attorney	09/09/2023	\$25.00
Aggregate year-to-date		\$225.00
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 Lynn Fuller Mailing Address 2949 Divisadero St City, State, Zip Code San Francisco, CA 94123-3822 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/30/2023	\$250.00
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 Adrian L. Wood III Mailing Address 2905 Pinecrest Cir City, State, Zip Code Corinth, MS 38834-3864 Name of Employer (Required) City Of Corinth Occupation (Required) Alderman	09/30/2023	\$100.00
Aggregate year-to-date		\$600.00

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 Linda Cox Mailing Address 12 Estate Dr City, State, Zip Code Long Beach, MS 39560-3912 Name of Employer (Required) Veterans Health Administration Occupation (Required) Psychologist	09/30/2023	\$25.00
Aggregate year-to-date		\$675.00
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 Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$10.00
Aggregate year-to-date		\$285.00
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 Matthew Bernstein Mailing Address 2130 E Lake Rd NE City, State, Zip Code Atlanta, GA 30307-1836 Name of Employer (Required) Emory University Occupation (Required) Professor	07/30/2023	\$5,000.00
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 Cal Mayo Mailing Address 212 Greenbriar Loop City, State, Zip Code Oxford, MS 38655-2760 Name of Employer (Required) Mayo Mallette Occupation (Required) Attorney	08/10/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00

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 Amanda Pannell Mailing Address 65 Byhalia Creek Farms Rd E City, State, Zip Code Byhalia, MS 38611-7025 Name of Employer (Required) Ford Occupation (Required) Marketing	08/30/2023	\$100.00
Aggregate year-to-date		\$300.00
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 Dennis Truax Mailing Address 913 Southgate Dr City, State, Zip Code Starkville, MS 39759-9434 Name of Employer (Required) Self Employed Occupation (Required) Engineer	08/30/2023	\$50.00
Aggregate year-to-date		\$1,671.00
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 D. Prospere Mailing Address 1336 Saint Mary St City, State, Zip Code Jackson, MS 39202-1848 Name of Employer (Required) Watkins & Eager PLLC Occupation (Required) Attorney	09/22/2023	\$500.00
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 Sheila Hailey Mailing Address PO Box 39 City, State, Zip Code Terry, MS 39170-0039 Name of Employer (Required) Beth Israel Congregation Occupation (Required) Director of Education	08/02/2023	\$100.00
Aggregate year-to-date		\$425.00

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 Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/02/2023	\$100.00
Aggregate year-to-date		\$3,400.00
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 Thorne Butler Mailing Address 3942 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3411 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/23/2023	\$100.00
Aggregate year-to-date		\$670.00
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 Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/13/2023	\$25.00
Aggregate year-to-date		\$748.47
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 Jacqueline Scott Mailing Address 12025 Springridge Rd City, State, Zip Code Terry, MS 39170-8105 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/24/2023	\$100.00
Aggregate year-to-date		\$410.00

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 Kenneth Nash Mailing Address 1201 Mission Park Dr City, State, Zip Code Vicksburg, MS 39180-3747 Name of Employer (Required) Nash Family Dentistry Occupation (Required) Dentist	09/14/2023	\$100.00
Aggregate year-to-date		\$1,100.00
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 Cheryl Peters Mailing Address 75 Derek Dr City, State, Zip Code Columbus, MS 39702-7817 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/25/2023	\$10.00
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 Drake Mailing Address 1220 Sunset Dr City, State, Zip Code Ocean Springs, MS 39564-2943 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/16/2023	\$100.00
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 Joanna Shows Mailing Address 3 S Heron Cv City, State, Zip Code Hattiesburg, MS 39402-8723 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/07/2023	\$100.00
Aggregate year-to-date		\$975.00

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 Patrick Falkner Mailing Address 176 Shady Acres Rd City, State, Zip Code Tupelo, MS 38804-2945 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/18/2023	\$100.00
Aggregate year-to-date		\$1,050.00
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 Alan Saleski Mailing Address 2116 Harrison St City, State, Zip Code Evanston, IL 60201-2223 Name of Employer (Required) Loyola University Chicago Occupation (Required) Professor	08/18/2023	\$25.00
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 Joyce Leech Mailing Address 214 Main St S City, State, Zip Code Amory, MS 38821-4218 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/28/2023	\$25.00
Aggregate year-to-date		\$650.00
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 Sarah Broom Mailing Address 2025 E Bourne Pl City, State, Zip Code Jackson, MS 39211-6716 Name of Employer (Required) Insurance Company Occupation (Required) Physician	08/09/2023	\$250.00
Aggregate year-to-date		\$600.00

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 Herr Mailing Address 8012 Maple Ridge Rd City, State, Zip Code Bethesda, MD 20814-1308 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/29/2023	\$1,000.00
Aggregate year-to-date		\$3,050.00
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 Mack Lowery Mailing Address 5055 Myers Rd City, State, Zip Code Terry, MS 39170-9429 Name of Employer (Required) Aamco Transmission Occupation (Required) Business Owner	08/29/2023	\$50.00
Aggregate year-to-date		\$530.00
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 Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$25.00
Aggregate year-to-date		\$796.00
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 Brad Cole Mailing Address 415 W 8700 S City, State, Zip Code Paradise, UT 84328-7704 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	07/30/2023	\$100.00
Aggregate year-to-date		\$250.00

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 Baler	07/31/2023	\$25.00
Mailing Address 3000 Pineland Dr		
City, State, Zip Code Gulfport, MS 39501-6239		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$270.00
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 Leesa Golden	08/31/2023	\$50.00
Mailing Address 435 Humphries Cove Rd		
City, State, Zip Code West Point, MS 39773-8212		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
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 Rollins	09/22/2023	\$50.00
Mailing Address 28 Homochitto St		
City, State, Zip Code Natchez, MS 39120-3996		
Name of Employer (Required) Rollins Resources		
Occupation (Required) Consultant	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 R. Bradley	09/12/2023	\$10.00
Mailing Address 107 Philip Rd		
City, State, Zip Code Oxford, MS 38655-2013		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$10,260.00

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 Mary Vi Risser Mailing Address 377 County Road 653B City, State, Zip Code Saltillo, MS 38866-5716 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/23/2023	\$250.00
Aggregate year-to-date		\$2,400.00
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 Inez Kelleher Mailing Address 914 N Country Club Ln City, State, Zip Code Biloxi, MS 39532-3204 Name of Employer (Required) Memorial Hospital Gulfport Occupation (Required) Physician	09/14/2023	\$500.00
Aggregate year-to-date		\$1,750.00
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 Cornelis Gispen Mailing Address 1112 S 11th St City, State, Zip Code Oxford, MS 38655-4610 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/04/2023	\$200.00
Aggregate year-to-date		\$2,175.00
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 Kaye Mailing Address 123 Nottingham Ter City, State, Zip Code Buffalo, NY 14216-3504 Name of Employer (Required) University at Buffalo Occupation (Required) Faculty	08/24/2023	\$50.00
Aggregate year-to-date		\$525.00

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 Cynthia Yap Mailing Address 1955 Poppo Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/14/2023	\$50.00
Aggregate year-to-date		\$796.00
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 Kathryn York Mailing Address 315 Panola St City, State, Zip Code Water Valley, MS 38965-2408 Name of Employer (Required) Teach for America Occupation (Required) Non Profit Administrator	09/25/2023	\$250.00
Aggregate year-to-date		\$1,600.00
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 Lydia Quarles Mailing Address 1016 Louisville St City, State, Zip Code Starkville, MS 39759-3953 Name of Employer (Required) Mozingo Quarles PLLC Occupation (Required) Attorney	09/25/2023	\$100.00
Aggregate year-to-date		\$1,871.00
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 Rathi Iyer Mailing Address 130 Whippoorwill Rd City, State, Zip Code Brandon, MS 39047-6429 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/16/2023	\$25.00
Aggregate year-to-date		\$325.00

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 Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed	08/07/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$722.00
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 Janice Antonow Mailing Address 3336 Whippoorwill Ln City, State, Zip Code Oxford, MS 38655-5311 Name of Employer (Required) City of Oxford	08/27/2023	\$25.00
Occupation (Required) Alderman	Aggregate year-to-date	\$750.00
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 J. Dunn Mailing Address 128 Vivian St City, State, Zip Code Oxford, MS 38655-2718 Name of Employer (Required) Not Employed	09/07/2023	\$250.00
Occupation (Required) Retired	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 Alexe Van Beuren Mailing Address 509 Wagner St City, State, Zip Code Water Valley, MS 38965-2301 Name of Employer (Required) BTC Old-Fashioned Grocery	09/18/2023	\$250.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$500.00

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 Linda Brewer Mailing Address 154 Axley Dr City, State, Zip Code Brandon, MS 39042-7817 Name of Employer (Required) Self Employed Occupation (Required) Nurse Practitioner	08/18/2023	\$250.00
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 Elliott III Mailing Address 205 Autumn Ridge Dr City, State, Zip Code Jackson, MS 39211-5955 Name of Employer (Required) Episcopal Church Occupation (Required) Priest	09/29/2023	\$50.00
Aggregate year-to-date		\$225.00
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 Eric Beamon Mailing Address 15055 Swan Lake Blvd City, State, Zip Code Gulfport, MS 39503-8613 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/29/2023	\$10.00
Aggregate year-to-date		\$260.00
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 Sumati Thomas Mailing Address 4146 Crestview Pl City, State, Zip Code Jackson, MS 39211-6404 Name of Employer (Required) Change Research Occupation (Required) Analyst	09/29/2023	\$25.00
Aggregate year-to-date		\$388.60

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 Rhoden	08/09/2023	\$30.00
Mailing Address 778 Gillespie St		
City, State, Zip Code Jackson, MS 39202-1711		
Name of Employer (Required) Self Employed		
Occupation (Required) Physician	Aggregate year-to-date	\$685.00
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 Graham Slakie	08/29/2023	\$25.00
Mailing Address 4706 Buckingham Dr		
City, State, Zip Code Chattanooga, TN 37421-1108		
Name of Employer (Required) Regal Cinemas		
Occupation (Required) Usher	Aggregate year-to-date	\$1,197.00
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 Wilemon	08/29/2023	\$25.00
Mailing Address 103 Davis Dr		
City, State, Zip Code Aberdeen, MS 39730-2909		
Name of Employer (Required) Euphrates Consulting Group, LLC		
Occupation (Required) Chemical Engineer	Aggregate year-to-date	\$320.00
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 Wilson Golden	09/09/2023	\$100.00
Mailing Address 3136 White Magnolia Chase SW		
City, State, Zip Code Gainesville, GA 30504-5587		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,150.00

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 Sheila Newtown Mailing Address 3893 County Route 10 City, State, Zip Code De Peyster, NY 13633-3405 Name of Employer (Required) Not Employed	09/09/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$240.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed	09/20/2023	\$100.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elizabeth Bailey Mailing Address 140 Chickasaw Dr City, State, Zip Code West Point, MS 39773-3270 Name of Employer (Required) Not Employed	09/30/2023	\$50.00
Occupation (Required) Not Employed	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) _____		
Full Name Anne Bailey Mailing Address 705 N Overlook Dr City, State, Zip Code Alexandria, VA 22305-1223 Name of Employer (Required) Not Employed	08/10/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00

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 Patrina R. Dace <hr/> Mailing Address 105 Sutter Dr <hr/> City, State, Zip Code Terry, MS 39170-5032 <hr/> Name of Employer (Required) Kaleidoscope of Learning	08/31/2023	\$50.00
Occupation (Required) Director	Aggregate year-to-date	\$650.00
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 Warlick <hr/> Mailing Address 100 Princess St <hr/> City, State, Zip Code Alexandria, VA 22314-2325 <hr/> Name of Employer (Required) White House Gift Center	09/12/2023	\$500.00
Occupation (Required) Retail	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 Steve Tadlock <hr/> Mailing Address 2985 Beaumont Cv <hr/> City, State, Zip Code Pearl, MS 39208-5324 <hr/> Name of Employer (Required) Broderick Advertising	09/23/2023	\$25.00
Occupation (Required) Creative Director	Aggregate year-to-date	\$295.00
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 Byrd <hr/> Mailing Address 701 N Fulton St <hr/> City, State, Zip Code Iuka, MS 38852-2411 <hr/> Name of Employer (Required) Not Employed	09/13/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$235.00

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 William Denman Mailing Address 417 Main St City, State, Zip Code Winchester, MA 01890-2925 Name of Employer (Required) Massachusetts General Physicians Organization Occupation (Required) Physician	09/24/2023	\$240.00
Aggregate year-to-date		\$618.30
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 Leigh A. Miller Mailing Address 107 Robinhood Rd City, State, Zip Code Vicksburg, MS 39180-8935 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/24/2023	\$100.00
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 Ron Coleman Mailing Address 316 Quail Creek Dr City, State, Zip Code Oxford, MS 38655-6108 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/25/2023	\$10.00
Aggregate year-to-date		\$880.00
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 Walter Taylor Mailing Address 1054 County Road 36 City, State, Zip Code Thaxton, MS 38871-9507 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/25/2023	\$100.00
Aggregate year-to-date		\$2,450.00

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 Elizabeth West Mailing Address PO Box 40 City, State, Zip Code Pickwick Dam, TN 38365-0040 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/25/2023	\$50.00
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) _____ Full Name Will Baetz Mailing Address 850 N Randolph St City, State, Zip Code Arlington, VA 22203-4018 Name of Employer (Required) US Navy Occupation (Required) Engineer	08/05/2023	\$100.00
Aggregate year-to-date		\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Margaret Thomas Mailing Address 153 Timberton Dr City, State, Zip Code Hattiesburg, MS 39401-8209 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/15/2023	\$10.00
Aggregate year-to-date		\$722.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name John C. Maxwell Mailing Address 1710 Linden Pl City, State, Zip Code Jackson, MS 39202-1217 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/25/2023	\$50.00
Aggregate year-to-date		\$250.00

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 Joanne P. Morris Mailing Address 801 Arlington St City, State, Zip Code Jackson, MS 39202-1655 Name of Employer (Required) Not Employed	09/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Benjamin Bailey Mailing Address 1300 E Lafayette St City, State, Zip Code Detroit, MI 48207-2921 Name of Employer (Required) Doner Detroit	08/17/2023	\$100.00
Occupation (Required) Advertising	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Johnny Wray Mailing Address 731 Milam Rd City, State, Zip Code Cedarbluff, MS 39741-9021 Name of Employer (Required) Self Employed	08/17/2023	\$100.00
Occupation (Required) Farm	Aggregate year-to-date	\$925.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Roger Byrd Mailing Address 701 N Fulton St City, State, Zip Code Iuka, MS 38852-2411 Name of Employer (Required) Not Employed	08/27/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$235.00

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 Laura McKerns <hr/> Mailing Address 813 42nd Ave <hr/> City, State, Zip Code Gulfport, MS 39501-1451 <hr/> Name of Employer (Required) Not Employed	08/18/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lisa Stevens <hr/> Mailing Address 101 Boone Dr <hr/> City, State, Zip Code Booneville, MS 38829-2609 <hr/> Name of Employer (Required) NE MS Community College	09/19/2023	\$25.00
Occupation (Required) College Instructor	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Graham Slakie <hr/> Mailing Address 4706 Buckingham Dr <hr/> City, State, Zip Code Chattanooga, TN 37421-1108 <hr/> Name of Employer (Required) Regal Cinemas	09/29/2023	\$25.00
Occupation (Required) Usher	Aggregate year-to-date	\$1,197.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Elise Gillespie <hr/> Mailing Address 1013 S Lamar Blvd <hr/> City, State, Zip Code Oxford, MS 38655-4739 <hr/> Name of Employer (Required) University of Mississippi	08/29/2023	\$25.00
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$575.00

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 George D. Penick Jr Mailing Address 22 Waterstone Pl City, State, Zip Code Jackson, MS 39211-5987 Name of Employer (Required) Not Employed	09/09/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$750.00
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 Jeanne A. Marszalek Mailing Address 108 Grand Ridge Rd City, State, Zip Code Starkville, MS 39759-4112 Name of Employer (Required) Not Employed	09/30/2023	\$200.00
Occupation (Required) Not Employed	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 Kelly O'Neal Mailing Address 56 J C Bryant Rd City, State, Zip Code Hattiesburg, MS 39401-8447 Name of Employer (Required) Not Employed	08/30/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
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 Martha Kirkley Mailing Address 1716 Bramblewood Dr City, State, Zip Code Columbus, MS 39705-1507 Name of Employer (Required) Not Employed	08/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$675.00

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 Odell Thompson Jr Mailing Address 837 Joliet Ct City, State, Zip Code Biloxi, MS 39532-7023 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$100.00
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 Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	09/10/2023	\$35.00
Aggregate year-to-date		\$1,197.00
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 Nan Tarlton Mailing Address 210 Meadowlane Dr City, State, Zip Code Madison, MS 39110-9611 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/21/2023	\$25.00
Aggregate year-to-date		\$1,400.00
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 B. Clark Mailing Address 167 Rolling Meadows Rd City, State, Zip Code Ridgeland, MS 39157-9488 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/21/2023	\$250.00
Aggregate year-to-date		\$3,850.00

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 Leah A. Hendrix Mailing Address 2622 Lake Cir City, State, Zip Code Jackson, MS 39211-6742 Name of Employer (Required) St Andrew's Middle School Occupation (Required) Teacher	08/21/2023	\$1,000.00
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 Susan Rushet Mailing Address 1656 Highway 43 S City, State, Zip Code Pelahatchie, MS 39145-3440 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/01/2023	\$25.00
Aggregate year-to-date		\$225.00
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 Frances M. Coleman Mailing Address 108 Royal Garden Ter City, State, Zip Code Madison, MS 39110-7637 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/22/2023	\$25.00
Aggregate year-to-date		\$440.00
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 Ricky Johnston Mailing Address 419 3rd St S City, State, Zip Code Columbus, MS 39701-5632 Name of Employer (Required) Gastroenterology Associates of Columbus Occupation (Required) Gastroenterologist	08/13/2023	\$25.00
Aggregate year-to-date		\$750.00

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 Linda Moore Mailing Address 811 Kell Ave City, State, Zip Code Pascagoula, MS 39567-2152 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/13/2023	\$100.00
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 Amanda Alexander Mailing Address 208 Charlestowne Dr City, State, Zip Code Madison, MS 39110-6920 Name of Employer (Required) Alexander Law PA Occupation (Required) Attorney	09/13/2023	\$250.00
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 Gayle Massey Mailing Address 186 Parke Dr City, State, Zip Code Ridgeland, MS 39157-9402 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/24/2023	\$25.00
Aggregate year-to-date		\$425.00
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 Ethel Scurlock Mailing Address 1009 Whispering Valley Cv City, State, Zip Code Oxford, MS 38655-7701 Name of Employer (Required) University of Mississippi Occupation (Required) Dean	09/25/2023	\$250.00
Aggregate year-to-date		\$250.00

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 Paul Carter Mailing Address 2615 Blackfoot Rd City, State, Zip Code Vancleave, MS 39565-8447 Name of Employer (Required) Not Employed	09/05/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$350.00
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 Roxann Jackson Mailing Address 1713 Reserve Dr City, State, Zip Code Clinton, MS 39056-5667 Name of Employer (Required) Submittable	08/06/2023	\$50.00
Occupation (Required) Campaign Support Lead	Aggregate year-to-date	\$650.00
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 Cherri Musser Mailing Address 105 Piute Cir City, State, Zip Code Loudon, TN 37774-2138 Name of Employer (Required) Not Employed	08/26/2023	\$50.00
Occupation (Required) Not Employed	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 Ingrid D. Williams Mailing Address 310 Concord Dr City, State, Zip Code Clinton, MS 39056-5721 Name of Employer (Required) Not Employed	08/17/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$210.00

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 Carroll Mailing Address 675 Beulah Grove Rd City, State, Zip Code Pontotoc, MS 38863-7704 Name of Employer (Required) Ashley Distribution Services	09/17/2023	\$50.00
Occupation (Required) Truck Driver	Aggregate year-to-date	\$920.00
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 White Mailing Address 5361 Wayneland Dr City, State, Zip Code Jackson, MS 39211-4042 Name of Employer (Required) Not Employed	08/18/2023	\$33.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$233.00
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 Neilson Buchanan Mailing Address 155 Bryant St City, State, Zip Code Palo Alto, CA 94301-1104 Name of Employer (Required) Not Employed	08/28/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$425.00
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 Joanna Shows Mailing Address 3 S Heron Cv City, State, Zip Code Hattiesburg, MS 39402-8723 Name of Employer (Required) Not Employed	09/19/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$975.00

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 Martha Martin	09/29/2023	\$200.00
Mailing Address 136 Forrest Field Dr		
City, State, Zip Code Pontotoc, MS 38863-1552		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
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 Steve Renfroe	09/29/2023	\$250.00
Mailing Address 5113 Arthur St		
City, State, Zip Code Moss Point, MS 39563-2705		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,350.00
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 Andrea Walker	09/20/2023	\$10.00
Mailing Address 1041 County Road 202		
City, State, Zip Code Abbeville, MS 38601-9700		
Name of Employer (Required) American Addiction Center		
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$225.00
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 Walter W. Thompson	09/20/2023	\$500.00
Mailing Address 530 N 14th St		
City, State, Zip Code Oxford, MS 38655-3218		
Name of Employer (Required) Allendale Planting Co.		
Occupation (Required) Farmer	Aggregate year-to-date	\$500.00

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 Keith Johnson Mailing Address PO Box 421 City, State, Zip Code Nesbit, MS 38651-0421 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$50.00
Aggregate year-to-date		\$1,150.00
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 Francisco J. Sierra Mailing Address 425 Locust Ln City, State, Zip Code Tupelo, MS 38801-9457 Name of Employer (Required) Monroe Hospital Occupation (Required) Physician	09/30/2023	\$25.00
Aggregate year-to-date		\$2,100.00
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 Marquis Sledge Mailing Address 322 Murray St City, State, Zip Code Oxford, MS 38655-2912 Name of Employer (Required) Merchants and Farmers Bank Occupation (Required) Banker	09/30/2023	\$400.00
Aggregate year-to-date		\$400.00
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 Francisco J. Sierra Mailing Address 425 Locust Ln City, State, Zip Code Tupelo, MS 38801-9457 Name of Employer (Required) Monroe Hospital Occupation (Required) Physician	07/30/2023	\$25.00
Aggregate year-to-date		\$2,100.00

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 Cherri Lightsey	08/30/2023	\$25.00
Mailing Address 3701 Crawford Rd		
City, State, Zip Code Crawford, MS 39743-9629		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$520.00
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 Ellen Leake	08/21/2023	\$2,500.00
Mailing Address 260 Eastbrooke St		
City, State, Zip Code Jackson, MS 39216-4716		
Name of Employer (Required) Splinter Creek Land Co		
Occupation (Required) Business Owner	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 Tom Sharpe	08/31/2023	\$500.00
Mailing Address 1534 Jefferson Ave		
City, State, Zip Code Oxford, MS 38655-3718		
Name of Employer (Required) Not Employed		
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 Suzanne H. Robinson	08/31/2023	\$100.00
Mailing Address 206 Wood St		
City, State, Zip Code Water Valley, MS 38965-2603		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,425.00

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 Barbara Rankin Mailing Address PO Box 219 City, State, Zip Code Braxton, MS 39044-0219 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/22/2023	\$50.00
Aggregate year-to-date		\$900.00
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 Williams Mailing Address 122 Madison Pl City, State, Zip Code Hattiesburg, MS 39402-8339 Name of Employer (Required) Bristow Helicopters Occupation (Required) Pilot	08/22/2023	\$25.00
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 Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed Occupation (Required) Nurse Practitioner	09/12/2023	\$25.00
Aggregate year-to-date		\$335.00
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 Garry Breland Mailing Address 138 Jervis Mims Rd City, State, Zip Code Hattiesburg, MS 39401-8854 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/03/2023	\$25.00
Aggregate year-to-date		\$225.00

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 Andrew Cunningham Mailing Address 13462 MS Highway 388 City, State, Zip Code Brooksville, MS 39739-9167 Name of Employer (Required) Valley Farm Occupation (Required) Farm Worker	08/13/2023	\$100.00
Aggregate year-to-date		\$600.00
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 Wilson Golden Mailing Address 3136 White Magnolia Chase SW City, State, Zip Code Gainesville, GA 30504-5587 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/23/2023	\$15.00
Aggregate year-to-date		\$2,150.00
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 Cherri Musser Mailing Address 105 Piute Cir City, State, Zip Code Loudon, TN 37774-2138 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/13/2023	\$100.00
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 Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy	09/14/2023	\$50.00
Aggregate year-to-date		\$780.00

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 L. Davis III Mailing Address PO Box 1839 City, State, Zip Code Gulfport, MS 39502-1839 Name of Employer (Required) Law Office of Jim Davis Occupation (Required) Attorney	09/15/2023	\$1,000.00
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) _____ Full Name Marie McKellar Mailing Address 425 Davis St City, State, Zip Code Evanston, IL 60201-4830 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/25/2023	\$1,000.00
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) _____ Full Name Deborah Gochfeld Mailing Address 429 Cherokee Dr City, State, Zip Code Oxford, MS 38655-2701 Name of Employer (Required) University of Mississippi Occupation (Required) Research Professor	09/05/2023	\$250.00
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) _____ Full Name Kelly O'Neal Mailing Address 56 J C Bryant Rd City, State, Zip Code Hattiesburg, MS 39401-8447 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/26/2023	\$100.00
Aggregate year-to-date		\$300.00

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 Gerald Blessey <hr/> Mailing Address 2577 Chatham Ct <hr/> City, State, Zip Code Biloxi, MS 39531-2758 <hr/> Name of Employer (Required) Self Employed	09/26/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,083.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Debra Warner <hr/> Mailing Address 502 E Lakeshore Dr <hr/> City, State, Zip Code Carriere, MS 39426-7905 <hr/> Name of Employer (Required) Not Employed	08/06/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Debra Wray <hr/> Mailing Address 731 Milam Rd <hr/> City, State, Zip Code Cedarbluff, MS 39741-9021 <hr/> Name of Employer (Required) High Hope Farm	08/07/2023	\$1,000.00
Occupation (Required) Business Owner	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) _____		
Full Name Donna Carpenter <hr/> Mailing Address 51 W Shaw Hill Rd <hr/> City, State, Zip Code Stowe, VT 05672-4613 <hr/> Name of Employer (Required) Burton	08/07/2023	\$2,500.00
Occupation (Required) Business Owner	Aggregate year-to-date	\$2,500.00

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 Alfred Martin Mailing Address 130 Lake Holleman Pl City, State, Zip Code Ridgeland, MS 39157-5089 Name of Employer (Required) Environmental Management Plus	08/27/2023	\$50.00
Occupation (Required) Manager	Aggregate year-to-date	\$350.00
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 Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed	08/27/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
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 Mary Entrekin Mailing Address 129 Whispering Oaks Xing City, State, Zip Code Pearl, MS 39208-4152 Name of Employer (Required) United Methodist Church	08/27/2023	\$5.00
Occupation (Required) Compliance Analyst	Aggregate year-to-date	\$380.60
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 T. Buchanan Mailing Address 119 Belle Pointe City, State, Zip Code Madison, MS 39110-8287 Name of Employer (Required) Not Employed	09/18/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$265.00

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 S. Allan Alexander Mailing Address 526 N 11th St City, State, Zip Code Oxford, MS 38655-3108 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/18/2023	\$250.00
Aggregate year-to-date		\$1,100.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name William T. Buchanan Mailing Address 119 Belle Pointe City, State, Zip Code Madison, MS 39110-8287 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/28/2023	\$25.00
Aggregate year-to-date		\$265.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Cathleen Stone Mailing Address 12 Lime St City, State, Zip Code Boston, MA 02108-1103 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/20/2023	\$1,000.00
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) _____ Full Name Joanne Edgar Mailing Address 333 W 86th St City, State, Zip Code New York, NY 10024-3114 Name of Employer (Required) Self Employed Occupation (Required) Writer	09/30/2023	\$50.00
Aggregate year-to-date		\$222.00

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 William L. Latham <hr/> Mailing Address 513 Roses Bluff Dr <hr/> City, State, Zip Code Madison, MS 39110-7545 <hr/> Name of Employer (Required) Not Employed	07/30/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$335.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joshua Phillips <hr/> Mailing Address 184 Sundown Cv <hr/> City, State, Zip Code Madison, MS 39110-8168 <hr/> Name of Employer (Required) Mississippi Asthma and Allergy	08/30/2023	\$100.00
Occupation (Required) Physician	Aggregate year-to-date	\$803.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Susan M. Glisson <hr/> Mailing Address 9 Meaders Ln <hr/> City, State, Zip Code Oxford, MS 38655-6074 <hr/> Name of Employer (Required) Self Employed	09/10/2023	\$180.75
Occupation (Required) Facilitator	Aggregate year-to-date	\$290.75
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Michael Collins <hr/> Mailing Address 1826 Ray St <hr/> City, State, Zip Code Ocean Springs, MS 39564-2930 <hr/> Name of Employer (Required) Not Employed	08/31/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$950.00

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 P. Samonds	08/31/2023	\$100.00
Mailing Address 202 Beacon Pt		
City, State, Zip Code Oxford, MS 38655-2108		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Associate Dean	Aggregate year-to-date	\$300.00
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 Debra Young	09/11/2023	\$500.00
Mailing Address 27 County Rd		
City, State, Zip Code Oxford, MS 38655		
Name of Employer (Required) Not Employed		
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 Hackett Cummins	09/22/2023	\$25.00
Mailing Address 9 Nelson Ln		
City, State, Zip Code Pass Christian, MS 39571-4716		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
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 Linda Foshee	08/02/2023	\$10.00
Mailing Address Not Employed		
City, State, Zip Code Hattiesburg, MS 39402		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$607.60

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 Tammy Taylor-Bufford Mailing Address 335 Hotophia Hill Dr City, State, Zip Code Batesville, MS 38606-5724 Name of Employer (Required) Delta Gastroenterology	08/12/2023	\$200.00
Occupation (Required) Nurse Practitioner	Aggregate year-to-date	\$673.40
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 Julie Mabus Mailing Address 207 Hathorn Rd City, State, Zip Code Oxford, MS 38655-4474 Name of Employer (Required) Self Employed	08/22/2023	\$250.00
Occupation (Required) Writer	Aggregate year-to-date	\$400.00
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 Vivian Lamb Mailing Address 122 Appaloosa Trl City, State, Zip Code Apex, NC 27523-6094 Name of Employer (Required) Not Employed	08/22/2023	\$250.00
Occupation (Required) Retired	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 Barbara Austin Mailing Address 1435 Saint Ann St City, State, Zip Code Jackson, MS 39202-1847 Name of Employer (Required) Not Employed	08/03/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$550.00

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 Mary Entrekin Mailing Address 129 Whispering Oaks Xing City, State, Zip Code Pearl, MS 39208-4152 Name of Employer (Required) United Methodist Church Occupation (Required) Compliance Analyst	09/13/2023	\$5.00
Aggregate year-to-date		\$380.60
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 Galloway Mailing Address 17 Baytowne Row City, State, Zip Code Madison, MS 39110-9179 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/24/2023	\$100.00
Aggregate year-to-date		\$1,333.60
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/14/2023	\$15.00
Aggregate year-to-date		\$833.50
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 Witherspoon Mailing Address 910 Lincoln Ave City, State, Zip Code Oxford, MS 38655-4328 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/14/2023	\$500.00
Aggregate year-to-date		\$2,350.00

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 Karen Smith	08/25/2023	\$25.00
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Carter	09/05/2023	\$50.00
Mailing Address 2615 Blackfoot Rd		
City, State, Zip Code Vancleave, MS 39565-8447		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$350.00
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 Stanley S. Owen	09/27/2023	\$100.00
Mailing Address 24 Sweetgrass Ln		
City, State, Zip Code Ocean Springs, MS 39564-3455		
Name of Employer (Required) Not Employed		
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 Tomie Green	09/27/2023	\$50.00
Mailing Address 114 Pine Island Dr		
City, State, Zip Code Jackson, MS 39206-3234		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$665.00

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 Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/18/2023	\$100.00
Aggregate year-to-date		\$2,045.00
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 Lori Karny Mailing Address 6230 Wilshire Blvd City, State, Zip Code Los Angeles, CA 90048-5126 Name of Employer (Required) Self Employed Occupation (Required) Clinical Social Worker	08/08/2023	\$10.00
Aggregate year-to-date		\$602.00
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 Deirdre Phillips Mailing Address 200 Jefferson Rdg City, State, Zip Code Ridgeland, MS 39157-9101 Name of Employer (Required) Delta Health System Occupation (Required) Physician	08/09/2023	\$50.00
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 Joanne Edgar Mailing Address 333 W 86th St City, State, Zip Code New York, NY 10024-3114 Name of Employer (Required) Self Employed Occupation (Required) Writer	08/29/2023	\$9.50
Aggregate year-to-date		\$222.00

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 Drake	09/20/2023	\$500.00
Mailing Address 1220 Sunset Dr		
City, State, Zip Code Ocean Springs, MS 39564-2943		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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 Peter Buttross Jr	09/30/2023	\$25.00
Mailing Address 206 S Rankin St		
City, State, Zip Code Natchez, MS 39120-3536		
Name of Employer (Required) Not Employed		
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 Ben Newhouse	09/21/2023	\$1,000.00
Mailing Address 231 Warren St		
City, State, Zip Code Jersey City, NJ 07302-3771		
Name of Employer (Required) Advance Publications		
Occupation (Required) Finance	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 Margaret Thomas	07/31/2023	\$20.00
Mailing Address 153 Timberton Dr		
City, State, Zip Code Hattiesburg, MS 39401-8209		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$722.00

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 B. Clark Mailing Address 167 Rolling Meadows Rd City, State, Zip Code Ridgeland, MS 39157-9488 Name of Employer (Required) Not Employed	08/21/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,850.00
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 IBEW PAC Mailing Address 900 7th St NW City, State, Zip Code Washington, DC 20001-3886 Name of Employer (Required) 	09/22/2023	\$5,000.00
Occupation (Required)	Aggregate year-to-date	\$276,000.00
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 Sheila Hailey Mailing Address PO Box 39 City, State, Zip Code Terry, MS 39170-0039 Name of Employer (Required) Beth Israel Congregation	08/22/2023	\$100.00
Occupation (Required) Director of Education	Aggregate year-to-date	\$425.00
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 Paula Temperilli Mailing Address 15231 Rainhollow Dr City, State, Zip Code Houston, TX 77070-1328 Name of Employer (Required) Not Employed	09/12/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$560.00

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 Michael O'Neal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic	08/03/2023	\$50.00
Occupation (Required) Physician	Aggregate year-to-date	\$2,526.00
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. Dykes Mailing Address 3524 Old Canton Rd City, State, Zip Code Jackson, MS 39216-3311 Name of Employer (Required) Not Employed	08/23/2023	\$200.00
Occupation (Required) Retired	Aggregate year-to-date	\$400.00
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 Rick Smead Mailing Address 3918 Swarthmore St City, State, Zip Code Houston, TX 77005-3612 Name of Employer (Required) RBN Energy, LLC	09/13/2023	\$250.00
Occupation (Required) Consultant	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 Janice Jackson Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Self Employed	08/14/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,045.00

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 Leslie M. Westbrook <hr/> Mailing Address 800 College Hill Rd <hr/> City, State, Zip Code Oxford, MS 38655-2767 <hr/> Name of Employer (Required) Self Employed	08/24/2023	\$50,000.00
Occupation (Required) Marketing	Aggregate year-to-date	\$58,500.00
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 Brandy Burnette <hr/> Mailing Address 7069 Tudor Ln <hr/> City, State, Zip Code Horn Lake, MS 38637-1259 <hr/> Name of Employer (Required) Young Williams	09/25/2023	\$15.00
Occupation (Required) Attorney	Aggregate year-to-date	\$216.00
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 Kerry Hamilton <hr/> Mailing Address 43 County Road 332 <hr/> City, State, Zip Code Taylor, MS 38673-4552 <hr/> Name of Employer (Required) Kerry Hamilton, Inc.	09/06/2023	\$250.00
Occupation (Required) Consultant	Aggregate year-to-date	\$750.00
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 Cheryl Peters <hr/> Mailing Address 75 Derek Dr <hr/> City, State, Zip Code Columbus, MS 39702-7817 <hr/> Name of Employer (Required) Not Employed	09/16/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$255.00

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 R. Clark Webb	08/07/2023	\$6.00
Mailing Address 846 Van Duzer St		
City, State, Zip Code Staten Island, NY 10304-1816		
Name of Employer (Required) Metropolitan Transportation Authority		
Occupation (Required) It Professional	Aggregate year-to-date	\$287.00
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 Diane Alexander	08/17/2023	\$25.00
Mailing Address 46 Sagewood Dr		
City, State, Zip Code Brandon, MS 39042-2526		
Name of Employer (Required) Fidelity		
Occupation (Required) Representative	Aggregate year-to-date	\$325.00
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 Phil Johnston	09/28/2023	\$500.00
Mailing Address 2 Heritage Dr		
City, State, Zip Code Quincy, MA 02171-2165		
Name of Employer (Required) Self Employed		
Occupation (Required) Public Affairs Consultant	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 Wilson Golden	09/28/2023	\$100.00
Mailing Address 3136 White Magnolia Chase SW		
City, State, Zip Code Gainesville, GA 30504-5587		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,150.00

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 Glenn Oliver <hr/> Mailing Address 5642 Gibson Rd <hr/> City, State, Zip Code Vicksburg, MS 39180-6320 <hr/> Name of Employer (Required) Not Employed	09/28/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$280.00
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 Brenda Coleman <hr/> Mailing Address 4013 Pinehaven Dr <hr/> City, State, Zip Code Jackson, MS 39209-9736 <hr/> Name of Employer (Required) Hinds County Board of Supervisors	08/08/2023	\$25.00
Occupation (Required) Fiscal Officer	Aggregate year-to-date	\$275.00
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 Stephen C. Frobouck <hr/> Mailing Address 18 Overlook Dr <hr/> City, State, Zip Code Pittsburgh, PA 15238-2146 <hr/> Name of Employer (Required) GTL Energy	08/28/2023	\$15,000.00
Occupation (Required) President	Aggregate year-to-date	\$15,000.00
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 Paige Lawrence <hr/> Mailing Address 23213 MS-19 <hr/> City, State, Zip Code Kosciusko, MS 39090 <hr/> Name of Employer (Required) University of Mississippi Medical Center	09/09/2023	\$50.00
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$250.00

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 Maida Coleman Mailing Address 2223 S Jefferson Ave City, State, Zip Code Saint Louis, MO 63104-2211 Name of Employer (Required) Missouri Public Service Commission Occupation (Required) Commissioner	09/30/2023	\$500.00
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 Harold D. Copeland Mailing Address PO Box 631145 City, State, Zip Code Houston, TX 77263-1145 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	07/30/2023	\$25.00
Aggregate year-to-date		\$297.50
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 Barbara Austin Mailing Address 1435 Saint Ann St City, State, Zip Code Jackson, MS 39202-1847 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/10/2023	\$50.00
Aggregate year-to-date		\$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 Suzanne Walsh Mailing Address 2725 White Wing Ln City, State, Zip Code West Palm Beach, FL 33409-2032 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$25.00
Aggregate year-to-date		\$203.00

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 Ross Law Office PLLC <hr/> Mailing Address 384 Court St <hr/> City, State, Zip Code West Point, MS 39773-2954 <hr/> Name of Employer (Required) _____ <hr/> Occupation (Required) _____	08/31/2023	\$1,000.00
Aggregate year-to-date		\$3,500.00
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 Raleigh Byars <hr/> Mailing Address 48 County Road 229 <hr/> City, State, Zip Code Oxford, MS 38655-5800 <hr/> Name of Employer (Required) Not Employed <hr/> Occupation (Required) Not Employed	08/12/2023	\$10.00
Aggregate year-to-date		\$885.00
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 Edson Griswold <hr/> Mailing Address 1699 S Trenton St <hr/> City, State, Zip Code Denver, CO 80231-5602 <hr/> Name of Employer (Required) Not Employed <hr/> Occupation (Required) Not Employed	08/13/2023	\$15.00
Aggregate year-to-date		\$325.00
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 Claudia Hauberg <hr/> Mailing Address 234 Eastbrooke St <hr/> City, State, Zip Code Jackson, MS 39216-4716 <hr/> Name of Employer (Required) Not Employed <hr/> Occupation (Required) Not Employed	08/23/2023	\$1,000.00
Aggregate year-to-date		\$1,500.00

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 Ruth Adams	09/03/2023	\$500.00
Mailing Address 7101 Belle Fontaine Dr		
City, State, Zip Code Ocean Springs, MS 39564-8486		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Mckinnis	08/04/2023	\$2,000.00
Mailing Address 301 Sasco Hill Rd		
City, State, Zip Code Fairfield, CT 06824-5649		
Name of Employer (Required) David McKinnis Consulting, LLC		
Occupation (Required) Software Engineering Consultant	Aggregate year-to-date	\$5,051.90
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 Brenda Coleman	08/04/2023	\$50.00
Mailing Address 4013 Pinehaven Dr		
City, State, Zip Code Jackson, MS 39209-9736		
Name of Employer (Required) Hinds County Board of Supervisors		
Occupation (Required) Fiscal Officer	Aggregate year-to-date	\$275.00
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 Griffith	08/14/2023	\$100.00
Mailing Address PO Box 2248		
City, State, Zip Code Oxford, MS 38655-7248		
Name of Employer (Required) Griffith Law Firm		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,025.00

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 Catherine Sullivan	09/05/2023	\$500.00
Mailing Address 725 Seneca Ave		
City, State, Zip Code Jackson, MS 39216-3225		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00
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 Jennifer Wendy	09/15/2023	\$250.00
Mailing Address 1075 Park Ave		
City, State, Zip Code New York, NY 10128-1003		
Name of Employer (Required) Blue Rock Bay Real Estate LLC		
Occupation (Required) Vice President	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 Catherine Mcclinton	09/16/2023	\$100.00
Mailing Address 1020 Poppy Cv		
City, State, Zip Code Oxford, MS 38655		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$600.00
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 Jamie Harris	08/16/2023	\$100.00
Mailing Address 2943 Tishomingo Ln		
City, State, Zip Code Memphis, TN 38111-2631		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$353.00

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 Joel Brunt Mailing Address 5130 Arthur St City, State, Zip Code Moss Point, MS 39563-2706 Name of Employer (Required) Ochsner Occupation (Required) Medical Doctor	09/27/2023	\$1,250.00
Aggregate year-to-date		\$9,750.00
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 Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed Occupation (Required) Nurse Practitioner	09/27/2023	\$30.00
Aggregate year-to-date		\$335.00
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 Ellis Turnage Mailing Address 1214 South St City, State, Zip Code Cleveland, MS 38732-3551 Name of Employer (Required) Turnage Law Office Occupation (Required) Attorney	08/07/2023	\$2,500.00
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 Greg White Mailing Address 3811 Fox Valley Dr City, State, Zip Code Rockville, MD 20853-3282 Name of Employer (Required) National Assn of Regulatory Utility Commissioners Occupation (Required) Executive	08/17/2023	\$100.00
Aggregate year-to-date		\$400.00

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 Charles Lacavera Mailing Address 1459 Forbes Dr City, State, Zip Code Byram, MS 39272-9459 Name of Employer (Required) Eastpointe Occupation (Required) Utilization Management	09/28/2023	\$25.00
Aggregate year-to-date		\$375.00
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 Renne R Lohoeffener Mailing Address 17017 Spring Lake Dr E City, State, Zip Code Vanceleave, MS 39565-8966 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/08/2023	\$200.00
Aggregate year-to-date		\$300.00
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 Terry Mangialardi Mailing Address 1181 Mcgowan Dr City, State, Zip Code Southaven, MS 38671-8430 Name of Employer (Required) Desoto County Schools Occupation (Required) Teacher	09/08/2023	\$25.00
Aggregate year-to-date		\$215.00
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 H. Hickman Mailing Address 412 S Central Ave City, State, Zip Code New Albany, MS 38652-3701 Name of Employer (Required) Self Employed Occupation (Required) Producer	09/19/2023	\$500.00
Aggregate year-to-date		\$2,250.00

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 Lynch Mailing Address 617 Camelia Trl City, State, Zip Code Brandon, MS 39047-6316 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/29/2023	\$100.00
Aggregate year-to-date		\$1,075.00
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 Bertis Downs Mailing Address PO Box 1864 City, State, Zip Code Athens, GA 30603-1864 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/30/2023	\$500.00
Aggregate year-to-date		\$1,600.00
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 Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$10.00
Aggregate year-to-date		\$607.60
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 Ed Redlich Mailing Address 546 N June St City, State, Zip Code Los Angeles, CA 90004-1004 Name of Employer (Required) Central Broadcasting System Occupation (Required) Television Executive Producer	08/30/2023	\$250.00
Aggregate year-to-date		\$300.00

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 George L. Jordan Mailing Address 1087 Augusta Dr City, State, Zip Code Oxford, MS 38655-6187 Name of Employer (Required) Oxford Hotels & Resorts, LLC	09/21/2023	\$1,000.00
Occupation (Required) President	Aggregate year-to-date	\$17,501.00
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 Adams Mailing Address 3203 Melinda Ln City, State, Zip Code Corinth, MS 38834-2219 Name of Employer (Required) Not Employed	08/11/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
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 Cheryl Peters Mailing Address 75 Derek Dr City, State, Zip Code Columbus, MS 39702-7817 Name of Employer (Required) Not Employed	09/22/2023	\$10.00
Occupation (Required) Not Employed	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 Evelyn Walker Mailing Address 208 Bellewether Pass City, State, Zip Code Ridgeland, MS 39157-8763 Name of Employer (Required) Facility	09/22/2023	\$200.00
Occupation (Required) Healthcare Worker	Aggregate year-to-date	\$250.00

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 Ballard	09/02/2023	\$5.00
Mailing Address 142 Road 598		
City, State, Zip Code Plantersville, MS 38862-4901		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$478.00
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 Leslie Fye	09/23/2023	\$25.00
Mailing Address 5439 Ennis Rd		
City, State, Zip Code Starkville, MS 39759-4861		
Name of Employer (Required) Self Employed		
Occupation (Required) Licensed Professional Counselor	Aggregate year-to-date	\$795.00
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 Rifkin	09/23/2023	\$2,000.00
Mailing Address 131 W Canebrake Blvd		
City, State, Zip Code Hattiesburg, MS 39402-8341		
Name of Employer (Required) Hattiesburg Clinic		
Occupation (Required) Physician	Aggregate year-to-date	\$2,200.00
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 Rod Ward	08/03/2023	\$500.00
Mailing Address 221 Sunnybrook Rd		
City, State, Zip Code Ridgeland, MS 39157-2206		
Name of Employer (Required) Ward Law		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00

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 Eleanor Gill Mailing Address 2605 School St City, State, Zip Code Hernando, MS 38632-2217 Name of Employer (Required) Self Employed Occupation (Required) Dentist	08/23/2023	\$200.00
Aggregate year-to-date		\$455.00
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 Beverly Hogan Mailing Address 111 Rock Glen Pl City, State, Zip Code Jackson, MS 39206-3131 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/23/2023	\$300.00
Aggregate year-to-date		\$400.00
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 Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/24/2023	\$25.00
Aggregate year-to-date		\$680.50
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 G. Klein Jr Mailing Address 308 Brookwoods Dr City, State, Zip Code Ridgeland, MS 39157-2029 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/14/2023	\$30.00
Aggregate year-to-date		\$205.00

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 Nina S. Tollison Mailing Address 532 Fazio Drive Extended City, State, Zip Code Oxford, MS 38655-2771 Name of Employer (Required) Not Employed	08/15/2023	\$250.00
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 Stefan Massong Mailing Address 307 Wisteria St City, State, Zip Code Ocean Springs, MS 39564-2840 Name of Employer (Required) Self Employed	08/25/2023	\$100.00
Occupation (Required) Psychologist	Aggregate year-to-date	\$900.00
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 Karen Hinton Mailing Address 817 Chartres St City, State, Zip Code New Orleans, LA 70116-3206 Name of Employer (Required) Not Employed	09/05/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,850.00
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 Sumati Thomas Mailing Address 4146 Crestview Pl City, State, Zip Code Jackson, MS 39211-6404 Name of Employer (Required) Change Research	09/15/2023	\$10.00
Occupation (Required) Analyst	Aggregate year-to-date	\$388.60

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 Debra Warner Mailing Address 502 E Lakeshore Dr City, State, Zip Code Carriere, MS 39426-7905 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/16/2023	\$25.00
Aggregate year-to-date		\$210.00
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 Mary Haskell Mailing Address 6 Trotting Horse Dr City, State, Zip Code Lexington, MA 02421-6339 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/16/2023	\$100.00
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 Thomas Adams Mailing Address 4527 Union Ave City, State, Zip Code Nettleton, MS 38858-6037 Name of Employer (Required) MS Public Service Commission Occupation (Required) Chief Investigator	09/27/2023	\$25.00
Aggregate year-to-date		\$223.00
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 Kilgore Mailing Address 730 Forest Park Cir City, State, Zip Code Philadelphia, MS 39350-3314 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/07/2023	\$100.00
Aggregate year-to-date		\$300.00

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 Beverly Hogan <hr/> Mailing Address 111 Rock Glen Pl <hr/> City, State, Zip Code Jackson, MS 39206-3131 <hr/> Name of Employer (Required) Not Employed	08/07/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Timothy C. Medley <hr/> Mailing Address 238 Eastbrooke St <hr/> City, State, Zip Code Jackson, MS 39216-4716 <hr/> Name of Employer (Required) Medley & Brown	08/28/2023	\$250.00
Occupation (Required) Partner	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Joan Santa Cruz <hr/> Mailing Address 5825 Cedar Rd <hr/> City, State, Zip Code Ocean Springs, MS 39564-2250 <hr/> Name of Employer (Required) Not Employed	09/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$310.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name George W. Healy <hr/> Mailing Address 1323 28th Ave <hr/> City, State, Zip Code Gulfport, MS 39501-1942 <hr/> Name of Employer (Required) Healy & Jordan PLLC	08/09/2023	\$300.00
Occupation (Required) Attorney	Aggregate year-to-date	\$300.00

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 Joan Santa Cruz Mailing Address 5825 Cedar Rd City, State, Zip Code Ocean Springs, MS 39564-2250 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/29/2023	\$25.00
Aggregate year-to-date		\$310.00
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 Amanda Pannell Mailing Address 65 Byhalia Creek Farms Rd E City, State, Zip Code Byhalia, MS 38611-7025 Name of Employer (Required) Ford Occupation (Required) Marketing	09/30/2023	\$100.00
Aggregate year-to-date		\$300.00
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 Nancy Groninger Mailing Address 5361 Saratoga St City, State, Zip Code Yorba Linda, CA 92886-4825 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$20.00
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 Ken Hipple Mailing Address 311 Summer Oak Trl City, State, Zip Code Madison, MS 39110-9147 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/03/2023	\$250.00
Aggregate year-to-date		\$1,550.00

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 Pigott Mailing Address 775 N Congress St City, State, Zip Code Jackson, MS 39202-3009 Name of Employer (Required) Pigott Firm Occupation (Required) Attorney	08/23/2023	\$1,000.00
Aggregate year-to-date		\$3,000.00
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 B. Swain Mailing Address 1537 ALDERSON Loop City, State, Zip Code Oxford, MS 38655 Name of Employer (Required) Develop Design Studio Occupation (Required) Architect	09/24/2023	\$250.00
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 Brombacher Mailing Address 108 Coachmans Rd City, State, Zip Code Madison, MS 39110-9227 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/04/2023	\$25.00
Aggregate year-to-date		\$800.00
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 Andrew Jenkins Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Technical Services Occupation (Required) Business Owner	08/14/2023	\$50.00
Aggregate year-to-date		\$4,850.00

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 Scott Cumbest Mailing Address PO Box 1287 City, State, Zip Code Pascagoula, MS 39568-1287 Name of Employer (Required) Self Employed Occupation (Required) Attorney	08/14/2023	\$1,000.00
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 Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/15/2023	\$25.00
Aggregate year-to-date		\$375.00
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 Taliscia Tobias Mailing Address 16224 Lily Orchard Rd City, State, Zip Code Moss Point, MS 39562-9002 Name of Employer (Required) US Dept of Veterans Affairs Occupation (Required) Registered Nurse	08/06/2023	\$50.00
Aggregate year-to-date		\$225.00
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 Rathi Iyer Mailing Address 130 Whippoorwill Rd City, State, Zip Code Brandon, MS 39047-6429 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/16/2023	\$25.00
Aggregate year-to-date		\$325.00

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 C. Jackson Williams Mailing Address PO Box 69 City, State, Zip Code Taylor, MS 38673-0069 Name of Employer (Required) University of Mississippi	08/26/2023	\$25.00
Occupation (Required) Teacher	Aggregate year-to-date	\$325.00
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 Jimmie McGuire Mailing Address PO Box 808 City, State, Zip Code Waveland, MS 39576-0808 Name of Employer (Required) Self Employed	09/06/2023	\$100.00
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 Mahalia Jackson Mailing Address 470 Hopson Pixley Rd City, State, Zip Code Clarksdale, MS 38614-9044 Name of Employer (Required) Aaron E. Henry Community Health Services Center	09/06/2023	\$15.00
Occupation (Required) Program Coordinator	Aggregate year-to-date	\$210.00
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 Leslie Steverson Mailing Address 2313 Farrell Cir City, State, Zip Code Gulfport, MS 39507-2222 Name of Employer (Required) Not Employed	09/16/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$320.00

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 P. Coleman Mailing Address 7357 Savannah Dr City, State, Zip Code Marion, MS 39342-9004 Name of Employer (Required) Vulcan Imaging Associates Occupation (Required) Physician	09/27/2023	\$250.00
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 Harvey Johnson Jr Mailing Address 1141 Hallmark Dr City, State, Zip Code Jackson, MS 39206-2113 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/07/2023	\$250.00
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 Tiffany Bensen Mailing Address 237 Timber Ln City, State, Zip Code Oxford, MS 38655-5851 Name of Employer (Required) University of Mississippi Occupation (Required) Educator	09/29/2023	\$25.00
Aggregate year-to-date		\$275.00
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 B. Schimmel Mailing Address 3630 Kings Hwy City, State, Zip Code Jackson, MS 39216-3321 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/09/2023	\$1,250.00
Aggregate year-to-date		\$15,850.00

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 Ann Smith Mailing Address PO Box 1865 City, State, Zip Code Gulfport, MS 39502-1865 Name of Employer (Required) Not Employed	08/09/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$390.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Terry Dwyer Mailing Address 950 Fairfax Cir City, State, Zip Code Jackson, MS 39211-4250 Name of Employer (Required) Not Employed	08/29/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Richard Rhoden Mailing Address 778 Gillespie St City, State, Zip Code Jackson, MS 39202-1711 Name of Employer (Required) Self Employed	09/09/2023	\$30.00
Occupation (Required) Physician	Aggregate year-to-date	\$685.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Susan W. Rabon Mailing Address 306 River Dr City, State, Zip Code Southport, NC 28461-4110 Name of Employer (Required) Not Employed	09/30/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00

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 Susan Weatherholt Mailing Address 207 Greenfield Pl City, State, Zip Code Brandon, MS 39047-9007 Name of Employer (Required) Not Employed	09/30/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$265.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Victor Campbell Mailing Address 1307 Chickering Rd City, State, Zip Code Nashville, TN 37215-4521 Name of Employer (Required) Not Employed	07/30/2023	\$500.00
Occupation (Required) Not Employed	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) _____		
Full Name Rick Addy Mailing Address 100 Highway 30 E City, State, Zip Code Oxford, MS 38655-8802 Name of Employer (Required) Self Employed	08/10/2023	\$1,000.00
Occupation (Required) Photographer	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) _____		
Full Name Bethany Theilman Mailing Address 131 Redbud Trl City, State, Zip Code Brandon, MS 39047-6402 Name of Employer (Required) Diabetes Foundation of MS	08/20/2023	\$5.00
Occupation (Required) Secretary	Aggregate year-to-date	\$217.10

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 O'Brien	08/30/2023	\$50.00
Mailing Address 6007 SW 240th St		
City, State, Zip Code Vashon, WA 98070-7247		
Name of Employer (Required) Health Net		
Occupation (Required) COO	Aggregate year-to-date	\$950.00
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 Ramona Bernard	08/31/2023	\$50.00
Mailing Address 301 Panola St		
City, State, Zip Code Water Valley, MS 38965-2424		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$310.00
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 Beverly Johnson	09/01/2023	\$50.00
Mailing Address PO Box 376		
City, State, Zip Code Kosciusko, MS 39090-0376		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Marcus Wiggs	09/22/2023	\$100.00
Mailing Address 917 Arlington St		
City, State, Zip Code Jackson, MS 39202-1621		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$1,100.00

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 Carroll	08/22/2023	\$50.00
Mailing Address 675 Beulah Grove Rd		
City, State, Zip Code Pontotoc, MS 38863-7704		
Name of Employer (Required) Ashley Distribution Services		
Occupation (Required) Truck Driver	Aggregate year-to-date	\$920.00
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 Arweeda Coker	09/02/2023	\$50.00
Mailing Address 889 Mount Vernon Rd		
City, State, Zip Code Tupelo, MS 38804-7116		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
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 Wilson Golden	08/03/2023	\$100.00
Mailing Address 3136 White Magnolia Chase SW		
City, State, Zip Code Gainesville, GA 30504-5587		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,150.00
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 Joyce Leech	08/13/2023	\$50.00
Mailing Address 214 Main St S		
City, State, Zip Code Amory, MS 38821-4218		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$650.00

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 Eleanor Winter	08/23/2023	\$1,000.00
Mailing Address 1724 Massachusetts Ave NW		
City, State, Zip Code Washington, DC 20036-1903		
Name of Employer (Required) NCTA		
Occupation (Required) Senior Vice President	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 Patterson Fenelon	08/24/2023	\$1,000.00
Mailing Address PO Box 12408		
City, State, Zip Code Jackson, MS 39236-2408		
Name of Employer (Required) Tangoe		
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 Karen Smith	09/25/2023	\$10.00
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Ann Smith	08/05/2023	\$5.00
Mailing Address PO Box 1865		
City, State, Zip Code Gulfport, MS 39502-1865		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$390.00

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 Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/16/2023	\$100.00
Aggregate year-to-date		\$3,400.00
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 Kaye Mailing Address 123 Nottingham Ter City, State, Zip Code Buffalo, NY 14216-3504 Name of Employer (Required) University at Buffalo Occupation (Required) Faculty	08/07/2023	\$50.00
Aggregate year-to-date		\$525.00
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 Alma Walls Mailing Address 3887 Kenton Dr City, State, Zip Code Southaven, MS 38672-7225 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/07/2023	\$100.00
Aggregate year-to-date		\$3,400.00
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 Lloyd Gordon Mailing Address 105 Colony Crown City, State, Zip Code Brandon, MS 39047-8202 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/18/2023	\$50.00
Aggregate year-to-date		\$375.00

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 Barbara Casey	08/28/2023	\$50.00
Mailing Address 229 Peachtree Hills Ave NE		
City, State, Zip Code Atlanta, GA 30305-4413		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$725.00
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 Obie M. McNair Jr	09/29/2023	\$50.00
Mailing Address 102 Cirencester Dr		
City, State, Zip Code Ridgeland, MS 39157-9788		
Name of Employer (Required) Central Mississippi Medical Center		
Occupation (Required) Health Care	Aggregate year-to-date	\$525.00
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 O'Neal	08/09/2023	\$250.00
Mailing Address 1011 Adeline St		
City, State, Zip Code Hattiesburg, MS 39401-5022		
Name of Employer (Required) Hattiesburg Clinic		
Occupation (Required) Physician	Aggregate year-to-date	\$2,526.00
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 Conny Parham	08/29/2023	\$250.00
Mailing Address 2607 Sterling Dr		
City, State, Zip Code Oxford, MS 38655-4269		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$250.00

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 Paloma Wu	09/30/2023	\$25.00
Mailing Address 3525 Hawthorn Dr		
City, State, Zip Code Jackson, MS 39216-3308		
Name of Employer (Required) Mississippi Center For Justice		
Occupation (Required) Attorney	Aggregate year-to-date	\$205.00
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 Amanda Pannell	07/30/2023	\$100.00
Mailing Address 65 Byhalia Creek Farms Rd E		
City, State, Zip Code Byhalia, MS 38611-7025		
Name of Employer (Required) Ford		
Occupation (Required) Marketing	Aggregate year-to-date	\$300.00
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 Russ Bradford	08/30/2023	\$500.00
Mailing Address 1328 Quail Valley Rd		
City, State, Zip Code Nashville, TN 37214-4219		
Name of Employer (Required) Metro Nashville		
Occupation (Required) Council Member	Aggregate year-to-date	\$914.00
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 Karen Strange	08/30/2023	\$50.00
Mailing Address 69 Henry James Rd		
City, State, Zip Code New Augusta, MS 39462-9710		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,260.00

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 Glen Davidson Jr <hr/> Mailing Address 1123 Quail Creek Cv <hr/> City, State, Zip Code Tupelo, MS 38801-7257 <hr/> Name of Employer (Required) Not Employed	08/11/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$258.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Karen Smith <hr/> Mailing Address 14624 S Vandalia Ave <hr/> City, State, Zip Code Bixby, OK 74008-3754 <hr/> Name of Employer (Required) Not Employed	09/12/2023	\$8.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name James Covington <hr/> Mailing Address 1061 Whitsett Walk <hr/> City, State, Zip Code Jackson, MS 39206-6103 <hr/> Name of Employer (Required) Southeastern Consulting Group, Inc.	08/23/2023	\$1,000.00
Occupation (Required) CEO	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) _____		
Full Name Edson Griswold <hr/> Mailing Address 1699 S Trenton St <hr/> City, State, Zip Code Denver, CO 80231-5602 <hr/> Name of Employer (Required) Not Employed	08/23/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00

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 Karen Smith	09/13/2023	\$15.00
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Phillip Levin	09/14/2023	\$250.00
Mailing Address 451 Bordeaux Cv		
City, State, Zip Code Biloxi, MS 39531-2296		
Name of Employer (Required) Memorial Hospital Group		
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 Paul Carter	08/04/2023	\$100.00
Mailing Address 2615 Blackfoot Rd		
City, State, Zip Code Vancleave, MS 39565-8447		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$350.00
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 Brenda J. West	08/04/2023	\$100.00
Mailing Address 201 Park Dr		
City, State, Zip Code Oxford, MS 38655-2816		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00

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 Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	08/04/2023	\$25.00
Aggregate year-to-date		\$1,197.00
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 Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	08/24/2023	\$6.00
Aggregate year-to-date		\$1,197.00
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 Lynch Mailing Address 617 Camelia Trl City, State, Zip Code Brandon, MS 39047-6316 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/24/2023	\$50.00
Aggregate year-to-date		\$1,075.00
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 Helen Boone Mailing Address 3726 Crane Blvd City, State, Zip Code Jackson, MS 39216-3605 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/25/2023	\$100.00
Aggregate year-to-date		\$1,047.45

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 Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/05/2023	\$25.00
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 Rathi Iyer Mailing Address 130 Whippoorwill Rd City, State, Zip Code Brandon, MS 39047-6429 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/16/2023	\$25.00
Aggregate year-to-date		\$325.00
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5694 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/16/2023	\$15.00
Aggregate year-to-date		\$833.50
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 Claude J. Gunter Mailing Address 1315 Pierce Ave City, State, Zip Code Oxford, MS 38655-4433 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/17/2023	\$100.00
Aggregate year-to-date		\$250.00

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 Ted B. Atkinson <hr/> Mailing Address 1000 E Broad St <hr/> City, State, Zip Code West Point, MS 39773-3236 <hr/> Name of Employer (Required) Mississippi State University	08/27/2023	\$25.00
Occupation (Required) Professor	Aggregate year-to-date	\$410.00
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 Judy M. Guice <hr/> Mailing Address 125 Holcomb Blvd <hr/> City, State, Zip Code Ocean Springs, MS 39564-5028 <hr/> Name of Employer (Required) Not Employed	09/18/2023	\$500.00
Occupation (Required) Retired	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 Bonnie Allen <hr/> Mailing Address 7688 Highway 19 N <hr/> City, State, Zip Code Collinsville, MS 39325-9390 <hr/> Name of Employer (Required) Not Employed	08/08/2023	\$5.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$285.00
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 Ballard <hr/> Mailing Address 142 Road 598 <hr/> City, State, Zip Code Plantersville, MS 38862-4901 <hr/> Name of Employer (Required) Not Employed	08/18/2023	\$33.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$478.00

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 Ted Wilson <hr/> Mailing Address 364 Whitt Rd <hr/> City, State, Zip Code Eupora, MS 39744-2531 <hr/> Name of Employer (Required) Not Employed	08/28/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$275.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Arthur Segel <hr/> Mailing Address 118 Dean Rd <hr/> City, State, Zip Code Brookline, MA 02445-4212 <hr/> Name of Employer (Required) Harvard Business School	09/08/2023	\$500.00
Occupation (Required) Professor	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) _____		
Full Name Michael Collins <hr/> Mailing Address 1826 Ray St <hr/> City, State, Zip Code Ocean Springs, MS 39564-2930 <hr/> Name of Employer (Required) Not Employed	09/19/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$950.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lise Pearlman <hr/> Mailing Address 1147 Clarendon Cres <hr/> City, State, Zip Code Oakland, CA 94610-1807 <hr/> Name of Employer (Required) Self Employed	09/29/2023	\$50.00
Occupation (Required) Author	Aggregate year-to-date	\$255.00

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 William N. Graham Mailing Address 1301 Sandlewood Dr City, State, Zip Code Hattiesburg, MS 39402-3042 Name of Employer (Required) Not Employed	09/29/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$333.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name John Jopling Mailing Address 276 Santini St City, State, Zip Code Biloxi, MS 39530-2946 Name of Employer (Required) MS Center for Justice	09/29/2023	\$500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,450.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Gayle Massey Mailing Address 186 Parke Dr City, State, Zip Code Ridgeland, MS 39157-9402 Name of Employer (Required) Not Employed	08/09/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$425.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Donna Shalala Mailing Address 60 Edgewater Dr City, State, Zip Code Coral Gables, FL 33133-6970 Name of Employer (Required) University of Miami	09/09/2023	\$100.00
Occupation (Required) Professor	Aggregate year-to-date	\$600.00

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 Rebecca Long	07/30/2023	\$50.00
Mailing Address 1496 W Lakeshore Dr		
City, State, Zip Code Starkville, MS 39759-6343		
Name of Employer (Required) Mississippi State University		
Occupation (Required) Professor	Aggregate year-to-date	\$360.00
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 Karen Clarke	08/10/2023	\$100.00
Mailing Address 122 Shadowlawn Ave		
City, State, Zip Code Pass Christian, MS 39571-4817		
Name of Employer (Required) Ochsner		
Occupation (Required) Registered Nurse	Aggregate year-to-date	\$400.00
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 Cynthia Morse	07/31/2023	\$25.00
Mailing Address 8601 Zimpel St		
City, State, Zip Code New Orleans, LA 70118-1139		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00
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 Karen Smith	08/31/2023	\$25.00
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50

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 Winter Mailing Address 13 Horizon Hill Rd City, State, Zip Code Asheville, NC 28804-2429 Name of Employer (Required) Not Employed	09/01/2023	\$25.00
Occupation (Required) Not Employed	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) _____		
Full Name Susan Adams Mailing Address 3203 Melinda Ln City, State, Zip Code Corinth, MS 38834-2219 Name of Employer (Required) Not Employed	09/11/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Michael Cullin Mailing Address 2727 Oakview Dr City, State, Zip Code Tupelo, MS 38804-1624 Name of Employer (Required) Sims-Lohman Inc.	09/12/2023	\$250.00
Occupation (Required) Design Specialist	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) _____		
Full Name Kathaleen Miller Mailing Address 13509 Circle G Ranch Rd City, State, Zip Code Picayune, MS 39466-9586 Name of Employer (Required) Not Employed	08/04/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$210.00

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 Susan Dowdy Mailing Address 301 Cherokee Dr City, State, Zip Code Mccomb, MS 39648-6013 Name of Employer (Required) Southwest Broadcast Occupation (Required) Sales	08/24/2023	\$1,500.00
Aggregate year-to-date		\$2,700.00
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 Michael O'Neal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic Occupation (Required) Physician	08/24/2023	\$25.00
Aggregate year-to-date		\$2,526.00
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 Joli Nichols Mailing Address 1701 Johnson Ave City, State, Zip Code Oxford, MS 38655-4725 Name of Employer (Required) North MS Hand Clinics Occupation (Required) Occupational Therapist	09/25/2023	\$250.00
Aggregate year-to-date		\$750.00
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 Belinda Watkins Mailing Address 1983 E Arden Oaks Dr City, State, Zip Code Germantown, TN 38139-5697 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/05/2023	\$100.00
Aggregate year-to-date		\$250.00

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 Claire Crews <hr/> Mailing Address 101 County Road 413 <hr/> City, State, Zip Code Oxford, MS 38655-7601 <hr/> Name of Employer (Required) Not Employed	08/05/2023	\$100.00
Occupation (Required) Not Employed	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) _____		
Full Name Eleanor Haimsohn <hr/> Mailing Address 4700 Treadway Rd <hr/> City, State, Zip Code Hernando, MS 38632-9149 <hr/> Name of Employer (Required) Not Employed	08/15/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William Denman <hr/> Mailing Address 417 Main St <hr/> City, State, Zip Code Winchester, MA 01890-2925 <hr/> Name of Employer (Required) Massachusetts General Physicians Organization	08/25/2023	\$50.00
Occupation (Required) Physician	Aggregate year-to-date	\$618.30
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Martin Crump <hr/> Mailing Address 7020 Rollinggreen Dr <hr/> City, State, Zip Code Pass Christian, MS 39571-8149 <hr/> Name of Employer (Required) Davis Crump, PC	08/16/2023	\$2,500.00
Occupation (Required) Attorney	Aggregate year-to-date	\$2,500.00

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 Karen Smith	08/26/2023	\$10.00
Mailing Address 14624 S Vandalia Ave		
City, State, Zip Code Bixby, OK 74008-3754		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$680.50
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 Boudreau	08/17/2023	\$250.00
Mailing Address 2208 A Church St		
City, State, Zip Code Oxford, MS 38655-4902		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Assistant Professor	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 Joan Peterman	08/27/2023	\$25.00
Mailing Address 1224 Ridge Rd		
City, State, Zip Code Perkinston, MS 39573-5925		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$230.00
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 Steven Smith	08/08/2023	\$5.00
Mailing Address 1439 Briarwood Dr		
City, State, Zip Code Marshfield, MO 65706-2407		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

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 Milton O. Sundbeck Mailing Address 37 Town Creek Rd City, State, Zip Code West Point, MS 39773-5705 Name of Employer (Required) Southern Ionics, Inc.	09/08/2023	\$5,000.00
Occupation (Required) President	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 John Foy Mailing Address 1881 N Parc Cir City, State, Zip Code Tupelo, MS 38804-9774 Name of Employer (Required) Not Employed	09/29/2023	\$25.00
Occupation (Required) Retired	Aggregate year-to-date	\$325.00
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 O'Neal Mailing Address 1011 Adeline St City, State, Zip Code Hattiesburg, MS 39401-5022 Name of Employer (Required) Hattiesburg Clinic	09/30/2023	\$50.00
Occupation (Required) Physician	Aggregate year-to-date	\$2,526.00
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 Penson Mailing Address 377 Huntington Pl City, State, Zip Code Tupelo, MS 38801-7965 Name of Employer (Required) CME Church	09/30/2023	\$25.00
Occupation (Required) Pastor	Aggregate year-to-date	\$229.60

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 Dennis Truax Mailing Address 913 Southgate Dr City, State, Zip Code Starkville, MS 39759-9434 Name of Employer (Required) Self Employed Occupation (Required) Engineer	07/30/2023	\$50.00
Aggregate year-to-date		\$1,671.00
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 Ann Bowden Mailing Address 18 Cedarwood Ln City, State, Zip Code Gulfport, MS 39503-6222 Name of Employer (Required) Not Employed Occupation (Required) Retired	08/30/2023	\$1,000.00
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 Diane Irvin Mailing Address 4047 Wyandot St City, State, Zip Code Denver, CO 80211-2140 Name of Employer (Required) Strategic Programs, Inc. Occupation (Required) Corporate Secretary	09/21/2023	\$10.00
Aggregate year-to-date		\$433.00
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 B. Schimmel Mailing Address 3630 Kings Hwy City, State, Zip Code Jackson, MS 39216-3321 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/21/2023	\$1,000.00
Aggregate year-to-date		\$15,850.00

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 Johnie Seal Mailing Address 1286 John Amacker Rd City, State, Zip Code Poplarville, MS 39470-6396 Name of Employer (Required) Not Employed	09/01/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$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) _____		
Full Name Frances M. Coleman Mailing Address 108 Royal Garden Ter City, State, Zip Code Madison, MS 39110-7637 Name of Employer (Required) Not Employed	09/03/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$440.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name William N. Graham Mailing Address 1301 Sandlewood Dr City, State, Zip Code Hattiesburg, MS 39402-3042 Name of Employer (Required) Not Employed	09/13/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$333.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Clyde Muse Mailing Address 228 Trace Cir City, State, Zip Code Raymond, MS 39154-9518 Name of Employer (Required) Not Employed	08/24/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$300.00

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 Nancy Loftus Mailing Address 20329 Longview Rd City, State, Zip Code Long Beach, MS 39560-9026 Name of Employer (Required) Catholic Charities of S. MS Occupation (Required) Social Worker	09/04/2023	\$300.00
Aggregate year-to-date		\$1,026.40
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. J. Jones Mailing Address PO Box 23 City, State, Zip Code Coahoma, MS 38617-0023 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/14/2023	\$50.00
Aggregate year-to-date		\$225.00
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 Lynell James Mailing Address PO Box 671 City, State, Zip Code Summit, MS 39666-0671 Name of Employer (Required) Georgia-Pacific Professional Occupation (Required) Reliability Coordinator	09/15/2023	\$250.00
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 Douglas Masterson Mailing Address 43 Palm Tree Loop City, State, Zip Code Petal, MS 39465-9251 Name of Employer (Required) University of Southern Mississippi Occupation (Required) Chemist	08/05/2023	\$25.00
Aggregate year-to-date		\$565.00

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 Ed Jones	08/15/2023	\$300.00
Mailing Address 718 Market St		
City, State, Zip Code Pascagoula, MS 39567-7374		
Name of Employer (Required) Jones CPA Firm PLLC		
Occupation (Required) Accountant	Aggregate year-to-date	\$300.00
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 Edson Griswold	09/15/2023	\$15.00
Mailing Address 1699 S Trenton St		
City, State, Zip Code Denver, CO 80231-5602		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$325.00
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 Keith Johnson	09/26/2023	\$100.00
Mailing Address PO Box 421		
City, State, Zip Code Nesbit, MS 38651-0421		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,150.00
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 Linda J. Davis	09/26/2023	\$25.00
Mailing Address 179 Little Sawmill Rd		
City, State, Zip Code Laurel, MS 39443-9157		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$600.00

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 Ken Hipple	08/06/2023	\$100.00
Mailing Address 311 Summer Oak Trl		
City, State, Zip Code Madison, MS 39110-9147		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,550.00
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 Cynthia Yap	09/06/2023	\$25.00
Mailing Address 1955 Popps Ferry Rd		
City, State, Zip Code Biloxi, MS 39532-2024		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$796.00
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 Joanna Shows	08/07/2023	\$25.00
Mailing Address 3 S Heron Cv		
City, State, Zip Code Hattiesburg, MS 39402-8723		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$975.00
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 Edson Griswold	08/07/2023	\$3.00
Mailing Address 1699 S Trenton St		
City, State, Zip Code Denver, CO 80231-5694		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$833.50

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 Karla Jurvetson Mailing Address 350 2nd St City, State, Zip Code Los Altos, CA 94022-3602 Name of Employer (Required) Self Employed Occupation (Required) Physician	08/17/2023	\$5,000.00
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 Marc Lerner Mailing Address 1415 Jefferson Ave City, State, Zip Code Oxford, MS 38655-3715 Name of Employer (Required) University of Mississippi Occupation (Required) Historian	08/17/2023	\$200.00
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 Frances M. Coleman Mailing Address 108 Royal Garden Ter City, State, Zip Code Madison, MS 39110-7637 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/27/2023	\$10.00
Aggregate year-to-date		\$440.00
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 Cynthia Morse Mailing Address 8601 Zimpel St City, State, Zip Code New Orleans, LA 70118-1139 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/07/2023	\$10.00
Aggregate year-to-date		\$225.00

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 Angelos Vamvakas Mailing Address 3161 Wayne Dr City, State, Zip Code Diberville, MS 39540-8554 Name of Employer (Required) Self Employed	09/17/2023	\$25.00
Occupation (Required) Psychiatrist	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 Carol Hopkins Mailing Address 711 Long Meadow Dr City, State, Zip Code Oxford, MS 38655-9742 Name of Employer (Required) University of Mississippi	08/18/2023	\$33.00
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$233.00
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 Brad Morris Law Firm PLCC Mailing Address 1603 University Ave City, State, Zip Code Oxford, MS 38655-4127 Name of Employer (Required) _____	08/18/2023	\$1,000.00
Occupation (Required)	Aggregate year-to-date	\$3,000.00
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 Thomas Adams Mailing Address 4527 Union Ave City, State, Zip Code Nettleton, MS 38858-6037 Name of Employer (Required) MS Public Service Commission	08/28/2023	\$25.00
Occupation (Required) Chief Investigator	Aggregate year-to-date	\$223.00

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 Cynthia Yap Mailing Address 1955 Poppo Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/19/2023	\$25.00
Aggregate year-to-date		\$796.00
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 Victor Fleitas Mailing Address 148 Midway Dr City, State, Zip Code Tupelo, MS 38804-2800 Name of Employer (Required) Victor I. Fleitas, P.A. Occupation (Required) Attorney	09/19/2023	\$100.00
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 Pamela Helms Mailing Address 317 Autumn Crest Dr City, State, Zip Code Ridgeland, MS 39157-2604 Name of Employer (Required) Self Employed Occupation (Required) Nurse Practitioner	09/29/2023	\$25.00
Aggregate year-to-date		\$335.00
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 Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/20/2023	\$25.00
Aggregate year-to-date		\$748.47

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 Martha VanLandingham Mailing Address 4830 Old West Point Rd City, State, Zip Code Starkville, MS 39759-8190 Name of Employer (Required) Not Employed	09/20/2023	\$50.00
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) _____		
Full Name Elizabeth West Mailing Address PO Box 40 City, State, Zip Code Pickwick Dam, TN 38365-0040 Name of Employer (Required) Not Employed	09/30/2023	\$50.00
Occupation (Required) Not Employed	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) _____		
Full Name Tor Kwembe Mailing Address 4100 Poplar Ave City, State, Zip Code Richton Park, IL 60471-1236 Name of Employer (Required) Jackson State University	09/30/2023	\$25.00
Occupation (Required) Professor	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) _____		
Full Name Nancy Neilsen Mailing Address 3412 PEMBERTON Blvd City, State, Zip Code Vicksburg, MS 39180 Name of Employer (Required) Not Employed	09/30/2023	\$1,000.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,000.00

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 Mittendorf Mailing Address 8002 Lanes End City, State, Zip Code Baton Rouge, LA 70810-2255 Name of Employer (Required) Southern Strategy Group	07/30/2023	\$1,500.00
Occupation (Required) Consultant	Aggregate year-to-date	\$4,000.00
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 Edwards Mailing Address 315 THREATT City, State, Zip Code Olive Branch, MS 38654 Name of Employer (Required) Self Employed	08/30/2023	\$250.00
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 A. La'Verne Edney Mailing Address 16 Arlington Park City, State, Zip Code Jackson, MS 39211-2952 Name of Employer (Required) Butler Snow LLP	08/21/2023	\$500.00
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 Mary Vi Risser Mailing Address 377 County Road 653B City, State, Zip Code Saltillo, MS 38866-5716 Name of Employer (Required) Not Employed	09/03/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,400.00

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 Warlick Mailing Address 100 Princess St City, State, Zip Code Alexandria, VA 22314-2325 Name of Employer (Required) White House Gift Center Occupation (Required) Retail	09/14/2023	\$1,000.00
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) _____ Full Name William Himel Mailing Address 5155 Madison St City, State, Zip Code Skokie, IL 60077-5233 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/15/2023	\$30.00
Aggregate year-to-date		\$285.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Emerson B. Robinson Jr Mailing Address 49 Eastbrooke St City, State, Zip Code Jackson, MS 39216-4714 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/25/2023	\$1,000.00
Aggregate year-to-date		\$3,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ Full Name Lele W. Gillespie Mailing Address 1013 S Lamar Blvd City, State, Zip Code Oxford, MS 38655-4739 Name of Employer (Required) University of Mississippi Occupation (Required) Project Coordinator	09/05/2023	\$250.00
Aggregate year-to-date		\$2,100.00

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 Linda Burgess Mailing Address 1423 Ortega Ave City, State, Zip Code Coral Gables, FL 33134-2251 Name of Employer (Required) Self Employed Occupation (Required) Artist	09/26/2023	\$500.00
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 Curtis Gray Mailing Address 37 County Road 317 City, State, Zip Code Heidelberg, MS 39439-3679 Name of Employer (Required) Jasper Occupation (Required) County Supervisor	08/06/2023	\$25.00
Aggregate year-to-date		\$235.00
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 Raleigh Byars Mailing Address 48 County Road 229 City, State, Zip Code Oxford, MS 38655-5800 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/27/2023	\$10.00
Aggregate year-to-date		\$885.00
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 Arweeda Coker Mailing Address 889 Mount Vernon Rd City, State, Zip Code Tupelo, MS 38804-7116 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/07/2023	\$250.00
Aggregate year-to-date		\$300.00

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 Juanita Boutin	09/07/2023	\$50.00
Mailing Address PO Box 400		
City, State, Zip Code Oxford, MS 38655-0400		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$850.00
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 Gail Linson	09/18/2023	\$25.00
Mailing Address 133 Northshore Pt		
City, State, Zip Code Madison, MS 39110-7272		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$350.00
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 Sheila Newtown	08/19/2023	\$15.00
Mailing Address 3893 County Route 10		
City, State, Zip Code De Peyster, NY 13633-3405		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$240.00
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 Groberg	09/20/2023	\$175.00
Mailing Address 1904 Newning Ave		
City, State, Zip Code Austin, TX 78704-4338		
Name of Employer (Required) SunChase		
Occupation (Required) Solar Developer	Aggregate year-to-date	\$1,175.00

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 Rob Dyson Mailing Address 2515 South Rd City, State, Zip Code Poughkeepsie, NY 12601-5473 Name of Employer (Required) Patterson Planning & Services Inc.	09/30/2023	\$10,000.00
Occupation (Required) Chairman	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 Harold D. Copeland Mailing Address PO Box 631145 City, State, Zip Code Houston, TX 77263-1145 Name of Employer (Required) Not Employed	08/30/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$297.50
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 B. Schwartz Mailing Address PO Box 3949 City, State, Zip Code Jackson, MS 39207-3949 Name of Employer (Required) Schwartz & Associates	08/30/2023	\$5,000.00
Occupation (Required) Attorney	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 Marjorie Cervantes Mailing Address 2109 Sunset Dr City, State, Zip Code Hattiesburg, MS 39402-2843 Name of Employer (Required) Not Employed	08/02/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$260.00

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 Margaret Thomas	08/12/2023	\$20.00
Mailing Address 153 Timberton Dr		
City, State, Zip Code Hattiesburg, MS 39401-8209		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$722.00
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 Walter Taylor	08/22/2023	\$250.00
Mailing Address 1054 County Road 36		
City, State, Zip Code Thaxton, MS 38871-9507		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,450.00
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 Faye Moss	08/22/2023	\$250.00
Mailing Address 802 Beazer Ln		
City, State, Zip Code Antioch, TN 37013-2336		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Carol Hopkins	08/03/2023	\$50.00
Mailing Address 711 Long Meadow Dr		
City, State, Zip Code Oxford, MS 38655-9742		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$233.00

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 Bert Ehrhardt Mailing Address 200 Windsor Rdg City, State, Zip Code Oxford, MS 38655-6265 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/03/2023	\$15.00
Aggregate year-to-date		\$2,115.00
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 Elvin Sunds Mailing Address 4000 W Tidewater Ln City, State, Zip Code Madison, MS 39110-8942 Name of Employer (Required) St. Francis of Assisi Church Occupation (Required) Clergy	08/14/2023	\$50.00
Aggregate year-to-date		\$780.00
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 Ygondine W. Sturdivant Mailing Address PO Box 230 City, State, Zip Code Glendora, MS 38928-0230 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/24/2023	\$5,000.00
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 David Rushing Mailing Address 102 N Sunflower Ave City, State, Zip Code Indianola, MS 38751-2552 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/14/2023	\$100.00
Aggregate year-to-date		\$714.60

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 Aileen Ajootian Mailing Address 403 Tyler Ave City, State, Zip Code Oxford, MS 38655-3821 Name of Employer (Required) University of Mississippi	08/26/2023	\$250.00
Occupation (Required) Professor	Aggregate year-to-date	\$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 Gloria Williamson Mailing Address 521 Holland Ave City, State, Zip Code Philadelphia, MS 39350-2437 Name of Employer (Required) Not Employed	09/16/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$7,010.00
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 Nan Tarlton Mailing Address 210 Meadowlane Dr City, State, Zip Code Madison, MS 39110-9611 Name of Employer (Required) Not Employed	09/27/2023	\$50.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,400.00
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 Dennis J. J. Erby Mailing Address PO Box 2811 City, State, Zip Code Columbus, MS 39704-2811 Name of Employer (Required) Not Employed	08/07/2023	\$1,000.00
Occupation (Required) Retired	Aggregate year-to-date	\$3,275.00

Reporting Period 7/30/2023 through 9/30/2023

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 Bailey Mailing Address 705 N Overlook Dr City, State, Zip Code Alexandria, VA 22305-1223 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/09/2023	\$50.00
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 Betsy Dickson Mailing Address 807 S 19th Ave City, State, Zip Code Hattiesburg, MS 39401-7464 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/29/2023	\$250.00
Aggregate year-to-date		\$425.00
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 Edson Griswold Mailing Address 1699 S Trenton St City, State, Zip Code Denver, CO 80231-5602 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/20/2023	\$30.00
Aggregate year-to-date		\$325.00
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 Byrd Mailing Address 701 N Fulton St City, State, Zip Code Iuka, MS 38852-2411 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$10.00
Aggregate year-to-date		\$235.00

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 Dennis Truax <hr/> Mailing Address 913 Southgate Dr <hr/> City, State, Zip Code Starkville, MS 39759-9434 <hr/> Name of Employer (Required) Self Employed	08/21/2023	\$100.00
Occupation (Required) Engineer	Aggregate year-to-date	\$1,671.00
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 Garry Pace <hr/> Mailing Address PO Box 10 <hr/> City, State, Zip Code Decatur, MS 39327-0010 <hr/> Name of Employer (Required) Newton HealthCare Managment	09/01/2023	\$1,000.00
Occupation (Required) Health Care Operations	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 Obie M. McNair Jr <hr/> Mailing Address 102 Cirencester Dr <hr/> City, State, Zip Code Ridgeland, MS 39157-9788 <hr/> Name of Employer (Required) Central Mississippi Medical Center	09/22/2023	\$100.00
Occupation (Required) Health Care	Aggregate year-to-date	\$525.00
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 Lori Karny <hr/> Mailing Address 6230 Wilshire Blvd <hr/> City, State, Zip Code Los Angeles, CA 90048-5126 <hr/> Name of Employer (Required) Self Employed	09/23/2023	\$10.00
Occupation (Required) Clinical Social Worker	Aggregate year-to-date	\$602.00

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 Rhonda Reich Mailing Address 22450 Rue La Terre City, State, Zip Code Kiln, MS 39556-6655 Name of Employer (Required) Not Employed	08/03/2023	\$50.00
Occupation (Required) Not Employed	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) _____		
Full Name Ellen Lake Mailing Address 4230 Lakeshore Ave City, State, Zip Code Oakland, CA 94610-1136 Name of Employer (Required) Not Employed	08/13/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$400.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Fred Banks Jr. Mailing Address 25 Saint Andrews Dr City, State, Zip Code Jackson, MS 39211-2438 Name of Employer (Required) Self Employed	08/23/2023	\$750.00
Occupation (Required) Attorney	Aggregate year-to-date	\$750.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Jean Fenwick Mailing Address 208 S Madison St City, State, Zip Code Kosciusko, MS 39090-3946 Name of Employer (Required) Not Employed	09/13/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$3,000.00

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 Belinda Watkins <hr/> Mailing Address 1983 E Arden Oaks Dr <hr/> City, State, Zip Code Germantown, TN 38139-5697 <hr/> Name of Employer (Required) Not Employed	08/14/2023	\$50.00
Occupation (Required) Not Employed	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 Carl Black <hr/> Mailing Address 1704 Poplar Blvd <hr/> City, State, Zip Code Jackson, MS 39202-2119 <hr/> Name of Employer (Required) Not Employed	08/24/2023	\$33.00
Occupation (Required) Retired	Aggregate year-to-date	\$233.00
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 Ron Coleman <hr/> Mailing Address 316 Quail Creek Dr <hr/> City, State, Zip Code Oxford, MS 38655-6108 <hr/> Name of Employer (Required) Not Employed	08/25/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00
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 Edgar James <hr/> Mailing Address 2726 Quebec St NW <hr/> City, State, Zip Code Washington, DC 20008-1223 <hr/> Name of Employer (Required) Not Employed	09/15/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00

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 Linda Foshee Mailing Address Not Employed City, State, Zip Code Hattiesburg, MS 39402 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/06/2023	\$10.00
Aggregate year-to-date		\$607.60
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Ann Rabalais Mailing Address 132 Sara Fox Dr City, State, Zip Code Brandon, MS 39047-5526 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/16/2023	\$34.00
Aggregate year-to-date		\$307.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Gail Stratton Mailing Address 956 Highway 7 N City, State, Zip Code Abbeville, MS 38601-9620 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/06/2023	\$250.00
Aggregate year-to-date		\$350.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Lana Richardson Mailing Address 10611 County Road 500 City, State, Zip Code Ripley, MS 38663-9199 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/27/2023	\$50.00
Aggregate year-to-date		\$655.00

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 Stephen Strnisha <hr/> Mailing Address 107 A Egret Landing Ct <hr/> City, State, Zip Code Surf City, NC 28445-9410 <hr/> Name of Employer (Required) Cleveland International Fund	08/17/2023	\$250.00
Occupation (Required) CEO	Aggregate year-to-date	\$750.00
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 Tor Kwembe <hr/> Mailing Address 4100 Poplar Ave <hr/> City, State, Zip Code Richton Park, IL 60471-1236 <hr/> Name of Employer (Required) Jackson State University	09/07/2023	\$25.00
Occupation (Required) Professor	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 C. Free <hr/> Mailing Address 1401 K St NW <hr/> City, State, Zip Code Washington, DC 20005-3464 <hr/> Name of Employer (Required) The Smith-Free Group	09/18/2023	\$500.00
Occupation (Required) Chairman	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 Mary J. Westerlund <hr/> Mailing Address 1201 Cowden Dr <hr/> City, State, Zip Code Amory, MS 38821-1306 <hr/> Name of Employer (Required) Not Employed	08/08/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$375.00

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 Jonathan Compretta Mailing Address 4254 Berlin Dr City, State, Zip Code Jackson, MS 39211-6017 Name of Employer (Required) Bernstein Litowitz Berger & Grossmann LLP	08/08/2023	\$1,000.00
Occupation (Required) Attorney	Aggregate year-to-date	\$3,000.00
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 Gambetta Mailing Address 130 Harvesters Sq City, State, Zip Code Tupelo, MS 38801-9510 Name of Employer (Required) Mueller Co.	09/09/2023	\$50.00
Occupation (Required) Engineer	Aggregate year-to-date	\$402.50
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 Greta Presley Mailing Address 182 Verona Ave City, State, Zip Code Nettleton, MS 38858-6004 Name of Employer (Required) HCA Healthcare	09/30/2023	\$100.00
Occupation (Required) Healthcare Communications	Aggregate year-to-date	\$352.40
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 Brandy Burnette Mailing Address 7069 Tudor Ln City, State, Zip Code Horn Lake, MS 38637-1259 Name of Employer (Required) Young Williams	08/31/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$216.00

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 Susan Weatherholt Mailing Address 207 Greenfield Pl City, State, Zip Code Brandon, MS 39047-9007 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/31/2023	\$100.00
Aggregate year-to-date		\$265.00
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 Hutto Mailing Address 62 Redfern Trl City, State, Zip Code Petal, MS 39465-9415 Name of Employer (Required) Self Employed Occupation (Required) Education Consultant	08/22/2023	\$30.00
Aggregate year-to-date		\$662.50
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 Carpenter Mailing Address PO Box 1101 City, State, Zip Code Grenada, MS 38902-1101 Name of Employer (Required) Carpenter Management Occupation (Required) Business Owner	08/03/2023	\$1,000.00
Aggregate year-to-date		\$1,100.00
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 Whouley Mailing Address 208 Centre St City, State, Zip Code Danvers, MA 01923-1341 Name of Employer (Required) Dewey Square Group Occupation (Required) Consultant	09/25/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00

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 Elise Gillespie Mailing Address 1013 S Lamar Blvd City, State, Zip Code Oxford, MS 38655-4739 Name of Employer (Required) University of Mississippi	08/25/2023	\$25.00
Occupation (Required) Administrative Assistant	Aggregate year-to-date	\$575.00
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 Peter Buttross Jr Mailing Address 206 S Rankin St City, State, Zip Code Natchez, MS 39120-3536 Name of Employer (Required) Not Employed	09/16/2023	\$25.00
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 Alan Arendale Mailing Address 345 Woodstone Rd City, State, Zip Code Clinton, MS 39056-4948 Name of Employer (Required) Cannon Toyota Vicksburg	08/16/2023	\$5.00
Occupation (Required) Sales Consultant	Aggregate year-to-date	\$230.00
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 Carl Cottingham Mailing Address 140 Lela Ln City, State, Zip Code Greenville, MS 38701-7760 Name of Employer (Required) Not Employed	09/06/2023	\$250.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00

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 Satnam L. Sethi Mailing Address 1554 W Peace St City, State, Zip Code Canton, MS 39046-5325 Name of Employer (Required) Self Employed Occupation (Required) Hospitality	09/06/2023	\$501.00
Aggregate year-to-date		\$1,652.00
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 Diane Irvin Mailing Address 4047 Wyandot St City, State, Zip Code Denver, CO 80211-2140 Name of Employer (Required) Strategic Programs, Inc. Occupation (Required) Corporate Secretary	08/17/2023	\$25.00
Aggregate year-to-date		\$433.00
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 Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/18/2023	\$14.96
Aggregate year-to-date		\$748.47
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 Graham Slakie Mailing Address 4706 Buckingham Dr City, State, Zip Code Chattanooga, TN 37421-1108 Name of Employer (Required) Regal Cinemas Occupation (Required) Usher	09/18/2023	\$61.40
Aggregate year-to-date		\$1,197.00

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 Dudley Olsson <hr/> Mailing Address 4170 Tanager Ct <hr/> City, State, Zip Code West Point, VA 23181-9366 <hr/> Name of Employer (Required) Not Employed	08/28/2023	\$500.00
Occupation (Required) Not Employed	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) _____		
Full Name Keith Johnson <hr/> Mailing Address PO Box 421 <hr/> City, State, Zip Code Nesbit, MS 38651-0421 <hr/> Name of Employer (Required) Not Employed	09/29/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,150.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Reuben V. Anderson <hr/> Mailing Address PO Box 290 <hr/> City, State, Zip Code Jackson, MS 39205-0290 <hr/> Name of Employer (Required) Phelps Dunbar	09/29/2023	\$1,000.00
Occupation (Required) Attorney	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) _____		
Full Name Billy R. Wiseman <hr/> Mailing Address PO Box 769 <hr/> City, State, Zip Code New Albany, MS 38652-0769 <hr/> Name of Employer (Required) Not Employed	09/19/2023	\$300.00
Occupation (Required) Retired	Aggregate year-to-date	\$500.00

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 Darrylenn Todd Mailing Address 3616 Roman Forest Dr City, State, Zip Code Southaven, MS 38672-6784 Name of Employer (Required) University of Tennessee Health Science Center Occupation (Required) Administrator	09/20/2023	\$100.00
Aggregate year-to-date		\$300.00
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 Jeffrey Blum Mailing Address 425 Riverside Dr City, State, Zip Code New York, NY 10025-7775 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$500.00
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 Suzanne Walsh Mailing Address 2725 White Wing Ln City, State, Zip Code West Palm Beach, FL 33409-2032 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/30/2023	\$25.00
Aggregate year-to-date		\$203.00
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 Stevenson Mailing Address 4173 Dawkins Farm Dr City, State, Zip Code Olive Branch, MS 38654-6428 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/30/2023	\$1,000.00
Aggregate year-to-date		\$1,000.00

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 Tomie Green Mailing Address 114 Pine Island Dr City, State, Zip Code Jackson, MS 39206-3234 Name of Employer (Required) Not Employed	09/10/2023	\$35.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$665.00
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 Brown Mailing Address 219 Carol Ln City, State, Zip Code Oxford, MS 38655-3403 Name of Employer (Required) Not Employed	08/11/2023	\$50.00
Occupation (Required) Retired	Aggregate year-to-date	\$800.00
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 Nan Tarlton Mailing Address 210 Meadowlane Dr City, State, Zip Code Madison, MS 39110-9611 Name of Employer (Required) Not Employed	08/21/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,400.00
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 Eugene Perrier Mailing Address 5540 Gibson Rd City, State, Zip Code Vicksburg, MS 39180-6318 Name of Employer (Required) Self Employed	08/31/2023	\$25.00
Occupation (Required) Attorney	Aggregate year-to-date	\$300.00

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 Rick Cleveland Mailing Address 3965 Council Cir City, State, Zip Code Jackson, MS 39206-5812 Name of Employer (Required) Self Employed Occupation (Required) Journalist	08/31/2023	\$50.00
Aggregate year-to-date		\$241.75
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 Ingram Mailing Address PO Box 369 City, State, Zip Code West Memphis, AR 72303-0369 Name of Employer (Required) Self Employed Occupation (Required) Attorney	09/11/2023	\$500.00
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 Bonnie Allen Mailing Address 7688 Highway 19 N City, State, Zip Code Collinsville, MS 39325-9390 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/12/2023	\$25.00
Aggregate year-to-date		\$285.00
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 Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/23/2023	\$25.00
Aggregate year-to-date		\$680.50

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 Christopher Neyland Mailing Address 120 Shoreline Dr City, State, Zip Code Madison, MS 39110-6828 Name of Employer (Required) Morgan & Morgan Occupation (Required) Attorney	08/03/2023	\$250.00
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 Angela Thomas Mailing Address 1060 E County Line Rd City, State, Zip Code Ridgeland, MS 39157-1900 Name of Employer (Required) Self Employed Occupation (Required) Author	08/23/2023	\$2,500.00
Aggregate year-to-date		\$3,500.00
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 Mary F. Taylor Mailing Address 2239 Greenbriar Dr City, State, Zip Code Jackson, MS 39211-6735 Name of Employer (Required) Self Employed Occupation (Required) Educational Consultant	08/23/2023	\$200.00
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 Maureen McKerns Mailing Address 813 42nd Ave City, State, Zip Code Gulfport, MS 39501-1451 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/13/2023	\$25.00
Aggregate year-to-date		\$400.00

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 Claire Davis Mailing Address 44714 Audubon Sq City, State, Zip Code Ashburn, VA 20147-6295 Name of Employer (Required) Not Employed	08/05/2023	\$500.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$930.00
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 Claiborne Barksdale Mailing Address 917 Old Taylor Rd City, State, Zip Code Oxford, MS 38655-4637 Name of Employer (Required) Not Employed	08/15/2023	\$500.00
Occupation (Required) Retired	Aggregate year-to-date	\$1,750.00
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 Dennis Truax Mailing Address 913 Southgate Dr City, State, Zip Code Starkville, MS 39759-9434 Name of Employer (Required) Self Employed	08/25/2023	\$100.00
Occupation (Required) Engineer	Aggregate year-to-date	\$1,671.00
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 Douglas Masterson Mailing Address 43 Palm Tree Loop City, State, Zip Code Petal, MS 39465-9251 Name of Employer (Required) University of Southern Mississippi	08/25/2023	\$25.00
Occupation (Required) Chemist	Aggregate year-to-date	\$565.00

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 Jo Durst Mailing Address 799 Pine Cir City, State, Zip Code Starkville, MS 39759-3729 Name of Employer (Required) Not Employed	09/05/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full Name Robert G. Mcinnis Mailing Address 2730 Clinton Tinnin Rd City, State, Zip Code Clinton, MS 39056-9524 Name of Employer (Required) McInnis Electric	09/16/2023	\$1,000.00
Occupation (Required) Contractor	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) _____		
Full Name Pin Ni Mailing Address 9 S Meadow Ct City, State, Zip Code South Barringto, IL 60010-9554 Name of Employer (Required) Wanxiang America Corporation	09/06/2023	\$10,000.00
Occupation (Required) President	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) _____		
Full Name Theresa Steinberger Mailing Address 4713 Forrest St City, State, Zip Code Moss Point, MS 39563-2413 Name of Employer (Required) Not Employed	08/07/2023	\$100.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$750.00

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 Melissa Roberson Mailing Address PO Box 85 City, State, Zip Code Taylor, MS 38673-0085 Name of Employer (Required) Not Employed Occupation (Required) Retired	09/07/2023	\$25.00
Aggregate year-to-date		\$300.00
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 Tomie Green Mailing Address 114 Pine Island Dr City, State, Zip Code Jackson, MS 39206-3234 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/18/2023	\$25.00
Aggregate year-to-date		\$665.00
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 Christopher Melin Mailing Address 14 The Battery City, State, Zip Code Orange Beach, AL 36561-3073 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	08/28/2023	\$2,500.00
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 Lora Travnicek Mailing Address 2668 Beach Blvd City, State, Zip Code Biloxi, MS 39531-4521 Name of Employer (Required) Not Employed Occupation (Required) Not Employed	09/29/2023	\$100.00
Aggregate year-to-date		\$500.00

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 Randy Patterson	08/29/2023	\$100.00
Mailing Address 1603 Sycamore St		
City, State, Zip Code Murray, KY 42071-2223		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$220.00
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 E. K. Pruitt	08/29/2023	\$50.00
Mailing Address 4217 Oakridge Dr		
City, State, Zip Code Jackson, MS 39216-3420		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$880.00

Reporting Period 7/30/2023 through 9/30/2023

ITEMIZED RECEIPTS - IN-KIND CONTRIBUTIONS

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)
Full Name Snackbar	08/17/2023
Mailing Address 721 N Lamar Blvd	Estimated Amount of In-Kind Contribution*
City, State, Zip Code Oxford, MS 38655-3210	
Name of Employer (Required)	\$1,322.00
Occupation (Required)	
In-Kind Contribution: Event Catering	
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)
Full Name John C. Henegan	08/25/2023
Mailing Address 1921 E Bourne Pl	Estimated Amount of In-Kind Contribution*
City, State, Zip Code Jackson, MS 39211-6714	
Name of Employer (Required) Not Employed	\$3,287.27
Occupation (Required) Retired	
In-Kind Contribution: Event Catering	

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

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Isaac Lampner		
Mailing Address 945 Mitchell St	09/01/2023	\$2,798.60
City, State, Zip Code Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$50,137.78
Stripe		
Mailing Address 3180 18th St	09/11/2023	\$31.31
City, State, Zip Code San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$771.69
Hal & Mal's		
Mailing Address 200 Commerce St	09/21/2023	\$1,017.50
City, State, Zip Code Jackson, MS 39201-4420		
Purpose of Disbursement (Optional) Catering	Aggregate year-to-date	\$1,584.88
Old Town Media		
Mailing Address 114 Quay St	08/25/2023	\$309,818.00
City, State, Zip Code Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$3,808,344.00
Walmart		
Mailing Address 702 SW 8th St	09/27/2023	\$141.69
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address 1111 Expedia Group Way W	08/08/2023	\$1,427.88
City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,467.36
ActBlue Technical Services		
Mailing Address PO Box 382110	07/31/2023	\$1,164.72
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$29,206.03
Mark Rennie		
Mailing Address 3203 Nuttree Woods Dr	09/01/2023	\$2,199.07
City, State, Zip Code Midlothian, VA 23112-4503		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$9,930.73
Hilton Hotels		
Mailing Address 7930 Jones Branch Dr	07/31/2023	\$206.08
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,705.36
Bumperactive		
Mailing Address 5907 Burnet Rd	09/22/2023	\$15,683.00
City, State, Zip Code Austin, TX 78757-3224		
Purpose of Disbursement (Optional) Store Overhead	Aggregate year-to-date	\$26,627.24

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Love's Travel Stops		
Mailing Address 2202 W Hefner Rd	09/18/2023	\$24.67
City, State, Zip Code Oklahoma City, OK 73120-7604		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$266.64
Adam Beyer		
Mailing Address 3501 E Frontage Rd	09/01/2023	\$160.48
City, State, Zip Code Tampa, FL 33607-1723		
Purpose of Disbursement (Optional) Payroll Fees	Aggregate year-to-date	\$261,579.77
Adam Beyer		
Mailing Address 4288 N Gloster St	08/15/2023	\$2,974.48
City, State, Zip Code Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$38,021.67
KEP Strategies, LLC		
Mailing Address PO Box 450268	08/15/2023	\$7,500.00
City, State, Zip Code Atlanta, GA 31145-0268		
Purpose of Disbursement (Optional) Fundraising Consulting	Aggregate year-to-date	\$70,108.46
Morgan Benjamin		
Mailing Address 4212 28th St	09/15/2023	\$1,812.30
City, State, Zip Code Long Island City, NY 11101-6258		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$14,778.18

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Sam's Club		
Mailing Address 2101 SE Simple Savings Dr	09/06/2023	\$65.62
City, State, Zip Code Bentonville, AR 72712-4304		
Purpose of Disbursement (Optional) Catering	Aggregate year-to-date	\$267.16
Stefon Ward		
Mailing Address 138 Brookwood Ln	09/27/2023	\$279.01
City, State, Zip Code Hattiesburg, MS 39401-5763		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$5,149.27
Shell Oil Co		
Mailing Address PO Box 2463	09/11/2023	\$45.84
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Battleaxe Digital		
Mailing Address 1405 Florida Ave NW	08/15/2023	\$13,504.88
City, State, Zip Code Washington, DC 20009-5801		
Purpose of Disbursement (Optional) Digital Consulting	Aggregate year-to-date	\$180,667.40
Nicholas Eden		
Mailing Address 1106 Woodward Ave	08/15/2023	\$1,363.71
City, State, Zip Code Gulfport, MS 39501-2469		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,330.82

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Cynthia Cook		
Mailing Address 141 Mapleton Rd	09/15/2023	\$1,936.43
City, State, Zip Code Grosse Pointe Farms, MI 48236-3614		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,936.43
Chick-Fil-A		
Mailing Address 5200 Buffington Rd	09/27/2023	\$29.46
City, State, Zip Code Atlanta, GA 30349-2945		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$253.98
Adam Beyer		
Mailing Address 4288 N Gloster St	08/01/2023	\$2,974.48
City, State, Zip Code Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$38,021.67
Shell Oil Co		
Mailing Address PO Box 2463	09/13/2023	\$54.00
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Isaac Lampner		
Mailing Address 945 Mitchell St	08/15/2023	\$364.20
City, State, Zip Code Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$50,137.78

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shawn Patterson	08/15/2023	\$2,974.48
Mailing Address 1160 1st St NE		
City, State, Zip Code Washington, DC 20002-4799		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$36,264.54
Walker Lake	09/15/2023	\$712.03
Mailing Address 1850 Highland Ter		
City, State, Zip Code Jackson, MS 39211-5718		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,224.57
Walmart	09/29/2023	\$43.19
Mailing Address 702 SW 8th St		
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
DeVon Gray	08/01/2023	\$401.72
Mailing Address 125 Clarence Dr		
City, State, Zip Code Gulfport, MS 39503-3229		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$401.72
Shell Oil Co	09/21/2023	\$38.01
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stefon Ward		
Mailing Address 138 Brookwood Ln	08/15/2023	\$1,623.42
City, State, Zip Code Hattiesburg, MS 39401-5763		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,149.27
Full Name Ron Owens	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3545 Mitchell Rd	09/15/2023	\$3,935.75
City, State, Zip Code Tupelo, MS 38801-9616		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$65,296.21
Full Name Amalgamated Bank	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 275 7th Ave	09/27/2023	\$347.20
City, State, Zip Code New York, NY 10001-6708		
Purpose of Disbursement (Optional) Bank Fee	Aggregate year-to-date	\$1,086.95
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	08/18/2023	\$45.44
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Shawn Patterson	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1160 1st St NE	08/01/2023	\$2,974.48
City, State, Zip Code Washington, DC 20002-4799		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$36,264.54

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Bumperactive		
Mailing Address 5907 Burnet Rd	08/03/2023	\$477.18
City, State, Zip Code Austin, TX 78757-3224		
Purpose of Disbursement (Optional) Store Overhead	Aggregate year-to-date	\$26,627.24
Amazon Web Services		
Mailing Address 2121 7th Ave	08/03/2023	\$120.02
City, State, Zip Code Seattle, WA 98121-5114		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$426.49
Trey Till		
Mailing Address 105 Morning Glory Dr	09/15/2023	\$1,812.30
City, State, Zip Code Madison, MS 39110-7898		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$7,655.82
Expedia.com		
Mailing Address 1111 Expedia Group Way W	09/27/2023	\$340.79
City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,467.36
The Strategy Group LLC		
Mailing Address 500 W Madison St	08/01/2023	\$20,266.88
City, State, Zip Code Chicago, IL 60661-2559		
Purpose of Disbursement (Optional) Printing of Campaign Materials	Aggregate year-to-date	\$26,266.88

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Payroll Data Processing		
Mailing Address		
3501 E Frontage Rd	09/15/2023	\$30,412.94
City, State, Zip Code		
Tampa, FL 33607-1723		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$261,579.77
Payroll Taxes		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	09/05/2023	\$46.10
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,216.10
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Holiday Inn		
Mailing Address		
3 Ravinia Dr	09/25/2023	\$152.48
City, State, Zip Code		
Atlanta, GA 30346-2118		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$965.68
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ExxonMobil		
Mailing Address		
5959 Las Colinas Blvd	08/18/2023	\$70.77
City, State, Zip Code		
Irving, TX 75039-4202		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$466.89
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Buffalo Wild Wings		
Mailing Address		
5500 Wayzata Blvd	09/08/2023	\$300.05
City, State, Zip Code		
Minneapolis, MN 55416-1237		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$502.84
Staff Meals		

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	09/20/2023	\$95.95
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Noah Britt		
Mailing Address 1537 S 11th St	09/01/2023	\$675.33
City, State, Zip Code Ocean Springs, MS 39564-9568		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,389.36
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Comfort Inn		
Mailing Address 10750 Columbia Pike	09/05/2023	\$138.33
City, State, Zip Code Silver Spring, MD 20901-4402		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$755.93
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
NGP VAN		
Mailing Address 1101 15th St NW	09/07/2023	\$1,953.55
City, State, Zip Code Washington, DC 20005-5006		
Purpose of Disbursement (Optional) Database Services	Aggregate year-to-date	\$16,256.05
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	08/17/2023	\$5.73
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chick-Fil-A	08/18/2023	\$34.14
Mailing Address 5200 Buffington Rd		
City, State, Zip Code Atlanta, GA 30349-2945		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$253.98
Shyanne Davis	09/01/2023	\$1,816.09
Mailing Address 1020 Morris Davis Rd		
City, State, Zip Code Mccomb, MS 39648-2679		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,974.02
Declaration Media Group	09/11/2023	\$70,287.47
Mailing Address 1152 15th St NW		
City, State, Zip Code Washington, DC 20005-1723		
Purpose of Disbursement (Optional) Video Production	Aggregate year-to-date	\$222,861.48
Bradley Palmer	08/04/2023	\$851.84
Mailing Address PO Box 925		
City, State, Zip Code New Albany, MS 38652-0925		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$5,933.64
Dollar General	08/15/2023	\$17.01
Mailing Address 100 Mission Rdg		
City, State, Zip Code Goodlettsville, TN 37072-2171		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$213.62

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address PO Box 2463	09/27/2023	\$16.85
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
ActBlue Technical Services		
Mailing Address PO Box 382110	08/21/2023	\$873.50
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$29,206.03
Jake Laves		
Mailing Address 699 Nation Hills Dr	09/01/2023	\$2,974.48
City, State, Zip Code Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$37,974.03
Numero		
Mailing Address 200 Spectrum Center Dr	08/14/2023	\$1,006.04
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Walmart		
Mailing Address 702 SW 8th St	09/27/2023	\$82.15
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address 1111 Expedia Group Way W	08/08/2023	\$349.42
City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,467.36
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Bradley Palmer		
Mailing Address PO Box 925	09/08/2023	\$738.08
City, State, Zip Code New Albany, MS 38652-0925		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$5,933.64
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hampton Inn		
Mailing Address 7930 Jones Branch Dr	08/29/2023	\$13.32
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,348.99
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Love's Travel Stops		
Mailing Address 2202 W Hefner Rd	09/20/2023	\$37.48
City, State, Zip Code Oklahoma City, OK 73120-7604		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$266.64
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Angelo Ruiz		
Mailing Address 127 S Roach St	09/01/2023	\$1,994.23
City, State, Zip Code Jackson, MS 39201-2916		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,544.64

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Bumperactive		
Mailing Address 5907 Burnet Rd	09/22/2023	\$1,309.12
City, State, Zip Code Austin, TX 78757-3224		
Purpose of Disbursement (Optional) Store Overhead	Aggregate year-to-date	\$26,627.24
Full Name Holiday Inn	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3 Ravinia Dr	08/25/2023	\$169.40
City, State, Zip Code Atlanta, GA 30346-2118		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$965.68
Full Name Old Town Media	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 114 Quay St	09/08/2023	\$362,732.00
City, State, Zip Code Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$3,808,344.00
Full Name Kitchen 107	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 107 Pecan Ave	08/14/2023	\$2,587.50
City, State, Zip Code Nettleton, MS 38858-5930		
Purpose of Disbursement (Optional) Catering	Aggregate year-to-date	\$3,137.50
Full Name Andrew Buehrer	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3249 Pepper Ridge Dr	08/15/2023	\$1,812.30
City, State, Zip Code Maumee, OH 43537-9697		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$11,386.47

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Adam Beyer		
Mailing Address 4288 N Gloster St	09/15/2023	\$2,974.48
City, State, Zip Code Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$38,021.67
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Rally by Relentless PBC		
Mailing Address 2093 Philadelphia Pike	09/25/2023	\$175,000.00
City, State, Zip Code Claymont, DE 19703-2424		
Purpose of Disbursement (Optional) Organizing Consulting	Aggregate year-to-date	\$175,000.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address PO Box 2463	08/29/2023	\$62.40
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address PO Box 2463	09/11/2023	\$32.52
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
KEP Strategies, LLC		
Mailing Address PO Box 450268	09/05/2023	\$7,500.00
City, State, Zip Code Atlanta, GA 31145-0268		
Purpose of Disbursement (Optional) Fundraising Consulting	Aggregate year-to-date	\$70,108.46

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Aaron Facio-Cortes	08/15/2023	\$2,086.41
Mailing Address 27006 Fordham Dr		
City, State, Zip Code Wesley Chapel, FL 33544-8730		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,614.63
Nicholas Cosmo	09/15/2023	\$2,320.98
Mailing Address 202 Milford St		
City, State, Zip Code Tupelo, MS 38801-4687		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$11,836.50
Andrew Buehrer	08/01/2023	\$1,812.30
Mailing Address 3249 Pepper Ridge Dr		
City, State, Zip Code Maumee, OH 43537-9697		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$11,386.47
Greta Presley	08/01/2023	\$560.00
Mailing Address 182 Verona Ave		
City, State, Zip Code Nettleton, MS 38858-6004		
Purpose of Disbursement (Optional) Reimbursement - Event Sponsorship, Office Cleaning	Aggregate year-to-date	\$16,544.69
Shell Oil Co	09/13/2023	\$78.85
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Trey Till		
Mailing Address		
105 Morning Glory Dr	08/15/2023	\$278.10
City, State, Zip Code		
Madison, MS 39110-7898		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$7,655.82
Reimbursement - Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Greta Presley		
Mailing Address		
182 Verona Ave	08/15/2023	\$1,246.67
City, State, Zip Code		
Nettleton, MS 38858-6004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$16,544.69
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Isaac Lampner		
Mailing Address		
945 Mitchell St	09/15/2023	\$2,798.60
City, State, Zip Code		
Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$50,137.78
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Pollan Promos		
Mailing Address		
PO Box 1675	08/18/2023	\$1,500.00
City, State, Zip Code		
Starkville, MS 39760-1675		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,500.00
Rent		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Benjamin Hunt		
Mailing Address		
510 S Broadway St	08/01/2023	\$2,167.10
City, State, Zip Code		
Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$25,439.20
Salary		

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
NGP VAN		
Mailing Address 1101 15th St NW	08/11/2023	\$1,953.54
City, State, Zip Code Washington, DC 20005-5006		
Purpose of Disbursement (Optional) Database Services	Aggregate year-to-date	\$16,256.05
Full Name Payroll Data Processing		
Mailing Address 3501 E Frontage Rd	08/15/2023	\$135.73
City, State, Zip Code Tampa, FL 33607-1723		
Purpose of Disbursement (Optional) Payroll Fees	Aggregate year-to-date	\$261,579.77
Full Name Numero		
Mailing Address 200 Spectrum Center Dr	09/05/2023	\$1,143.24
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Full Name Amanda Pagoaga		
Mailing Address 5341 Melville Cv	09/15/2023	\$1,617.38
City, State, Zip Code Olive Branch, MS 38654-8363		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,259.89
Full Name Expedia.com		
Mailing Address 1111 Expedia Group Way W	09/26/2023	-\$200.47
City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel Refund	Aggregate year-to-date	\$5,467.36

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	08/07/2023	\$66.74
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Greta Presley	Date (Mo., Day, Year) 08/01/2023	Amount of each disbursement this period \$1,994.23
Mailing Address 182 Verona Ave		
City, State, Zip Code Nettleton, MS 38858-6004		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,544.69
Full Name Woodmont Public Strategies, LLC	Date (Mo., Day, Year) 08/03/2023	Amount of each disbursement this period \$500.00
Mailing Address 2018 Medical Center Pkwy		
City, State, Zip Code Murfreesboro, TN 37129-3265		
Purpose of Disbursement (Optional) Political Strategy Consultant	Aggregate year-to-date	\$21,209.72
Full Name Daniel Trimble	Date (Mo., Day, Year) 09/15/2023	Amount of each disbursement this period \$1,617.38
Mailing Address 8 Iris Ln		
City, State, Zip Code Redding, CT 06896-2112		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$7,439.89
Full Name Expedia.com	Date (Mo., Day, Year) 09/27/2023	Amount of each disbursement this period \$242.74
Mailing Address 1111 Expedia Group Way W		
City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,467.36

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
AT&T		
Mailing Address		
208 S Akard St	08/28/2023	\$100.00
City, State, Zip Code		
Dallas, TX 75202-4206		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$252.50
Phones		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
C. A. R. E.		
Mailing Address		
104 Court Sq	09/11/2023	\$250.00
City, State, Zip Code		
Charleston, MS 38921-2359		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$250.00
Event Space Rental		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Josh Daniel Law, PLLC		
Mailing Address		
398 E Main St	09/12/2023	\$8,035.50
City, State, Zip Code		
Tupelo, MS 38804-4037		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$15,493.50
Legal Services		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Payroll Data Processing		
Mailing Address		
3501 E Frontage Rd	09/15/2023	\$174.23
City, State, Zip Code		
Tampa, FL 33607-1723		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$261,579.77
Payroll Fees		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	09/05/2023	\$58.87
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,216.10
Office Supplies		

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Holiday Inn		
Mailing Address 3 Ravinia Dr	09/25/2023	\$152.48
City, State, Zip Code Atlanta, GA 30346-2118		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$965.68
Full Name Candlewood Suites	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3 Ravinia Dr	08/07/2023	\$103.45
City, State, Zip Code Atlanta, GA 30346-2121		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$206.90
Full Name ActBlue Technical Services	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 382110	08/09/2023	\$991.21
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$29,206.03
Full Name Walmart	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 702 SW 8th St	09/20/2023	\$348.76
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Full Name Andrew Buehrer	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3249 Pepper Ridge Dr	09/01/2023	\$1,812.30
City, State, Zip Code Maumee, OH 43537-9697		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$11,386.47

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	08/15/2023	\$10.67
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Comfort Inn		
Mailing Address 10750 Columbia Pike	09/05/2023	\$138.33
City, State, Zip Code Silver Spring, MD 20901-4402		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$755.93
Numero		
Mailing Address 200 Spectrum Center Dr	09/25/2023	\$41.98
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Stripe		
Mailing Address 3180 18th St	09/25/2023	\$18.61
City, State, Zip Code San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$771.69
Entergy		
Mailing Address PO Box 8105	09/07/2023	\$41.38
City, State, Zip Code Baton Rouge, LA 70891-8105		
Purpose of Disbursement (Optional) Utilities	Aggregate year-to-date	\$395.20

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Circle K		
Mailing Address 1130 W Warner Rd	08/18/2023	\$37.59
City, State, Zip Code Tempe, AZ 85284-2816		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$278.84
Full Name Aaron Facio-Cortes	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 27006 Fordham Dr	09/01/2023	\$1,994.23
City, State, Zip Code Wesley Chapel, FL 33544-8730		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,614.63
Full Name Ethan Cox	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3614 N Fremont St	09/13/2023	\$3,513.45
City, State, Zip Code Chicago, IL 60613-4372		
Purpose of Disbursement (Optional) Reimbursement - Travel, Rallies, Phones	Aggregate year-to-date	\$31,666.54
Full Name Will Palmer	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 925	08/04/2023	\$145.00
City, State, Zip Code New Albany, MS 38652-0925		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$841.00
Full Name Dollar General	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 100 Mission Rdg	08/15/2023	\$13.91
City, State, Zip Code Goodlettsville, TN 37072-2171		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$213.62

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	08/07/2023	\$721.72
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	09/28/2023	\$56.77
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Stripe	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3180 18th St	07/31/2023	\$29.18
City, State, Zip Code San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$771.69
Full Name Scale to Win	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 13742 Harper St	08/21/2023	\$2,573.79
City, State, Zip Code Santa Ana, CA 92703-1419		
Purpose of Disbursement (Optional) Digital Consulting	Aggregate year-to-date	\$9,873.00
Full Name Stripe	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3180 18th St	08/21/2023	\$11.53
City, State, Zip Code San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$771.69

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Timmanisha Macon		
Mailing Address 19311 Crestwick St	09/01/2023	\$1,823.09
City, State, Zip Code Saucier, MS 39574-8031		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,597.45
Hampton Inn		
Mailing Address 7930 Jones Branch Dr	09/11/2023	\$41.07
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,348.99
Will Palmer		
Mailing Address PO Box 925	09/11/2023	\$188.50
City, State, Zip Code New Albany, MS 38652-0925		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$841.00
Google		
Mailing Address 1600 Amphitheatre Pkwy	08/02/2023	\$288.20
City, State, Zip Code Mountain View, CA 94043-1351		
Purpose of Disbursement (Optional) Web Hosting	Aggregate year-to-date	\$1,821.27
ActBlue Technical Services		
Mailing Address PO Box 382110	08/07/2023	\$293.30
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$29,206.03

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	09/28/2023	\$53.98
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Numero		
Mailing Address 200 Spectrum Center Dr	08/01/2023	\$39.95
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Shinitra Russell		
Mailing Address 1185 Collier Rd NW	09/01/2023	\$2,320.98
City, State, Zip Code Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$24,030.14
United Healthcare		
Mailing Address PO Box 94017	09/22/2023	\$14,165.78
City, State, Zip Code Palatine, IL 60094-4017		
Purpose of Disbursement (Optional) Health Insurance	Aggregate year-to-date	\$56,545.16
Holiday Inn		
Mailing Address 3 Ravinia Dr	08/25/2023	\$175.90
City, State, Zip Code Atlanta, GA 30346-2118		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$965.68

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	08/30/2023	\$77.18
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Duncan Cady	Date (Mo., Day, Year) 08/15/2023	Amount of each disbursement this period \$1,582.62
Mailing Address 325 Frederick St		
City, State, Zip Code San Francisco, CA 94117-3913		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,975.18
Full Name Noah Britt	Date (Mo., Day, Year) 09/15/2023	Amount of each disbursement this period \$714.03
Mailing Address 1537 S 11th St		
City, State, Zip Code Ocean Springs, MS 39564-9568		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,389.36
Full Name The Kroger Co.	Date (Mo., Day, Year) 08/16/2023	Amount of each disbursement this period \$54.13
Mailing Address 1014 Vine St		
City, State, Zip Code Cincinnati, OH 45202-1141		
Purpose of Disbursement (Optional) Catering	Aggregate year-to-date	\$1,239.61
Full Name Shell Oil Co	Date (Mo., Day, Year) 09/11/2023	Amount of each disbursement this period \$57.16
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Switchboard Public Benefit Corp.	08/15/2023	\$4,833.56
Mailing Address 195 Binney St		
City, State, Zip Code Cambridge, MA 02142-1095		
Purpose of Disbursement (Optional) Digital Fundraising	Aggregate year-to-date	\$41,293.85
Benjamin Hunt	08/15/2023	\$2,167.10
Mailing Address 510 S Broadway St		
City, State, Zip Code Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$25,439.20
Ethan Cox	09/15/2023	\$1,994.23
Mailing Address 3614 N Fremont St		
City, State, Zip Code Chicago, IL 60613-4372		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$31,666.54
Office Depot	08/17/2023	\$14.99
Mailing Address 6600 N Military Trl		
City, State, Zip Code Boca Raton, FL 33496-2434		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$286.39
Duncan Cady	08/01/2023	\$592.99
Mailing Address 325 Frederick St		
City, State, Zip Code San Francisco, CA 94117-3913		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,975.18

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	09/14/2023	\$66.02
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Nicholas Cosmo	Date (Mo., Day, Year) 08/15/2023	Amount of each disbursement this period \$231.60
Mailing Address 202 Milford St		
City, State, Zip Code Tupelo, MS 38801-4687		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$11,836.50
Full Name Mark Rennie	Date (Mo., Day, Year) 08/15/2023	Amount of each disbursement this period \$1,582.62
Mailing Address 3203 Nuttree Woods Dr		
City, State, Zip Code Midlothian, VA 23112-4503		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$9,930.73
Full Name Jake Laves	Date (Mo., Day, Year) 09/15/2023	Amount of each disbursement this period \$2,974.48
Mailing Address 699 Nation Hills Dr		
City, State, Zip Code Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$37,974.03
Full Name Numero	Date (Mo., Day, Year) 07/30/2023	Amount of each disbursement this period \$746.47
Mailing Address 200 Spectrum Center Dr		
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Snackbar		
Mailing Address 721 N Lamar Blvd	09/20/2023	\$1,000.00
City, State, Zip Code Oxford, MS 38655-3210		
Purpose of Disbursement (Optional) Catering	Aggregate year-to-date	\$1,000.00
Full Name Jordan Kelley	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 8364 Barton Dr	08/01/2023	\$2,320.98
City, State, Zip Code Strongsville, OH 44149-1017		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$21,497.90
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	07/31/2023	\$49.55
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name ActBlue Technical Services	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 382110	09/11/2023	\$836.84
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$29,206.03
Full Name Payroll Data Processing	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3501 E Frontage Rd	08/15/2023	\$26,161.90
City, State, Zip Code Tampa, FL 33607-1723		
Purpose of Disbursement (Optional) Payroll Taxes	Aggregate year-to-date	\$261,579.77

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shawn Patterson		
Mailing Address 1160 1st St NE	09/15/2023	\$2,974.48
City, State, Zip Code Washington, DC 20002-4799		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$36,264.54
Expedia.com		
Mailing Address 1111 Expedia Group Way W	09/26/2023	-\$200.47
City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel Refund	Aggregate year-to-date	\$5,467.36
Angelo Ruiz		
Mailing Address 127 S Roach St	08/01/2023	\$1,994.23
City, State, Zip Code Jackson, MS 39201-2916		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,544.64
United States Postal Service		
Mailing Address 475 Lenfant Plz SW	09/11/2023	\$16.84
City, State, Zip Code Washington, DC 20260-0004		
Purpose of Disbursement (Optional) Postage	Aggregate year-to-date	\$2,376.24
MBA Consulting Group		
Mailing Address 611 Pennsylvania Ave SE	08/03/2023	\$10,100.00
City, State, Zip Code Washington, DC 20003-4303		
Purpose of Disbursement (Optional) Compliance Services	Aggregate year-to-date	\$70,460.00

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Signaturez		
Mailing Address 224 S Main St	08/24/2023	\$250.00
City, State, Zip Code Yazoo City, MS 39194-4010		
Purpose of Disbursement (Optional) Event Space Rental	Aggregate year-to-date	\$250.00
Full Name Michael Waller	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 103 Redbud Dr	09/15/2023	\$2,099.58
City, State, Zip Code Hendersonville, TN 37075-3982		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,293.91
Full Name ExxonMobil	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5959 Las Colinas Blvd	09/25/2023	\$86.65
City, State, Zip Code Irving, TX 75039-4202		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$466.89
Full Name AT&T	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 208 S Akard St	08/28/2023	\$100.00
City, State, Zip Code Dallas, TX 75202-4206		
Purpose of Disbursement (Optional) Phones	Aggregate year-to-date	\$252.50
Full Name Battleaxe Digital	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1405 Florida Ave NW	09/18/2023	\$52,614.08
City, State, Zip Code Washington, DC 20009-5801		
Purpose of Disbursement (Optional) Digital Consulting	Aggregate year-to-date	\$180,667.40

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services	08/29/2023	\$1,654.18
Mailing Address PO Box 382110		
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$29,206.03
Full Name Battleaxe Digital Mailing Address 1405 Florida Ave NW City, State, Zip Code Washington, DC 20009-5801	09/12/2023	\$14,457.92
Purpose of Disbursement (Optional) Digital Consulting	Aggregate year-to-date	\$180,667.40
Full Name Walmart Mailing Address 702 SW 8th St City, State, Zip Code Bentonville, AR 72716-6209	09/05/2023	\$160.22
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Full Name Holiday Inn Mailing Address 3 Ravinia Dr City, State, Zip Code Atlanta, GA 30346-2118	09/26/2023	\$157.71
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$965.68
Full Name Candlewood Suites Mailing Address 3 Ravinia Dr City, State, Zip Code Atlanta, GA 30346-2121	08/07/2023	\$103.45
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$206.90

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Donohoe Partners, Inc.		
Mailing Address 1250 Connecticut Ave NW	09/20/2023	\$120,000.00
City, State, Zip Code Washington, DC 20036-2657		
Purpose of Disbursement (Optional) Field Consulting	Aggregate year-to-date	\$120,000.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Duncan Cady		
Mailing Address 325 Frederick St	09/01/2023	\$2,199.07
City, State, Zip Code San Francisco, CA 94117-3913		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,975.18
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	08/21/2023	\$9.56
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	09/21/2023	\$17.80
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Morgan Benjamin		
Mailing Address 4212 28th St	09/12/2023	\$1,161.54
City, State, Zip Code Long Island City, NY 11101-6258		
Purpose of Disbursement (Optional) Reimbursement - Travel, Printing, Event Supplies	Aggregate year-to-date	\$14,778.18

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Circle K		
Mailing Address 1130 W Warner Rd	08/28/2023	\$78.23
City, State, Zip Code Tempe, AZ 85284-2816		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$278.84
Full Name Rashard Farlin	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 105 Doleac Dr	09/01/2023	\$526.40
City, State, Zip Code Hattiesburg, MS 39401-3121		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$526.40
Full Name Subway	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 325 Sub Way	09/22/2023	\$194.14
City, State, Zip Code Milford, CT 06461-3081		
Purpose of Disbursement (Optional) Event Catering	Aggregate year-to-date	\$242.19
Full Name London and Stetelman Inc	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3906 Hardy St	09/05/2023	\$1,198.00
City, State, Zip Code Hattiesburg, MS 39402-1684		
Purpose of Disbursement (Optional) Rent	Aggregate year-to-date	\$5,219.00
Full Name Phillip Baulch	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 425 Highway 6	08/19/2023	\$350.00
City, State, Zip Code Nettleton, MS 38858-9561		
Purpose of Disbursement (Optional) Event Space Rental	Aggregate year-to-date	\$350.00

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jefferson Stevens, LLC	08/21/2023	\$1,299.00
Mailing Address 5907 Baxter Dr		
City, State, Zip Code Jackson, MS 39211-3319		
Purpose of Disbursement (Optional) Political Strategy Consultant	Aggregate year-to-date	\$45,003.89
Julie McDermott	09/01/2023	\$2,073.82
Mailing Address 1119 Bratton Rd		
City, State, Zip Code New Albany, MS 38652-9328		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$12,898.83
Hilton Hotels	09/21/2023	\$322.56
Mailing Address 7930 Jones Branch Dr		
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,705.36
ALG Polling, Inc.	08/28/2023	\$23,600.00
Mailing Address 260 Commerce St		
City, State, Zip Code Montgomery, AL 36104-2546		
Purpose of Disbursement (Optional) Research Consultant	Aggregate year-to-date	\$245,900.00
Hampton Inn	08/28/2023	\$167.86
Mailing Address 7930 Jones Branch Dr		
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,348.99

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services	09/18/2023	\$969.12
Mailing Address PO Box 382110		
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$29,206.03
Walmart	09/28/2023	\$39.32
Mailing Address 702 SW 8th St		
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Numero	09/28/2023	\$641.64
Mailing Address 200 Spectrum Center Dr		
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Tai Sims	09/01/2023	\$2,484.86
Mailing Address 5049 Wishing Well Dr		
City, State, Zip Code Grand Blanc, MI 48439-4239		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$7,454.58
Hotel 27	08/24/2023	\$294.80
Mailing Address 211 S Walnut St		
City, State, Zip Code Greenville, MS 38701-4004		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$294.80

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	09/27/2023	\$664.61
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Full Name Alma Walls	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3887 Kenton Dr	09/18/2023	\$1,000.00
City, State, Zip Code Southaven, MS 38672-7225		
Purpose of Disbursement (Optional) Contribution Refund	Aggregate year-to-date	\$1,000.00
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	08/31/2023	\$86.67
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Larry Campbell	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Colony Park Dr	08/15/2023	\$1,021.21
City, State, Zip Code Pearl, MS 39208-6369		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,071.61
Full Name Andrew Buehrer	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3249 Pepper Ridge Dr	09/15/2023	\$1,812.30
City, State, Zip Code Maumee, OH 43537-9697		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$11,386.47

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Nick Wallace Culinary		
Mailing Address 222 North St	08/07/2023	\$432.00
City, State, Zip Code Jackson, MS 39201-1808		
Purpose of Disbursement (Optional) Event Catering	Aggregate year-to-date	\$432.00
The Kroger Co.		
Mailing Address 1014 Vine St	08/28/2023	\$48.76
City, State, Zip Code Cincinnati, OH 45202-1141		
Purpose of Disbursement (Optional) Catering	Aggregate year-to-date	\$1,239.61
Shell Oil Co		
Mailing Address PO Box 2463	09/11/2023	\$51.65
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Scale to Win		
Mailing Address 13742 Harper St	08/15/2023	\$4,192.62
City, State, Zip Code Santa Ana, CA 92703-1419		
Purpose of Disbursement (Optional) Digital Consulting	Aggregate year-to-date	\$9,873.00
Jordan Kelley		
Mailing Address 8364 Barton Dr	08/15/2023	\$2,445.29
City, State, Zip Code Strongsville, OH 44149-1017		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$21,497.90

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Aaron Facio-Cortes	09/15/2023	\$2,215.64
Mailing Address 27006 Fordham Dr		
City, State, Zip Code Wesley Chapel, FL 33544-8730		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,614.63
Office Depot	08/18/2023	\$3.91
Mailing Address 6600 N Military Trl		
City, State, Zip Code Boca Raton, FL 33496-2434		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$286.39
Alexis Carraway	08/01/2023	\$1,424.30
Mailing Address 106 Roberts Cv		
City, State, Zip Code Starkville, MS 39759-6628		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$8,502.42
Sam's Club	08/21/2023	\$201.54
Mailing Address 2101 SE Simple Savings Dr		
City, State, Zip Code Bentonville, AR 72712-4304		
Purpose of Disbursement (Optional) Catering	Aggregate year-to-date	\$267.16
Shell Oil Co	09/14/2023	\$94.17
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Benjamin Hunt		
Mailing Address 510 S Broadway St	08/15/2023	\$221.19
City, State, Zip Code Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional) Reimbursement - Postage, Communication Tools	Aggregate year-to-date	\$25,439.20
Angelo Ruiz		
Mailing Address 127 S Roach St	08/15/2023	\$2,055.29
City, State, Zip Code Jackson, MS 39201-2916		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,544.64
Timmanisha Macon		
Mailing Address 19311 Crestwick St	09/15/2023	\$1,774.36
City, State, Zip Code Saucier, MS 39574-8031		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,597.45
Numero		
Mailing Address 200 Spectrum Center Dr	07/31/2023	\$632.43
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Katharine Kurz		
Mailing Address 634 W Main St	08/01/2023	\$1,994.23
City, State, Zip Code Tupelo, MS 38804-3745		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$18,551.73

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Entergy		
Mailing Address		
PO Box 8105	08/11/2023	\$268.02
City, State, Zip Code		
Baton Rouge, LA 70891-8105		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$395.20
Utilities		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amanda Powell		
Mailing Address		
PO Box 16982	09/15/2023	\$2,174.93
City, State, Zip Code		
Hattiesburg, MS 39404-6982		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,174.93
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Delta Airlines		
Mailing Address		
7500 Airline Dr	09/25/2023	\$568.20
City, State, Zip Code		
Minneapolis, MN 55450-1101		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,801.20
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stripe		
Mailing Address		
3180 18th St	08/07/2023	\$23.38
City, State, Zip Code		
San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$771.69
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	08/09/2023	\$60.54
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,353.41
Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services	07/30/2023	\$396.56
Mailing Address PO Box 382110		
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$29,206.03
Shinitra Russell	08/01/2023	\$2,320.98
Mailing Address 1185 Collier Rd NW		
City, State, Zip Code Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$24,030.14
Silly Sisters, LLC	08/01/2023	\$900.00
Mailing Address 310 County Road 640		
City, State, Zip Code Baldwyn, MS 38824-8680		
Purpose of Disbursement (Optional) Rent	Aggregate year-to-date	\$7,200.00
United States Postal Service	09/12/2023	\$28.75
Mailing Address 475 Lenfant Plz SW		
City, State, Zip Code Washington, DC 20260-0004		
Purpose of Disbursement (Optional) Postage	Aggregate year-to-date	\$2,376.24
Fastlane Gas Stations	09/22/2023	\$30.74
Mailing Address 320 W Government St		
City, State, Zip Code Brandon, MS 39042-3146		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$482.16

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stefon Ward		
Mailing Address 138 Brookwood Ln	09/15/2023	\$1,623.42
City, State, Zip Code Hattiesburg, MS 39401-5763		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,149.27
Adam Beyer		
Mailing Address 4288 N Gloster St	09/18/2023	\$720.33
City, State, Zip Code Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional) Reimbursement - Travel, Office Supplies, Subs	Aggregate year-to-date	\$38,021.67
Allmond Printing Co		
Mailing Address 603 W Commerce St	09/18/2023	\$2,500.00
City, State, Zip Code Aberdeen, MS 39730-2405		
Purpose of Disbursement (Optional) Printing	Aggregate year-to-date	\$4,135.09
KMM Consulting		
Mailing Address 8242 Birch St	09/12/2023	\$7,500.00
City, State, Zip Code New Orleans, LA 70118-2822		
Purpose of Disbursement (Optional) Fundraising Consulting	Aggregate year-to-date	\$70,774.44
Char Restaurant		
Mailing Address 4500 Interstate 55 North Frontage Rd	08/24/2023	\$190.75
City, State, Zip Code Jackson, MS 39211		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$610.94

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
United States Postal Service		
Mailing Address 475 Lenfant Plz SW	08/25/2023	\$57.50
City, State, Zip Code Washington, DC 20260-0004		
Purpose of Disbursement (Optional) Postage	Aggregate year-to-date	\$2,376.24
Chevron Stations		
Mailing Address 6001 Bollinger Canyon Rd	09/05/2023	\$77.22
City, State, Zip Code San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,028.09
Walmart		
Mailing Address 702 SW 8th St	09/05/2023	\$193.83
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Holiday Inn		
Mailing Address 3 Ravinia Dr	09/26/2023	\$157.71
City, State, Zip Code Atlanta, GA 30346-2118		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$965.68
Larry Campbell		
Mailing Address 200 Colony Park Dr	09/01/2023	\$1,320.02
City, State, Zip Code Pearl, MS 39208-6369		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,071.61

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Katharine Kurz	09/12/2023	\$391.91
Mailing Address 634 W Main St		
City, State, Zip Code Tupelo, MS 38804-3745		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$18,551.73
Walmart	08/03/2023	\$5.22
Mailing Address 702 SW 8th St		
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Circle K	08/28/2023	\$35.37
Mailing Address 1130 W Warner Rd		
City, State, Zip Code Tempe, AZ 85284-2816		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$278.84
Benjamin Hunt	09/01/2023	\$2,167.10
Mailing Address 510 S Broadway St		
City, State, Zip Code Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$25,439.20
Silly Sisters, LLC	09/05/2023	\$900.00
Mailing Address 310 County Road 640		
City, State, Zip Code Baldwyn, MS 38824-8680		
Purpose of Disbursement (Optional) Rent	Aggregate year-to-date	\$7,200.00

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address 1111 Expedia Group Way W	09/05/2023	\$260.00
City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,467.36
Take 5 Oil Change		
Mailing Address 201 S GLOSTER St	09/25/2023	\$20.00
City, State, Zip Code Tupelo, MS 38804		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$616.84
Domino's Pizza		
Mailing Address 30 Frank Lloyd Wright Dr	08/18/2023	\$32.97
City, State, Zip Code Ann Arbor, MI 48105-9757		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$271.01
John J. Miller		
Mailing Address 30 Rock Hill Rd	09/01/2023	\$1,528.95
City, State, Zip Code Sumrall, MS 39482-9537		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,756.58
Hilton Hotels		
Mailing Address 7930 Jones Branch Dr	09/21/2023	\$189.28
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,705.36

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Dollar General		
Mailing Address 100 Mission Rdg	08/16/2023	-\$17.01
City, State, Zip Code Goodlettsville, TN 37072-2171		
Purpose of Disbursement (Optional) Office Supplies Refund	Aggregate year-to-date	\$213.62
United Healthcare		
Mailing Address PO Box 94017	08/17/2023	\$6,080.08
City, State, Zip Code Palatine, IL 60094-4017		
Purpose of Disbursement (Optional) Health Insurance	Aggregate year-to-date	\$56,545.16
Andrew Buehrer		
Mailing Address 3249 Pepper Ridge Dr	08/28/2023	\$533.64
City, State, Zip Code Maumee, OH 43537-9697		
Purpose of Disbursement (Optional) Reimbursement - Travel, Event Catering	Aggregate year-to-date	\$11,386.47
Hampton Inn		
Mailing Address 7930 Jones Branch Dr	08/28/2023	\$167.86
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,348.99
Paul Carter		
Mailing Address 2615 Blackfoot Rd	09/18/2023	\$50.00
City, State, Zip Code Vanceleave, MS 39565-8447		
Purpose of Disbursement (Optional) Contribution Refund	Aggregate year-to-date	\$225.00

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name Jacob Smith	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4100 N Gloster St	09/01/2023	\$2,811.60
City, State, Zip Code Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$25,419.43
Full Name IP Casino Resort & Spa	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 850 Bayview Ave	08/15/2023	\$14.98
City, State, Zip Code Biloxi, MS 39530-1701		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,095.15
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	09/01/2023	\$36.90
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Alexis Carraway	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 106 Roberts Cv	08/15/2023	\$1,455.37
City, State, Zip Code Starkville, MS 39759-6628		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$8,502.42
Full Name Duncan Cady	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 325 Frederick St	09/15/2023	\$1,600.50
City, State, Zip Code San Francisco, CA 94117-3913		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,975.18

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Lee's Coffee and Tea	08/28/2023	\$283.31
Mailing Address 409 W Oak St		
City, State, Zip Code Laurel, MS 39440-4169		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$283.31
Shell Oil Co	09/11/2023	\$14.97
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Jefferson Stevens, LLC	08/15/2023	\$566.40
Mailing Address 5907 Baxter Dr		
City, State, Zip Code Jackson, MS 39211-3319		
Purpose of Disbursement (Optional) Political Strategy Consultant	Aggregate year-to-date	\$45,003.89
Katharine Kurz	08/15/2023	\$1,994.23
Mailing Address 634 W Main St		
City, State, Zip Code Tupelo, MS 38804-3745		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$18,551.73
Benjamin Hunt	09/15/2023	\$2,167.10
Mailing Address 510 S Broadway St		
City, State, Zip Code Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$25,439.20

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
OfficeMax		
Mailing Address 263 Shuman Blvd	08/08/2023	\$135.70
City, State, Zip Code Naperville, IL 60563-7700		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$413.82
Numero		
Mailing Address 200 Spectrum Center Dr	09/19/2023	\$2,599.24
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Samuel Case		
Mailing Address 4104 Fieldstone Loop	08/01/2023	\$415.58
City, State, Zip Code Oxford, MS 38655-3463		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$4,098.56
James K. Child Jr		
Mailing Address 1935 E Bourne Pl	08/02/2023	\$250.00
City, State, Zip Code Jackson, MS 39211-6714		
Purpose of Disbursement (Optional) Contribution Refund	Aggregate year-to-date	\$250.00
Abby O'Keefe		
Mailing Address 1404 Highland Valley Cir	08/15/2023	\$216.00
City, State, Zip Code Wildwood, MO 63005-4259		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$34,921.55

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shinitra Russell	08/15/2023	\$130.00
Mailing Address 1185 Collier Rd NW		
City, State, Zip Code Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$24,030.14
Thomas Mayfield	09/15/2023	\$300.59
Mailing Address 1412 Wisteria Dr		
City, State, Zip Code Vicksburg, MS 39180-4757		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$300.59
Shell Oil Co	08/28/2023	\$40.42
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Shell Oil Co	09/18/2023	\$60.00
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Isaac Lampner	08/01/2023	\$2,798.60
Mailing Address 945 Mitchell St		
City, State, Zip Code Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$50,137.78

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Old Town Media		
Mailing Address 114 Quay St	08/04/2023	\$251,230.00
City, State, Zip Code Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$3,808,344.00
Full Name Greta Presley	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 182 Verona Ave	09/15/2023	\$1,623.42
City, State, Zip Code Nettleton, MS 38858-6004		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,544.69
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	08/16/2023	\$70.64
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name State Farm Insurance	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1 State Farm Plz	09/07/2023	\$110.74
City, State, Zip Code Bloomington, IL 61710-0001		
Purpose of Disbursement (Optional) Insurance	Aggregate year-to-date	\$836.60
Full Name Dollar General	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 100 Mission Rdg	09/27/2023	\$7.97
City, State, Zip Code Goodlettsville, TN 37072-2171		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$213.62

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hal & Mal's		
Mailing Address 200 Commerce St	08/09/2023	\$500.00
City, State, Zip Code Jackson, MS 39201-4420		
Purpose of Disbursement (Optional) Event Space Rental	Aggregate year-to-date	\$1,584.88
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jacob Smith		
Mailing Address 4100 N Gloster St	08/01/2023	\$1,994.23
City, State, Zip Code Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$25,419.43
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	08/31/2023	\$11.47
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Kaci Wilcox		
Mailing Address 415 Warren Pl	09/15/2023	\$1,232.80
City, State, Zip Code Madison, MS 39110-8394		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,232.80
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon Web Services		
Mailing Address 2121 7th Ave	09/06/2023	\$133.01
City, State, Zip Code Seattle, WA 98121-5114		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$426.49

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
State Farm Insurance		
Mailing Address 1 State Farm Plz	08/07/2023	\$110.74
City, State, Zip Code Bloomington, IL 61710-0001		
Purpose of Disbursement (Optional) Insurance	Aggregate year-to-date	\$836.60
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chevron Stations		
Mailing Address 6001 Bollinger Canyon Rd	09/21/2023	\$53.74
City, State, Zip Code San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,028.09
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Switchboard Public Benefit Corp.		
Mailing Address 195 Binney St	09/12/2023	\$7,411.17
City, State, Zip Code Cambridge, MA 02142-1095		
Purpose of Disbursement (Optional) Digital Fundraising	Aggregate year-to-date	\$41,293.85
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
United States Postal Service		
Mailing Address 475 Lenfant Plz SW	08/03/2023	\$99.00
City, State, Zip Code Washington, DC 20260-0004		
Purpose of Disbursement (Optional) Postage	Aggregate year-to-date	\$2,376.24
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chevron Stations		
Mailing Address 6001 Bollinger Canyon Rd	08/14/2023	\$91.13
City, State, Zip Code San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,028.09

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hilton Hotels		
Mailing Address		
7930 Jones Branch Dr	09/25/2023	\$191.59
City, State, Zip Code		
Mclean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,705.36
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	09/08/2023	\$44.50
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,216.10
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Alexis Carraway		
Mailing Address		
106 Roberts Cv	09/01/2023	\$1,302.40
City, State, Zip Code		
Starkville, MS 39759-6628		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$8,502.42
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jake Laves		
Mailing Address		
699 Nation Hills Dr	09/12/2023	\$334.28
City, State, Zip Code		
Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$37,974.03
Reimbursement - Travel, Subscriptions		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	09/22/2023	\$24.00
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,353.41
Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	08/03/2023	\$358.46
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
ActBlue Technical Services		
Mailing Address PO Box 382110	08/14/2023	\$782.25
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$29,206.03
Dodge's Store		
Mailing Address 2290 W Main St	08/29/2023	\$57.78
City, State, Zip Code Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$510.61
Joseph Johnson		
Mailing Address 1906 Paige St	09/01/2023	\$1,968.09
City, State, Zip Code Georgetown, TX 78626-7932		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$2,189.73
Acme Investment Company		
Mailing Address 2032 Tidewater Ln	09/05/2023	\$500.00
City, State, Zip Code Madison, MS 39110-8981		
Purpose of Disbursement (Optional) Rent	Aggregate year-to-date	\$2,000.00

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address 1111 Expedia Group Way W	09/05/2023	\$1,168.05
City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,467.36
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Take 5 Oil Change		
Mailing Address 201 S GLOSTER St	09/25/2023	\$181.21
City, State, Zip Code Tupelo, MS 38804		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$616.84
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Abby O'Keefe		
Mailing Address 1404 Highland Valley Cir	09/01/2023	\$2,974.48
City, State, Zip Code Wildwood, MO 63005-4259		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$34,921.55
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hampton Inn		
Mailing Address 7930 Jones Branch Dr	08/21/2023	\$111.63
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,348.99
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Morgan Benjamin		
Mailing Address 4212 28th St	08/22/2023	\$930.54
City, State, Zip Code Long Island City, NY 11101-6258		
Purpose of Disbursement (Optional) Reimbursement - Travel, Printing, Event Supplies	Aggregate year-to-date	\$14,778.18

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Trey Till		
Mailing Address 105 Morning Glory Dr	09/01/2023	\$1,812.30
City, State, Zip Code Madison, MS 39110-7898		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$7,655.82
Old Town Media		
Mailing Address 114 Quay St	09/22/2023	\$447,668.00
City, State, Zip Code Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$3,808,344.00
IP Casino Resort & Spa		
Mailing Address 850 Bayview Ave	08/15/2023	\$14.98
City, State, Zip Code Biloxi, MS 39530-1701		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,095.15
Numero		
Mailing Address 200 Spectrum Center Dr	09/05/2023	\$1,525.00
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
J. Walter Michel Agency, Inc.		
Mailing Address 2660 Ridgewood Rd	08/02/2023	\$1,500.00
City, State, Zip Code Jackson, MS 39216-4921		
Purpose of Disbursement (Optional) Rent	Aggregate year-to-date	\$4,000.00

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Link Centre		
Mailing Address		
1800 W Main St	08/24/2023	\$1,682.26
City, State, Zip Code		
Tupelo, MS 38801-3254		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,682.26
Rent		
Samuel Case		
Mailing Address		
4104 Fieldstone Loop	08/15/2023	\$1,582.62
City, State, Zip Code		
Oxford, MS 38655-3463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,098.56
Salary		
Larry Campbell		
Mailing Address		
200 Colony Park Dr	09/15/2023	\$730.38
City, State, Zip Code		
Pearl, MS 39208-6369		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,071.61
Salary		
Shell Oil Co		
Mailing Address		
PO Box 2463	09/05/2023	\$40.02
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,353.41
Travel		
OfficeMax		
Mailing Address		
263 Shuman Blvd	08/10/2023	\$169.35
City, State, Zip Code		
Naperville, IL 60563-7700		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$413.82
Office Supplies		

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Busylad Rent-All	08/11/2023	\$3,145.13
Mailing Address 1818 Mccullough Blvd		
City, State, Zip Code Tupelo, MS 38801-6774		
Purpose of Disbursement (Optional) Event Equipment Rental	Aggregate year-to-date	\$3,412.40
Shell Oil Co	09/11/2023	\$38.31
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Isaac Lampner	08/15/2023	\$2,798.60
Mailing Address 945 Mitchell St		
City, State, Zip Code Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$50,137.78
Joseph Johnson	09/15/2023	\$221.64
Mailing Address 1906 Paige St		
City, State, Zip Code Georgetown, TX 78626-7932		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$2,189.73
Shell Oil Co	09/29/2023	\$51.45
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Louise Cole	08/01/2023	\$1,528.98
Mailing Address 518 N Church St		
City, State, Zip Code Okolona, MS 38860-1017		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$9,012.67
Shawn Patterson	08/15/2023	\$143.59
Mailing Address 1160 1st St NE		
City, State, Zip Code Washington, DC 20002-4799		
Purpose of Disbursement (Optional) Reimbursement - Equipment, Software	Aggregate year-to-date	\$36,264.54
Tai Sims	08/15/2023	\$2,484.86
Mailing Address 5049 Wishing Well Dr		
City, State, Zip Code Grand Blanc, MI 48439-4239		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$7,454.58
Gregory McCain	09/15/2023	\$231.33
Mailing Address 308 S Montgomery St		
City, State, Zip Code Starkville, MS 39759-3334		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$231.33
Shell Oil Co	08/28/2023	\$40.00
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	09/18/2023	\$66.84
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Shell Oil Co	08/10/2023	\$55.00
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Jake Laves	08/01/2023	\$2,974.48
Mailing Address 699 Nation Hills Dr		
City, State, Zip Code Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$37,974.03
Acme Investment Company	08/01/2023	\$500.00
Mailing Address 2032 Tidewater Ln		
City, State, Zip Code Madison, MS 39110-8981		
Purpose of Disbursement (Optional) Rent	Aggregate year-to-date	\$2,000.00
Stripe	09/04/2023	\$22.52
Mailing Address 3180 18th St		
City, State, Zip Code San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$771.69

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mark Rennie		
Mailing Address 3203 Nuttree Woods Dr	09/15/2023	\$484.84
City, State, Zip Code Midlothian, VA 23112-4503		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$9,930.73
Full Name KMM Consulting		
Mailing Address 8242 Birch St	08/07/2023	\$7,500.00
City, State, Zip Code New Orleans, LA 70118-2822		
Purpose of Disbursement (Optional) Fundraising Consulting	Aggregate year-to-date	\$70,774.44
Full Name Stripe		
Mailing Address 3180 18th St	08/29/2023	\$19.62
City, State, Zip Code San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$771.69
Full Name Michael Steele		
Mailing Address 191 Wides Rd	08/01/2023	\$2,013.23
City, State, Zip Code Nason, IL 62866		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$2,013.23
Full Name Best Western Hotel		
Mailing Address 6201 N 24th Pkwy	07/31/2023	\$171.71
City, State, Zip Code Phoenix, AZ 85016-2023		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,117.87

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	08/31/2023	\$11.47
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Sun-Sentinel		
Mailing Address 149 COURT Sq	08/28/2023	\$485.00
City, State, Zip Code Charleston, MS 38921		
Purpose of Disbursement (Optional) Subscription	Aggregate year-to-date	\$535.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
AT&T		
Mailing Address 208 S Akard St	09/18/2023	\$52.50
City, State, Zip Code Dallas, TX 75202-4206		
Purpose of Disbursement (Optional) Phones	Aggregate year-to-date	\$252.50
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chick-Fil-A		
Mailing Address 5200 Buffington Rd	08/30/2023	\$24.13
City, State, Zip Code Atlanta, GA 30349-2945		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$253.98
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chevron Stations		
Mailing Address 6001 Bollinger Canyon Rd	08/21/2023	\$63.15
City, State, Zip Code San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,028.09

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	09/11/2023	\$62.51
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Scale to Win		
Mailing Address 13742 Harper St	09/12/2023	\$1,076.33
City, State, Zip Code Santa Ana, CA 92703-1419		
Purpose of Disbursement (Optional) Digital Consulting	Aggregate year-to-date	\$9,873.00
Love's Travel Stops		
Mailing Address 2202 W Hefner Rd	09/27/2023	\$43.56
City, State, Zip Code Oklahoma City, OK 73120-7604		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$266.64
United States Postal Service		
Mailing Address 475 Lenfant Plz SW	08/08/2023	\$28.75
City, State, Zip Code Washington, DC 20260-0004		
Purpose of Disbursement (Optional) Postage	Aggregate year-to-date	\$2,376.24
Dodge's Store		
Mailing Address 2290 W Main St	08/30/2023	\$95.53
City, State, Zip Code Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$510.61

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Samuel Case		
Mailing Address 4104 Fieldstone Loop	09/01/2023	\$1,388.33
City, State, Zip Code Oxford, MS 38655-3463		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$4,098.56
Benjamin Hunt		
Mailing Address 510 S Broadway St	09/12/2023	\$217.08
City, State, Zip Code Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional) Reimbursement - Travel, Postage, Software	Aggregate year-to-date	\$25,439.20
Walmart		
Mailing Address 702 SW 8th St	08/02/2023	\$159.00
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Jackie Courson		
Mailing Address 63 Hidden Crk	08/14/2023	\$25.00
City, State, Zip Code Pontotoc, MS 38863-7514		
Purpose of Disbursement (Optional) Contribution Refund	Aggregate year-to-date	\$275.00
Shell Oil Co		
Mailing Address PO Box 2463	09/25/2023	\$56.69
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero		
Mailing Address		
200 Spectrum Center Dr	09/26/2023	\$128.40
City, State, Zip Code		
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$61,062.31
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services		
Mailing Address		
PO Box 382110	08/20/2023	\$210.09
City, State, Zip Code		
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$29,206.03
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
MBA Consulting Group		
Mailing Address		
611 Pennsylvania Ave SE	09/01/2023	\$10,120.00
City, State, Zip Code		
Washington, DC 20003-4303		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$70,460.00
Compliance Services		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Khalilah Karriem		
Mailing Address		
1326 15th St N	09/01/2023	\$96.97
City, State, Zip Code		
Columbus, MS 39701-3610		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$827.35
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address		
1111 Expedia Group Way W	09/06/2023	\$388.65
City, State, Zip Code		
Seattle, WA 98119-1111		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,467.36
Travel		

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ron Owens		
Mailing Address 3545 Mitchell Rd	09/01/2023	\$3,935.75
City, State, Zip Code Tupelo, MS 38801-9616		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$65,296.21
Full Name Hampton Inn	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 7930 Jones Branch Dr	08/21/2023	\$121.61
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,348.99
Full Name Bumperactive	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5907 Burnet Rd	08/17/2023	\$1,792.77
City, State, Zip Code Austin, TX 78757-3224		
Purpose of Disbursement (Optional) Store Overhead	Aggregate year-to-date	\$26,627.24
Full Name Daniel Trimble	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 8 Iris Ln	09/01/2023	\$2,199.07
City, State, Zip Code Redding, CT 06896-2112		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$7,439.89
Full Name IP Casino Resort & Spa	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 850 Bayview Ave	08/14/2023	\$59.92
City, State, Zip Code Biloxi, MS 39530-1701		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,095.15

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
London and Stetelman Inc		
Mailing Address 3906 Hardy St	07/31/2023	\$2,000.00
City, State, Zip Code Hattiesburg, MS 39402-1684		
Purpose of Disbursement (Optional) Rent	Aggregate year-to-date	\$5,219.00
Full Name Louise Cole	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 518 N Church St	08/15/2023	\$1,564.74
City, State, Zip Code Okolona, MS 38860-1017		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$9,012.67
Full Name Alexis Carraway	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 106 Roberts Cv	09/15/2023	\$677.59
City, State, Zip Code Starkville, MS 39759-6628		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$8,502.42
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	09/06/2023	\$89.41
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Payroll Data Processing	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3501 E Frontage Rd	08/01/2023	\$147.98
City, State, Zip Code Tampa, FL 33607-1723		
Purpose of Disbursement (Optional) Payroll Fees	Aggregate year-to-date	\$261,579.77

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ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
OfficeMax		
Mailing Address 263 Shuman Blvd	08/21/2023	\$108.77
City, State, Zip Code Naperville, IL 60563-7700		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$413.82
Shell Oil Co		
Mailing Address PO Box 2463	09/12/2023	\$42.69
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Jake Laves		
Mailing Address 699 Nation Hills Dr	08/15/2023	\$2,974.48
City, State, Zip Code Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$37,974.03
Khalilah Karriem		
Mailing Address 1326 15th St N	09/15/2023	\$730.38
City, State, Zip Code Columbus, MS 39701-3610		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$827.35
Uber		
Mailing Address 1515 3rd St	09/29/2023	\$24.67
City, State, Zip Code San Francisco, CA 94158-2211		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$210.09

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ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Nicholas Cosmo	08/01/2023	\$2,320.98
Mailing Address 202 Milford St		
City, State, Zip Code Tupelo, MS 38801-4687		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$11,836.50
Numero	09/22/2023	\$610.20
Mailing Address 200 Spectrum Center Dr		
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Jacob Smith	08/15/2023	\$2,811.60
Mailing Address 4100 N Gloster St		
City, State, Zip Code Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$25,419.43
Julie McDermott	09/15/2023	\$2,073.82
Mailing Address 1119 Bratton Rd		
City, State, Zip Code New Albany, MS 38652-9328		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$12,898.83
Shell Oil Co	08/28/2023	\$23.85
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address PO Box 2463	09/18/2023	\$76.85
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Julie McDermott	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1119 Bratton Rd	08/01/2023	\$1,909.95
City, State, Zip Code New Albany, MS 38652-9328		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$12,898.83
Full Name Allmond Printing Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 603 W Commerce St	08/02/2023	\$1,377.09
City, State, Zip Code Aberdeen, MS 39730-2405		
Purpose of Disbursement (Optional) Printing	Aggregate year-to-date	\$4,135.09
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	08/04/2023	\$89.04
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Angelo Ruiz	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 127 S Roach St	09/15/2023	\$2,263.57
City, State, Zip Code Jackson, MS 39201-2916		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,544.64

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Sun-Sentinel		
Mailing Address 149 COURT Sq	09/05/2023	\$50.00
City, State, Zip Code Charleston, MS 38921		
Purpose of Disbursement (Optional) Subscription	Aggregate year-to-date	\$535.00
Battleaxe Digital		
Mailing Address 1405 Florida Ave NW	08/07/2023	\$4,786.80
City, State, Zip Code Washington, DC 20009-5801		
Purpose of Disbursement (Optional) Digital Consulting	Aggregate year-to-date	\$180,667.40
Trey Till		
Mailing Address 105 Morning Glory Dr	08/01/2023	\$1,812.30
City, State, Zip Code Madison, MS 39110-7898		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$7,655.82
Best Western Hotel		
Mailing Address 6201 N 24th Pkwy	07/31/2023	\$171.71
City, State, Zip Code Phoenix, AZ 85016-2023		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,117.87
Walmart		
Mailing Address 702 SW 8th St	08/31/2023	\$94.50
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Take 5 Oil Change		
Mailing Address		
201 S GLOSTER St	08/14/2023	\$143.33
City, State, Zip Code		
Tupelo, MS 38804		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$616.84
Travel		
Chick-Fil-A		
Mailing Address		
5200 Buffington Rd	09/11/2023	\$16.69
City, State, Zip Code		
Atlanta, GA 30349-2945		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$253.98
Staff Meals		
Lexis Nexis		
Mailing Address		
230 Park Ave	09/12/2023	\$335.00
City, State, Zip Code		
New York, NY 10169-0935		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,804.68
Software Subscription		
United States Postal Service		
Mailing Address		
475 Lenfant Plz SW	08/03/2023	\$462.00
City, State, Zip Code		
Washington, DC 20260-0004		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,376.24
Postage		
Walmart		
Mailing Address		
702 SW 8th St	09/15/2023	\$93.83
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,216.10
Office Supplies		

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chevron Stations		
Mailing Address 6001 Bollinger Canyon Rd	08/07/2023	\$62.00
City, State, Zip Code San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,028.09
Full Name Louise Cole	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 518 N Church St	09/01/2023	\$1,879.61
City, State, Zip Code Okolona, MS 38860-1017		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$9,012.67
Full Name Trey Till	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 105 Morning Glory Dr	09/12/2023	\$128.52
City, State, Zip Code Madison, MS 39110-7898		
Purpose of Disbursement (Optional) Reimbursement - Travel, Research	Aggregate year-to-date	\$7,655.82
Full Name Dodge's Store	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2290 W Main St	09/14/2023	\$20.97
City, State, Zip Code Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$510.61
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	09/25/2023	\$39.17
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Dunkin Donuts	08/10/2023	\$80.92
Mailing Address 130 Royall St		
City, State, Zip Code Canton, MA 02021-1010		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$334.01
Old Town Media	08/31/2023	\$334,165.00
Mailing Address 114 Quay St		
City, State, Zip Code Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$3,808,344.00
Tom Bigbee Fiber	08/31/2023	\$304.90
Mailing Address 1346 Auburn Rd		
City, State, Zip Code Tupelo, MS 38804-8412		
Purpose of Disbursement (Optional) Internet	Aggregate year-to-date	\$2,103.05
Jordan Kelley	09/01/2023	\$2,320.98
Mailing Address 8364 Barton Dr		
City, State, Zip Code Strongsville, OH 44149-1017		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$21,497.90
Expedia.com	09/13/2023	\$280.22
Mailing Address 1111 Expedia Group Way W		
City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,467.36

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amanda Pagoaga		
Mailing Address 5341 Melville Cv	09/01/2023	\$1,642.51
City, State, Zip Code Olive Branch, MS 38654-8363		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,259.89
Hilton Hotels		
Mailing Address 7930 Jones Branch Dr	07/31/2023	\$4.84
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,705.36
The Kroger Co.		
Mailing Address 1014 Vine St	09/14/2023	\$54.48
City, State, Zip Code Cincinnati, OH 45202-1141		
Purpose of Disbursement (Optional) Catering	Aggregate year-to-date	\$1,239.61
Empower Innovations Group		
Mailing Address 2800 Royal Ave	08/17/2023	\$400.00
City, State, Zip Code Monona, WI 53713-1595		
Purpose of Disbursement (Optional) Organizing Software	Aggregate year-to-date	\$400.00
Michael Waller		
Mailing Address 103 Redbud Dr	09/01/2023	\$1,994.23
City, State, Zip Code Hendersonville, TN 37075-3982		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,293.91

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
IP Casino Resort & Spa	08/14/2023	\$59.92
Mailing Address 850 Bayview Ave		
City, State, Zip Code Biloxi, MS 39530-1701		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,095.15
ActBlue Technical Services	09/25/2023	\$2,214.99
Mailing Address PO Box 382110		
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$29,206.03
Numero	09/12/2023	\$2,253.23
Mailing Address 200 Spectrum Center Dr		
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Nicholas Cosmo	08/15/2023	\$2,320.98
Mailing Address 202 Milford St		
City, State, Zip Code Tupelo, MS 38801-4687		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$11,836.50
Samuel Case	09/15/2023	\$712.03
Mailing Address 4104 Fieldstone Loop		
City, State, Zip Code Oxford, MS 38655-3463		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$4,098.56

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Beautiful Flaws		
Mailing Address 424 Main St	09/05/2023	-\$75.00
City, State, Zip Code Columbus, MS 39701-4548		
Purpose of Disbursement (Optional) Event Space Rental Refund	Aggregate year-to-date	\$150.00
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	09/07/2023	\$80.41
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Lowe's	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3354 N Gloster St	08/28/2023	\$453.62
City, State, Zip Code Tupelo, MS 38804-9704		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$2,130.85
Full Name Payroll Data Processing	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3501 E Frontage Rd	08/01/2023	\$23,409.84
City, State, Zip Code Tampa, FL 33607-1723		
Purpose of Disbursement (Optional) Payroll Taxes	Aggregate year-to-date	\$261,579.77
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	09/12/2023	\$60.12
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	08/02/2023	\$1,525.00
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Full Name Ethan Cox	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3614 N Fremont St	08/15/2023	\$5,496.50
City, State, Zip Code Chicago, IL 60613-4372		
Purpose of Disbursement (Optional) Reimbursement - Travel, Office Supplies, Shipping	Aggregate year-to-date	\$31,666.54
Full Name Julie McDermott	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1119 Bratton Rd	08/15/2023	\$1,983.89
City, State, Zip Code New Albany, MS 38652-9328		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$12,898.83
Full Name Jordan Kelley	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 8364 Barton Dr	09/15/2023	\$2,540.75
City, State, Zip Code Strongsville, OH 44149-1017		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$21,497.90
Full Name Old Town Media	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 114 Quay St	08/18/2023	\$304,968.00
City, State, Zip Code Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$3,808,344.00

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Uber		
Mailing Address 1515 3rd St	09/29/2023	\$62.02
City, State, Zip Code San Francisco, CA 94158-2211		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$210.09
Full Name Ethan Cox	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3614 N Fremont St	08/01/2023	\$1,623.42
City, State, Zip Code Chicago, IL 60613-4372		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$31,666.54
Full Name Adam Beyer	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4288 N Gloster St	08/15/2023	\$111.76
City, State, Zip Code Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional) Reimbursement - Subscriptions	Aggregate year-to-date	\$38,021.67
Full Name Trey Till	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 105 Morning Glory Dr	08/15/2023	\$1,812.30
City, State, Zip Code Madison, MS 39110-7898		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$7,655.82
Full Name John J. Miller	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 30 Rock Hill Rd	09/15/2023	\$1,994.23
City, State, Zip Code Sumrall, MS 39482-9537		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,756.58

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	08/28/2023	\$27.01
Mailing Address		
PO Box 2463		
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,353.41
Travel		
Shell Oil Co	09/19/2023	\$51.63
Mailing Address		
PO Box 2463		
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,353.41
Travel		
Kalie McGuire	08/01/2023	\$360.16
Mailing Address		
2121 Edwards St		
City, State, Zip Code		
Houston, TX 77007-4786		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$360.16
Salary		
Shell Oil Co	07/31/2023	\$76.09
Mailing Address		
PO Box 2463		
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,353.41
Travel		
Amalgamated Bank	08/25/2023	\$270.50
Mailing Address		
275 7th Ave		
City, State, Zip Code		
New York, NY 10001-6708		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,086.95
Bank Fee		

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shinitra Russell		
Mailing Address 1185 Collier Rd NW	09/15/2023	\$2,499.80
City, State, Zip Code Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$24,030.14
Expedia.com		
Mailing Address 1111 Expedia Group Way W	09/25/2023	\$261.34
City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,467.36
London and Stetelman Inc		
Mailing Address 3906 Hardy St	08/07/2023	\$2,021.00
City, State, Zip Code Hattiesburg, MS 39402-1684		
Purpose of Disbursement (Optional) Rent	Aggregate year-to-date	\$5,219.00
Daniel Trimble		
Mailing Address 8 Iris Ln	08/01/2023	\$1,679.68
City, State, Zip Code Redding, CT 06896-2112		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$7,439.89
Best Western Hotel		
Mailing Address 6201 N 24th Pkwy	07/31/2023	\$171.71
City, State, Zip Code Phoenix, AZ 85016-2023		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,117.87

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	08/31/2023	\$11.47
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Hal & Mal's		
Mailing Address 200 Commerce St	09/25/2023	\$15.80
City, State, Zip Code Jackson, MS 39201-4420		
Purpose of Disbursement (Optional) Event Catering	Aggregate year-to-date	\$1,584.88
Jada Barnes		
Mailing Address 395 Lampton Hilltop Rd	09/01/2023	\$2,199.07
City, State, Zip Code Columbia, MS 39429-9189		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$11,103.01
Valero Gas Station		
Mailing Address 1 Valero Way	08/01/2023	\$35.00
City, State, Zip Code San Antonio, TX 78249-1616		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$211.91
Towne Center Properties LLC		
Mailing Address PO Box 321149	09/12/2023	\$25.00
City, State, Zip Code Flowood, MS 39232-1149		
Purpose of Disbursement (Optional) Utilities	Aggregate year-to-date	\$1,550.00

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chevron Stations		
Mailing Address 6001 Bollinger Canyon Rd	08/14/2023	\$70.00
City, State, Zip Code San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,028.09
Full Name Walmart	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 702 SW 8th St	09/15/2023	\$22.92
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Full Name Chipotle	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 610 Newport Center Dr	09/06/2023	\$590.77
City, State, Zip Code Newport Beach, CA 92660-6460		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$907.37
Full Name Nicholas Cosmo	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 202 Milford St	09/01/2023	\$2,320.98
City, State, Zip Code Tupelo, MS 38801-4687		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$11,836.50
Full Name Shawn Patterson	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1160 1st St NE	09/12/2023	\$47.12
City, State, Zip Code Washington, DC 20002-4799		
Purpose of Disbursement (Optional) Reimbursement - Subscriptions	Aggregate year-to-date	\$36,264.54

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Domino's Pizza		
Mailing Address 30 Frank Lloyd Wright Dr	09/14/2023	\$8.79
City, State, Zip Code Ann Arbor, MI 48105-9757		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$271.01
ALG Polling, Inc.		
Mailing Address 260 Commerce St	09/05/2023	\$24,550.00
City, State, Zip Code Montgomery, AL 36104-2546		
Purpose of Disbursement (Optional) Research Consultant	Aggregate year-to-date	\$245,900.00
Shell Oil Co		
Mailing Address PO Box 2463	09/25/2023	\$23.91
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Stripe		
Mailing Address 3180 18th St	09/18/2023	\$20.92
City, State, Zip Code San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$771.69
Tom Bigbee Fiber		
Mailing Address 1346 Auburn Rd	08/01/2023	\$304.90
City, State, Zip Code Tupelo, MS 38804-8412		
Purpose of Disbursement (Optional) Internet	Aggregate year-to-date	\$2,103.05

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Paul Carter		
Mailing Address 2615 Blackfoot Rd	08/21/2023	\$25.00
City, State, Zip Code Vancleave, MS 39565-8447		
Purpose of Disbursement (Optional) Contribution Refund	Aggregate year-to-date	\$225.00
Katharine Kurz		
Mailing Address 634 W Main St	09/01/2023	\$1,994.23
City, State, Zip Code Tupelo, MS 38804-3745		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$18,551.73
Dunkin Donuts		
Mailing Address 130 Royall St	08/21/2023	\$95.32
City, State, Zip Code Canton, MA 02021-1010		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$334.01
Greta Presley		
Mailing Address 182 Verona Ave	09/05/2023	\$1,210.15
City, State, Zip Code Nettleton, MS 38858-6004		
Purpose of Disbursement (Optional) Reimbursement - Travel, Basic Events, TV Shoots	Aggregate year-to-date	\$16,544.69
ExxonMobil		
Mailing Address 5959 Las Colinas Blvd	09/15/2023	\$64.70
City, State, Zip Code Irving, TX 75039-4202		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$466.89

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
United States Postal Service		
Mailing Address 475 Lenfant Plz SW	09/28/2023	\$28.75
City, State, Zip Code Washington, DC 20260-0004		
Purpose of Disbursement (Optional) Postage	Aggregate year-to-date	\$2,376.24
Numero		
Mailing Address 200 Spectrum Center Dr	08/21/2023	\$2,495.30
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Shawn Patterson		
Mailing Address 1160 1st St NE	09/01/2023	\$2,974.48
City, State, Zip Code Washington, DC 20002-4799		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$36,264.54
Hilton Hotels		
Mailing Address 7930 Jones Branch Dr	07/31/2023	\$237.23
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,705.36
Jefferson Stevens, LLC		
Mailing Address 5907 Baxter Dr	09/27/2023	\$750.00
City, State, Zip Code Jackson, MS 39211-3319		
Purpose of Disbursement (Optional) Political Strategy Consultant	Aggregate year-to-date	\$45,003.89

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Declaration Media Group	08/18/2023	\$52,853.50
Mailing Address 1152 15th St NW		
City, State, Zip Code Washington, DC 20005-1723		
Purpose of Disbursement (Optional) Video Production	Aggregate year-to-date	\$222,861.48
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Kroger Co.	09/18/2023	\$56.73
Mailing Address 1014 Vine St		
City, State, Zip Code Cincinnati, OH 45202-1141		
Purpose of Disbursement (Optional) Catering	Aggregate year-to-date	\$1,239.61
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stefon Ward	09/01/2023	\$1,623.42
Mailing Address 138 Brookwood Ln		
City, State, Zip Code Hattiesburg, MS 39401-5763		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,149.27
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jefferson Stevens, LLC	08/01/2023	\$7,500.00
Mailing Address 5907 Baxter Dr		
City, State, Zip Code Jackson, MS 39211-3319		
Purpose of Disbursement (Optional) Political Strategy Consultant	Aggregate year-to-date	\$45,003.89
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
MBA Consulting Group	09/22/2023	\$10,000.00
Mailing Address 611 Pennsylvania Ave SE		
City, State, Zip Code Washington, DC 20003-4303		
Purpose of Disbursement (Optional) Compliance Services	Aggregate year-to-date	\$70,460.00

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Reservations.com		
Mailing Address 390 N Orange Ave	09/14/2023	\$28.09
City, State, Zip Code Orlando, FL 32801-1675		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$345.87
Full Name Jada Barnes	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 395 Lampton Hilltop Rd	08/15/2023	\$1,582.62
City, State, Zip Code Columbia, MS 39429-9189		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$11,103.01
Full Name Old Town Media	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 114 Quay St	09/15/2023	\$438,938.00
City, State, Zip Code Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$3,808,344.00
Full Name Ethan Cox	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3614 N Fremont St	08/15/2023	\$1,994.23
City, State, Zip Code Chicago, IL 60613-4372		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$31,666.54
Full Name Lauren Cobb	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3334 Riverbend Rd	09/15/2023	\$2,542.43
City, State, Zip Code Belden, MS 38826-1003		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$2,542.43

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Magik Sound and Lighting Productions	08/08/2023	\$1,275.00
Mailing Address 1173 County Road 811		
City, State, Zip Code Saltillo, MS 38866-9060		
Purpose of Disbursement (Optional) Event Utilities	Aggregate year-to-date	\$1,275.00
Shell Oil Co	09/08/2023	\$46.64
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Busylad Rent-All	08/08/2023	\$267.27
Mailing Address 1818 Mccullough Blvd		
City, State, Zip Code Tupelo, MS 38801-6774		
Purpose of Disbursement (Optional) Event Equipment Rental	Aggregate year-to-date	\$3,412.40
William Adams	08/01/2023	\$1,195.43
Mailing Address 12 Park Pl		
City, State, Zip Code Hattiesburg, MS 39402-1431		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,295.89
Shell Oil Co	09/12/2023	\$35.76
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stripe		
Mailing Address 3180 18th St	08/14/2023	\$14.74
City, State, Zip Code San Francisco, CA 94110-2042		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$771.69
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Faye Moss		
Mailing Address 802 Beazer Ln	09/04/2023	\$250.00
City, State, Zip Code Antioch, TN 37013-2336		
Purpose of Disbursement (Optional) Contribution Refund	Aggregate year-to-date	\$250.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Katharine Kurz		
Mailing Address 634 W Main St	08/15/2023	\$952.60
City, State, Zip Code Tupelo, MS 38804-3745		
Purpose of Disbursement (Optional) Reimbursement - Travel, Placards	Aggregate year-to-date	\$18,551.73
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Abby O'Keefe		
Mailing Address 1404 Highland Valley Cir	08/15/2023	\$2,974.48
City, State, Zip Code Wildwood, MO 63005-4259		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$34,921.55
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Katharine Kurz		
Mailing Address 634 W Main St	09/15/2023	\$1,994.23
City, State, Zip Code Tupelo, MS 38804-3745		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$18,551.73

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mississippi Democratic Party		
Mailing Address 811 E River Pl	09/28/2023	\$142,086.00
City, State, Zip Code Jackson, MS 39202-3432		
Purpose of Disbursement (Optional) Political Contribution	Aggregate year-to-date	\$165,250.00
United States Postal Service		
Mailing Address 475 Lenfant Plz SW	09/29/2023	\$1,275.00
City, State, Zip Code Washington, DC 20260-0004		
Purpose of Disbursement (Optional) Postage	Aggregate year-to-date	\$2,376.24
Clarke & Sampson Inc.		
Mailing Address 228 S Washington St	08/30/2023	\$12,119.25
City, State, Zip Code Alexandria, VA 22314-5404		
Purpose of Disbursement (Optional) Insurance	Aggregate year-to-date	\$12,119.25
Nicholas Eden		
Mailing Address 1106 Woodward Ave	08/01/2023	\$1,528.98
City, State, Zip Code Gulfport, MS 39501-2469		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$5,330.82
Jones Mandel		
Mailing Address 1752 NW Market St	08/11/2023	\$6,017.44
City, State, Zip Code Seattle, WA 98107-5264		
Purpose of Disbursement (Optional) Research Consulting	Aggregate year-to-date	\$26,227.80

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	08/24/2023	\$63.42
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Daniel Trimble	Date (Mo., Day, Year) 08/15/2023	Amount of each disbursement this period \$1,635.26
Mailing Address 8 Iris Ln		
City, State, Zip Code Redding, CT 06896-2112		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$7,439.89
Full Name Benjamin Nordstrom	Date (Mo., Day, Year) 09/15/2023	Amount of each disbursement this period \$897.64
Mailing Address 711 Ridgewood Manor Dr		
City, State, Zip Code Oxford, MS 38655-2413		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$897.64
Full Name Shell Oil Co	Date (Mo., Day, Year) 09/19/2023	Amount of each disbursement this period \$93.57
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Abby O'Keefe	Date (Mo., Day, Year) 08/01/2023	Amount of each disbursement this period \$2,974.48
Mailing Address 1404 Highland Valley Cir		
City, State, Zip Code Wildwood, MO 63005-4259		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$34,921.55

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amazon, Inc.	08/21/2023	\$196.80
Mailing Address 410 Terry Ave N		
City, State, Zip Code Seattle, WA 98109-5210		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$2,195.37
Texaco, Inc.	08/31/2023	\$16.02
Mailing Address 2000 Westchester Ave		
City, State, Zip Code White Plains, NY 10604		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$348.48
Tai Sims	09/15/2023	\$2,484.86
Mailing Address 5049 Wishing Well Dr		
City, State, Zip Code Grand Blanc, MI 48439-4239		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$7,454.58
Expedia.com	09/25/2023	\$400.94
Mailing Address 1111 Expedia Group Way W		
City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,467.36
Shell Oil Co	08/07/2023	\$33.63
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name Michael Waller	Date (Mo., Day, Year) 08/01/2023	Amount of each disbursement this period \$1,994.23
Mailing Address 103 Redbud Dr		
City, State, Zip Code Hendersonville, TN 37075-3982		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,293.91
Full Name Walmart	Date (Mo., Day, Year) 08/31/2023	Amount of each disbursement this period \$11.47
Mailing Address 702 SW 8th St		
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Full Name American Airlines	Date (Mo., Day, Year) 09/25/2023	Amount of each disbursement this period \$236.70
Mailing Address 1 Skyview Dr		
City, State, Zip Code Fort Worth, TX 76155-1801		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$257.56
Full Name Texaco, Inc.	Date (Mo., Day, Year) 08/17/2023	Amount of each disbursement this period \$51.68
Mailing Address 2000 Westchester Ave		
City, State, Zip Code White Plains, NY 10604		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$348.48
Full Name Booking.com	Date (Mo., Day, Year) 08/28/2023	Amount of each disbursement this period \$223.26
Mailing Address 28 Liberty St		
City, State, Zip Code New York, NY 10005-1499		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$525.04

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
BEG LLC		
Mailing Address 123 Woodgate Dr	09/18/2023	\$250.00
City, State, Zip Code Brandon, MS 39042-2176		
Purpose of Disbursement (Optional) Event Sponsorship	Aggregate year-to-date	\$250.00
Full Name Chevron Stations	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 6001 Bollinger Canyon Rd	08/10/2023	\$54.06
City, State, Zip Code San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,028.09
Full Name Morgan Benjamin	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4212 28th St	09/01/2023	\$1,812.30
City, State, Zip Code Long Island City, NY 11101-6258		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$14,778.18
Full Name Comfort Inn	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 10750 Columbia Pike	09/05/2023	\$2.00
City, State, Zip Code Silver Spring, MD 20901-4402		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$755.93
Full Name Walmart	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 702 SW 8th St	09/15/2023	\$264.42
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Towne Center Properties LLC	08/08/2023	\$1,525.00
Mailing Address PO Box 321149		
City, State, Zip Code Flowood, MS 39232-1149		
Purpose of Disbursement (Optional) Rent and Utilities	Aggregate year-to-date	\$1,550.00
Vision	08/08/2023	\$14,225.50
Mailing Address 9346 Telge Rd		
City, State, Zip Code Houston, TX 77095-5107		
Purpose of Disbursement (Optional) Direct Mail Production, Printing, and Postage	Aggregate year-to-date	\$38,300.84
Ethan Cox	09/01/2023	\$1,994.23
Mailing Address 3614 N Fremont St		
City, State, Zip Code Chicago, IL 60613-4372		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$31,666.54
Dodge's Store	08/21/2023	\$11.30
Mailing Address 2290 W Main St		
City, State, Zip Code Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$510.61
Julie McDermott	09/12/2023	\$457.80
Mailing Address 1119 Bratton Rd		
City, State, Zip Code New Albany, MS 38652-9328		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$12,898.83

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Vision	09/05/2023	\$11,868.65
Mailing Address 9346 Telge Rd		
City, State, Zip Code Houston, TX 77095-5107		
Purpose of Disbursement (Optional) Direct Mail Production, Printing, and Postage	Aggregate year-to-date	\$38,300.84
Shell Oil Co	09/26/2023	\$64.74
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Domino's Pizza	09/07/2023	\$100.26
Mailing Address 30 Frank Lloyd Wright Dr		
City, State, Zip Code Ann Arbor, MI 48105-9757		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$271.01
Paul Carter	08/21/2023	\$50.00
Mailing Address 2615 Blackfoot Rd		
City, State, Zip Code Vancleave, MS 39565-8447		
Purpose of Disbursement (Optional) Contribution Refund	Aggregate year-to-date	\$225.00
Angelique LaCour	09/01/2023	\$1,642.51
Mailing Address PO Box 2585		
City, State, Zip Code Bay St Louis, MS 39521-2585		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,243.01

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Google		
Mailing Address 1600 Amphitheatre Pkwy	09/05/2023	\$383.61
City, State, Zip Code Mountain View, CA 94043-1351		
Purpose of Disbursement (Optional) Email Services	Aggregate year-to-date	\$1,821.27
Walmart		
Mailing Address 702 SW 8th St	09/25/2023	\$10.51
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Greta Presley		
Mailing Address 182 Verona Ave	09/01/2023	\$1,623.42
City, State, Zip Code Nettleton, MS 38858-6004		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,544.69
Hilton Hotels		
Mailing Address 7930 Jones Branch Dr	07/31/2023	\$206.08
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,705.36
ALG Polling, Inc.		
Mailing Address 260 Commerce St	09/26/2023	\$25,350.00
City, State, Zip Code Montgomery, AL 36104-2546		
Purpose of Disbursement (Optional) Research Consultant	Aggregate year-to-date	\$245,900.00

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
La Cour Kitchen and Bar		
Mailing Address 4500 Interstate 55 North Frontage Rd	09/08/2023	\$270.90
City, State, Zip Code Jackson, MS		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$270.90
Old Town Media		
Mailing Address 114 Quay St	08/11/2023	\$291,000.00
City, State, Zip Code Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional) Advertising	Aggregate year-to-date	\$3,808,344.00
Payroll Data Processing		
Mailing Address 3501 E Frontage Rd	09/01/2023	\$31,128.90
City, State, Zip Code Tampa, FL 33607-1723		
Purpose of Disbursement (Optional) Payroll Taxes	Aggregate year-to-date	\$261,579.77
Jefferson Stevens, LLC		
Mailing Address 5907 Baxter Dr	08/01/2023	\$942.93
City, State, Zip Code Jackson, MS 39211-3319		
Purpose of Disbursement (Optional) Reimbursement - Travel, Printing of Campaign Mater	Aggregate year-to-date	\$45,003.89
Reservations.com		
Mailing Address 390 N Orange Ave	09/14/2023	\$317.78
City, State, Zip Code Orlando, FL 32801-1675		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$345.87

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Morgan Benjamin	08/15/2023	\$1,812.30
Mailing Address 4212 28th St		
City, State, Zip Code Long Island City, NY 11101-6258		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$14,778.18
Jada Barnes	09/15/2023	\$1,675.00
Mailing Address 395 Lampton Hilltop Rd		
City, State, Zip Code Columbia, MS 39429-9189		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$11,103.01
David Miotke	09/25/2023	\$500.00
Mailing Address 1626 Francisco St		
City, State, Zip Code Berkeley, CA 94703-1255		
Purpose of Disbursement (Optional) Contribution Refund	Aggregate year-to-date	\$500.00
Shell Oil Co	09/11/2023	\$50.22
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Número	08/02/2023	\$904.09
Mailing Address 200 Spectrum Center Dr		
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31

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ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chick-Fil-A		
Mailing Address 5200 Buffington Rd	09/22/2023	\$34.93
City, State, Zip Code Atlanta, GA 30349-2945		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$253.98
Shyanne Davis		
Mailing Address 1020 Morris Davis Rd	08/15/2023	\$2,157.93
City, State, Zip Code Mccomb, MS 39648-2679		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,974.02
Louise Cole		
Mailing Address 518 N Church St	09/15/2023	\$1,635.97
City, State, Zip Code Okolona, MS 38860-1017		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$9,012.67
Morgan Benjamin		
Mailing Address 4212 28th St	08/01/2023	\$1,812.30
City, State, Zip Code Long Island City, NY 11101-6258		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$14,778.18
Shell Oil Co		
Mailing Address PO Box 2463	09/13/2023	\$18.15
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services	09/04/2023	\$744.38
Mailing Address PO Box 382110		
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$29,206.03
Full Name Jake Laves	Date (Mo., Day, Year) 08/15/2023	Amount of each disbursement this period \$580.74
Mailing Address 699 Nation Hills Dr		
City, State, Zip Code Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional) Reimbursement - Travel, Communication Tools	Aggregate year-to-date	\$37,974.03
Full Name Ron Owens	Date (Mo., Day, Year) 08/15/2023	Amount of each disbursement this period \$3,935.75
Mailing Address 3545 Mitchell Rd		
City, State, Zip Code Tupelo, MS 38801-9616		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$65,296.21
Full Name Angelique LaCour	Date (Mo., Day, Year) 09/15/2023	Amount of each disbursement this period \$1,600.50
Mailing Address PO Box 2585		
City, State, Zip Code Bay St Louis, MS 39521-2585		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,243.01
Full Name Jeffrey Hulum	Date (Mo., Day, Year) 08/07/2023	Amount of each disbursement this period \$250.00
Mailing Address 3601 Oak Ave		
City, State, Zip Code Gulfport, MS 39507-3106		
Purpose of Disbursement (Optional) Contribution Refund	Aggregate year-to-date	\$250.00

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address 702 SW 8th St	09/29/2023	\$42.46
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Aaron Facio-Cortes		
Mailing Address 27006 Fordham Dr	08/01/2023	\$1,994.23
City, State, Zip Code Wesley Chapel, FL 33544-8730		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,614.63
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address PO Box 2463	09/21/2023	\$75.16
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address PO Box 2463	08/24/2023	\$87.53
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Michael Waller		
Mailing Address 103 Redbud Dr	08/15/2023	\$2,055.35
City, State, Zip Code Hendersonville, TN 37075-3982		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$16,293.91

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Abby O'Keefe	09/15/2023	\$2,974.48
Mailing Address 1404 Highland Valley Cir		
City, State, Zip Code Wildwood, MO 63005-4259		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$34,921.55
Full Name Ron Owens	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 3545 Mitchell Rd	08/01/2023	\$3,935.75
City, State, Zip Code Tupelo, MS 38801-9616		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$65,296.21
Full Name Jacob Smith	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4100 N Gloster St	09/15/2023	\$2,811.60
City, State, Zip Code Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$25,419.43
Full Name Expedia.com	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1111 Expedia Group Way W	09/25/2023	\$291.16
City, State, Zip Code Seattle, WA 98119-1111		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$5,467.36
Full Name Jacob Smith	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4100 N Gloster St	08/07/2023	\$394.47
City, State, Zip Code Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional) Reimbursement - Event Catering	Aggregate year-to-date	\$25,419.43

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	08/07/2023	\$26.13
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Amazon, Inc.	08/28/2023	\$699.63
Mailing Address 410 Terry Ave N		
City, State, Zip Code Seattle, WA 98109-5210		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$2,195.37
ExxonMobil	08/22/2023	\$88.96
Mailing Address 5959 Las Colinas Blvd		
City, State, Zip Code Irving, TX 75039-4202		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$466.89
Número	08/03/2023	\$344.07
Mailing Address 200 Spectrum Center Dr		
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Walmart	09/05/2023	\$301.65
Mailing Address 702 SW 8th St		
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
American Airlines		
Mailing Address 1 Skyview Dr	09/25/2023	\$20.86
City, State, Zip Code Fort Worth, TX 76155-1801		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$257.56
Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	08/29/2023	\$2,442.24
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Full Name Booking.com	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 28 Liberty St	09/19/2023	\$301.78
City, State, Zip Code New York, NY 10005-1499		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$525.04
Full Name Adam Beyer	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4288 N Gloster St	09/01/2023	\$2,974.48
City, State, Zip Code Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$38,021.67
Full Name Comfort Inn	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 10750 Columbia Pike	09/05/2023	\$4.00
City, State, Zip Code Silver Spring, MD 20901-4402		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$755.93

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jones Mandel		
Mailing Address 1752 NW Market St	09/07/2023	\$8,210.36
City, State, Zip Code Seattle, WA 98107-5264		
Purpose of Disbursement (Optional) Research Consulting	Aggregate year-to-date	\$26,227.80
Full Name Chevron Stations	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 6001 Bollinger Canyon Rd	08/07/2023	\$78.33
City, State, Zip Code San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,028.09
Full Name Walmart	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 702 SW 8th St	09/18/2023	\$164.50
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Full Name LaWanda Dickens	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 150 Park Circle Dr	09/01/2023	\$774.34
City, State, Zip Code Flowood, MS 39232-7635		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$774.34
Full Name John J. Miller	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 30 Rock Hill Rd	09/12/2023	\$233.40
City, State, Zip Code Sumrall, MS 39482-9537		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$3,756.58

Name of Candidate or Committee Brandon PresleyReporting Period 7/30/2023 through 9/30/2023

ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jefferson Stevens, LLC	09/05/2023	\$7,500.00
Mailing Address 5907 Baxter Dr		
City, State, Zip Code Jackson, MS 39211-3319		
Purpose of Disbursement (Optional) Political Strategy Consultant	Aggregate year-to-date	\$45,003.89
Shell Oil Co	09/27/2023	\$38.15
Mailing Address PO Box 2463		
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Dodge's Store	08/09/2023	\$47.62
Mailing Address 2290 W Main St		
City, State, Zip Code Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$510.61
Paul Carter	08/21/2023	\$100.00
Mailing Address 2615 Blackfoot Rd		
City, State, Zip Code Vanceleave, MS 39565-8447		
Purpose of Disbursement (Optional) Contribution Refund	Aggregate year-to-date	\$225.00
Walker Lake	09/01/2023	\$512.54
Mailing Address 1850 Highland Ter		
City, State, Zip Code Jackson, MS 39211-5718		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,224.57

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ITEMIZED DISBURSEMENTS

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

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Entergy		
Mailing Address		
PO Box 8105	08/04/2023	\$85.80
City, State, Zip Code		
Baton Rouge, LA 70891-8105		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$395.20
Utilities		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Google		
Mailing Address		
1600 Amphitheatre Pkwy	09/05/2023	\$437.37
City, State, Zip Code		
Mountain View, CA 94043-1351		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,821.27
Email Services		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	09/26/2023	\$107.96
City, State, Zip Code		
Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,216.10
Office Supplies		