

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 23-15-821, 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	09/20/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/30/2023	\$500.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$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	08/10/2023	\$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 Caleb Dana	09/10/2023	\$35.00
Mailing Address 103 Pinetrail Pl		
City, State, Zip Code Madison, MS 39110-8008		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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	09/12/2023	\$50.00
Mailing Address 3136 White Magnolia Chase SW		
City, State, Zip Code Gainesville, GA 30504-5587		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	08/03/2023	\$250.00
Mailing Address 4450 Old Canton Rd		
City, State, Zip Code Jackson, MS 39211-5991		
Name of Employer (Required) Morgan & Morgan		
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 Ann Smith	08/13/2023	\$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 Robert Latham	09/13/2023	\$100.00
Mailing Address 2090 Jefferson Pkwy		
City, State, Zip Code Hernando, MS 38632-5905		
Name of Employer (Required) Not Employed		
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 Beth Stoor	08/04/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Fluker	09/25/2023	\$25.00
Mailing Address 404 Huntington Dr		
City, State, Zip Code Jackson, MS 39272-4486		
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 Lucile Mccook	08/15/2023	\$500.00
Mailing Address 142 County Road 271		
City, State, Zip Code Oxford, MS 38655-9207		
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 Larry George	09/05/2023	\$100.00
Mailing Address 1999 Brasher Rd		
City, State, Zip Code Biloxi, MS 39532-4357		
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 Joseph Sheppard	09/15/2023	\$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 Michael F. Fink	08/06/2023	\$500.00
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	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	08/16/2023	\$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 Denise Pilgrim	08/26/2023	\$100.00
Mailing Address 108 Bellingham Dr		
City, State, Zip Code Madison, MS 39110-8524		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	09/06/2023	\$8.00
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 Michael O'Neal	09/16/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Irvin	09/17/2023	\$25.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/07/2023	\$1,000.00
Mailing Address 1068 Spring House Rd		
City, State, Zip Code Malvern, AR 72104-7115		
Name of Employer (Required) Not Employed		
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 Lori Karny	09/18/2023	\$18.00
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 Faye Cox	08/18/2023	\$25.00
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 Richard Smead	08/28/2023	\$500.00
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 Patsy H. Johnson	09/29/2023	\$300.00
Mailing Address 59 County Road 7061		
City, State, Zip Code Booneville, MS 38829-9591		
Name of Employer (Required) PACTconsulting, LLC		
Occupation (Required) Business Consultant	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	08/03/2023	\$250.00
Mailing Address 28618 8th Pl S		
City, State, Zip Code Federal Way, WA 98003-3118		
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 Steven Smith	09/13/2023	\$25.00
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 Jerry Meadors	09/24/2023	\$25.00
Mailing Address PO Box 369		
City, State, Zip Code Kiln, MS 39556-0369		
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 Heather Denison	09/24/2023	\$200.00
Mailing Address 104 Temple Ter		
City, State, Zip Code Ocean Springs, MS 39564-5402		
Name of Employer (Required) Self Employed		
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	09/17/2023	\$250.00
Mailing Address 917 Old Taylor Rd		
City, State, Zip Code Oxford, MS 38655-4637		
Name of Employer (Required) Not Employed		
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 Richard G. Topp	09/27/2023	\$250.00
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	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	08/07/2023	\$5.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/27/2023	\$100.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	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 Joanna Shows	09/30/2023	\$100.00
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 Brian Fisher	07/30/2023	\$250.00
Mailing Address 1311 Webster St		
City, State, Zip Code Alameda, CA 94501-3804		
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	08/20/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/20/2023	\$50.00
Mailing Address 4830 Old West Point Rd		
City, State, Zip Code Starkville, MS 39759-8190		
Name of Employer (Required) Not Employed		
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 Tor Kwembe	08/30/2023	\$25.00
Mailing Address 4100 Poplar Ave		
City, State, Zip Code Richton Park, IL 60471-1236		
Name of Employer (Required) Jackson State University		
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 Frank Witherspoon	08/11/2023	\$25.00
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 Judith Wiener	09/22/2023	\$100.00
Mailing Address 1621 Devine St		
City, State, Zip Code Jackson, MS 39202-1314		
Name of Employer (Required) Not Employed		
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	08/22/2023	\$50.00
Mailing Address 3136 White Magnolia Chase SW		
City, State, Zip Code Gainesville, GA 30504-5587		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	08/22/2023	\$25.00
Mailing Address 156 County Road 303		
City, State, Zip Code Iuka, MS 38852-7516		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	09/02/2023	\$50.00
Mailing Address 2379 Wendover Dr		
City, State, Zip Code Belden, MS 38826-8644		
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 Jesse White	09/12/2023	\$500.00
Mailing Address 38 Mount Bolus Rd		
City, State, Zip Code Chapel Hill, NC 27514-2635		
Name of Employer (Required) Not Employed		
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	09/23/2023	\$50.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/13/2023	\$100.00
Mailing Address 254 Harding Pl		
City, State, Zip Code Nashville, TN 37205-3727		
Name of Employer (Required) Not Employed		
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	08/03/2023	\$10.00
Mailing Address 317 Autumn Crest Dr		
City, State, Zip Code Ridgeland, MS 39157-2604		
Name of Employer (Required) Self Employed		
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 Jerry Meadors	08/13/2023	\$50.00
Mailing Address PO Box 369		
City, State, Zip Code Kiln, MS 39556-0369		
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 Richard Ballard	08/23/2023	\$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 Johnie Seal	09/24/2023	\$100.00
Mailing Address 1286 John Amacker Rd		
City, State, Zip Code Poplarville, MS 39470-6396		
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 Stefan Massong	09/25/2023	\$200.00
Mailing Address 307 Wisteria St		
City, State, Zip Code Ocean Springs, MS 39564-2840		
Name of Employer (Required) Self Employed		
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 James Hudson	08/16/2023	\$5,000.00
Mailing Address 131 Park Ave		
City, State, Zip Code Oklahoma City, OK 73102-9051		
Name of Employer (Required) Crowe & Dunlevy		
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	09/16/2023	\$20.00
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 Glenn Oliver	08/28/2023	\$25.00
Mailing Address 5642 Gibson Rd		
City, State, Zip Code Vicksburg, MS 39180-6320		
Name of Employer (Required) Not Employed		
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 Jim Warlick	09/08/2023	\$500.00
Mailing Address 100 Princess St		
City, State, Zip Code Alexandria, VA 22314-2325		
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 Claire Davis	09/19/2023	\$20.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/09/2023	\$250.00
Mailing Address 807 Sth 19Th Ave		
City, State, Zip Code Hattiesburg, MS 39401		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 411 FT LP	09/30/2023	\$1,000.00
Mailing Address PO Box 3948		
City, State, Zip Code Albany, GA 31706-3948		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$2,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Weslie Janeway	08/30/2023	\$5,000.00
Mailing Address 8 E 80th St		
City, State, Zip Code New York, NY 10075-0110		
Name of Employer (Required) Not Employed		
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 John Mcinnis	08/11/2023	\$1,000.00
Mailing Address 2509 Promenade Blvd		
City, State, Zip Code Ocean Springs, MS 39564-8720		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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	09/22/2023	\$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 John Sneed	09/12/2023	\$1,000.00
Mailing Address 9300 Wilshire Blvd		
City, State, Zip Code Beverly Hills, CA 90212-3213		
Name of Employer (Required) Self Employed		
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	09/23/2023	\$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 Jacqueline Brown	08/23/2023	\$1,000.00
Mailing Address 516 Sweetwater Cmns		
City, State, Zip Code Brandon, MS 39047-7433		
Name of Employer (Required) BankPlus		
Occupation (Required) Loan Assistant	Aggregate year-to-date	\$1,000.00

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 Garry Breland	09/03/2023	\$25.00
Mailing Address 138 Jervis Mims Rd		
City, State, Zip Code Hattiesburg, MS 39401-8854		
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 Gary Fredericks	09/14/2023	\$100.00
Mailing Address PO Box 6723		
City, State, Zip Code Gulfport, MS 39506-6723		
Name of Employer (Required) Memorial Health System		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnie Seal	08/04/2023	\$100.00
Mailing Address 1286 John Amacker Rd		
City, State, Zip Code Poplarville, MS 39470-6396		
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 Cherri Musser	08/24/2023	\$50.00
Mailing Address 105 Piute Cir		
City, State, Zip Code Loudon, TN 37774-2138		
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 Patricia Sandusky	09/14/2023	\$100.00
Mailing Address PO Box 119		
City, State, Zip Code Bailey, MS 39320-0119		
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 Graham Slakie	09/25/2023	\$10.00
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 Leesa Golden	08/17/2023	\$100.00
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 R. Bradley	09/07/2023	\$1,000.00
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 Duncan M. Gray III	09/17/2023	\$50.00
Mailing Address 110 Philip Rd		
City, State, Zip Code Oxford, MS 38655-2014		
Name of Employer (Required) Nativity Episcopal Church		
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	09/18/2023	\$50.00
Mailing Address 149 Acacia Ave		
City, State, Zip Code Biloxi, MS 39530-3308		
Name of Employer (Required) Not Employed		
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	08/18/2023	\$1,000.00
Mailing Address 8208 Trinity Rd		
City, State, Zip Code Cordova, TN 38018-6758		
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 Lori Karny	09/29/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/20/2023	\$35.00
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 Nsombi Lambright	09/30/2023	\$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 Clarence E. Smith	09/30/2023	\$25.00
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 Marcy Petrini	07/30/2023	\$50.00
Mailing Address 950 Fairfax Cir		
City, State, Zip Code Jackson, MS 39211-4250		
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 Marshall Morgan	08/10/2023	\$100.00
Mailing Address 281 Pat Luckett Rd		
City, State, Zip Code Canton, MS 39046-8952		
Name of Employer (Required) Not Employed		
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	08/30/2023	\$50.00
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 Dick Ledoux	08/30/2023	\$25.00
Mailing Address 488 CR 1460		
City, State, Zip Code Tupelo, MS 38804		
Name of Employer (Required) Insource Solutions		
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	07/31/2023	\$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 Cornelis Gispen	08/31/2023	\$200.00
Mailing Address 1112 S 11th St		
City, State, Zip Code Oxford, MS 38655-4610		
Name of Employer (Required) Not Employed		
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	09/22/2023	\$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 Barbara Rankin	08/12/2023	\$25.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/12/2023	\$50.00
Mailing Address 104 Bristol Way		
City, State, Zip Code Madison, MS 39110-5029		
Name of Employer (Required) Takeda		
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	09/24/2023	\$100.00
Mailing Address 520 Deer Creek Dr		
City, State, Zip Code Oxford, MS 38655-8559		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name E. K. Pruitt	08/24/2023	\$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 Bela Chain Jr	09/04/2023	\$50.00
Mailing Address 243 Saint Andrews Cir		
City, State, Zip Code Oxford, MS 38655-2641		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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 Patsy R. Brumfield	09/15/2023	\$50.00
Mailing Address 128 Woodland Ridge Dr		
City, State, Zip Code Mccomb, MS 39648-6338		
Name of Employer (Required) Not Employed		
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	08/05/2023	\$100.00
Mailing Address 1329 Willis Rd		
City, State, Zip Code Carthage, MS 39051-9126		
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 Gina Seago	08/25/2023	\$500.00
Mailing Address 139 Vinings Dr		
City, State, Zip Code Madison, MS 39110-6535		
Name of Employer (Required) Baptist Premier		
Occupation (Required) Nurse Practitioner	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	08/25/2023	\$50.00
Mailing Address 105 Colony Crown		
City, State, Zip Code Brandon, MS 39047-8202		
Name of Employer (Required) Not Employed		
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 Mark McClinton	09/19/2023	\$500.00
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	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	09/29/2023	\$100.00
Mailing Address 513 Roses Bluff Dr		
City, State, Zip Code Madison, MS 39110-7545		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia Morse	08/09/2023	\$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 Kevin Shirley	09/30/2023	\$50.00
Mailing Address 114 Harvey St		
City, State, Zip Code Belzoni, MS 39038-3112		
Name of Employer (Required) Self Employed		
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 Robert Hamilton	09/30/2023	\$10.00
Mailing Address 3701 58th Ave		
City, State, Zip Code Meridian, MS 39307-2905		
Name of Employer (Required) Self Employed		
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	08/30/2023	\$1,000.00
Mailing Address PO Box 496		
City, State, Zip Code Tupelo, MS 38802-0496		
Name of Employer (Required) Webb Sanders Williams & Williams		
Occupation (Required) Attorney	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	09/10/2023	\$250.00
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	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	08/21/2023	\$1,000.00
Mailing Address 810 Gillespie St		
City, State, Zip Code Jackson, MS 39202-1714		
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 Martha Cheney	08/31/2023	\$500.00
Mailing Address 3155 Pontocola Rd		
City, State, Zip Code Pontotoc, MS 38863-7515		
Name of Employer (Required) Not Employed		
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 Mary Haskell	09/22/2023	\$50.00
Mailing Address 6 Trotting Horse Dr		
City, State, Zip Code Lexington, MA 02421-6339		
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 Lori Karny	08/22/2023	\$18.00
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 Joseph Alsop	09/13/2023	\$500.00
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	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	08/04/2023	\$250.00
Mailing Address 190 Gateway Dr		
City, State, Zip Code Brandon, MS 39042-3137		
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 Kelvin Butler	09/15/2023	\$1,000.00
Mailing Address 2018 Hawthorne Dr		
City, State, Zip Code Mccomb, MS 39648-7597		
Name of Employer (Required) City of Mccomb		
Occupation (Required) City 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 Laura Hamilton	08/15/2023	\$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 Janice Jackson	09/15/2023	\$34.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$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	09/26/2023	\$100.00
Mailing Address 200 Craft St		
City, State, Zip Code Holly Springs, MS 38635-2912		
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 Lori Karny	09/16/2023	\$16.00
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 Anita Yarbrough	09/28/2023	\$25.00
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 Betty Ware	09/08/2023	\$500.00
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 Trudy Hart	08/19/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/20/2023	\$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 Tor Kwembe	07/30/2023	\$25.00
Mailing Address 4100 Poplar Ave		
City, State, Zip Code Richton Park, IL 60471-1236		
Name of Employer (Required) Jackson State University		
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 Anita Yarbrough	08/20/2023	\$25.00
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 Jean Kuykendall	08/30/2023	\$200.00
Mailing Address 681 Gaines Rd		
City, State, Zip Code Hernando, MS 38632-9069		
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 Paul Stein	08/31/2023	\$1,000.00
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	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	08/31/2023	\$25.00
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	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	09/01/2023	\$10.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/11/2023	\$50.00
Mailing Address 108 Coachmans Rd		
City, State, Zip Code Madison, MS 39110-9227		
Name of Employer (Required) Not Employed		
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 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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	08/25/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/26/2023	\$100.00
Mailing Address 6007 SW 240th St		
City, State, Zip Code Vashon, WA 98070-7247		
Name of Employer (Required) Health Net		
Occupation (Required) 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	09/26/2023	\$1,000.00
Mailing Address PO Box 5232		
City, State, Zip Code Biloxi, MS 39534-0232		
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 Bradly S. Macnealy	08/26/2023	\$1,000.00
Mailing Address 164 Gene Lester Rd		
City, State, Zip Code Isola, MS 38754-9239		
Name of Employer (Required) Self Employed		
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	08/17/2023	\$25.00
Mailing Address 211 Stone Rd		
City, State, Zip Code Oxford, MS 38655-2021		
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 Andrew Jenkins	08/27/2023	\$50.00
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 Leslie Fye	09/07/2023	\$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 Lori Karny	09/07/2023	\$16.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/18/2023	\$50.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/28/2023	\$20.00
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 Patrick J. O'Connor	08/18/2023	\$2,500.00
Mailing Address 541 E Scenic Dr		
City, State, Zip Code Pass Christian, MS 39571-4510		
Name of Employer (Required) Self Employed		
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	08/18/2023	\$250.00
Mailing Address 1711 Anderson Rd		
City, State, Zip Code Oxford, MS 38655-2570		
Name of Employer (Required) Not Employed		
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	09/20/2023	\$25.00
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 Roxann Jackson	09/20/2023	\$250.00
Mailing Address 1713 Reserve Dr		
City, State, Zip Code Clinton, MS 39056-5667		
Name of Employer (Required) Submittable		
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 David Kaye	09/30/2023	\$50.00
Mailing Address 123 Nottingham Ter		
City, State, Zip Code Buffalo, NY 14216-3504		
Name of Employer (Required) University at Buffalo		
Occupation (Required) Faculty	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	09/30/2023	\$20.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	07/30/2023	\$100.00
Mailing Address 255 Brook Ct		
City, State, Zip Code Jackson, MS 39208-4160		
Name of Employer (Required) Begley Law Firm		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roger McDowell	08/31/2023	\$250.00
Mailing Address 1904 Fuller St		
City, State, Zip Code Hattiesburg, MS 39401-7544		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brent Buehrer	08/31/2023	\$100.00
Mailing Address 3249 Pepper Ridge Dr		
City, State, Zip Code Maumee, OH 43537-9697		
Name of Employer (Required) Buehrer Group Architecture & Engineering		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joseph Ammerman	08/31/2023	\$200.00
Mailing Address 2185 Longview Rd		
City, State, Zip Code Starkville, MS 39759-8974		
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 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	08/12/2023	\$20.00
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 Howard Katz	08/22/2023	\$300.00
Mailing Address 114 Camden Lake Dr		
City, State, Zip Code Madison, MS 39110-7030		
Name of Employer (Required) Gulf State		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Parrott	08/22/2023	\$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 Richard Ballard	09/23/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/03/2023	\$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) _____	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	08/16/2023	\$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 Frank Witherspoon Mailing Address 910 Lincoln Ave City, State, Zip Code Oxford, MS 38655-4328 Name of Employer (Required) Not Employed	08/26/2023	\$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 Dennis Truax Mailing Address 913 Southgate Dr City, State, Zip Code Starkville, MS 39759-9434 Name of Employer (Required) Self Employed	09/16/2023	\$25.00
Occupation (Required) Engineer	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	09/27/2023	\$1,000.00
Mailing Address 134 Bayou Rd		
City, State, Zip Code Greenville, MS 38701-7725		
Name of Employer (Required) Not Employed		
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	09/27/2023	\$50.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$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	08/07/2023	\$25.00
Mailing Address 206 Wood St		
City, State, Zip Code Water Valley, MS 38965-2603		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,425.00
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	08/07/2023	\$250.00
Mailing Address 5516 Cavendish Ct		
City, State, Zip Code Plano, TX 75093-4231		
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 Mikhail Prudnikov	09/28/2023	\$250.00
Mailing Address 965 Folsom St		
City, State, Zip Code San Francisco, CA 94107-1079		
Name of Employer (Required) Not Employed		
Occupation (Required) University Student	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	09/18/2023	\$500.00
Mailing Address 209 Lameuse St		
City, State, Zip Code Biloxi, MS 39530-3107		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James P P. Coleman	08/18/2023	\$250.00
Mailing Address 7357 Savannah Dr		
City, State, Zip Code Marion, MS 39342-9004		
Name of Employer (Required) Vulcan Imaging Associates		
Occupation (Required) Diagnostic Radiologist	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	09/08/2023	\$50.00
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	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	09/08/2023	\$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 Willy Cherry	08/09/2023	\$25.00
Mailing Address 116 Colonial Dr		
City, State, Zip Code Cleveland, MS 38732-2804		
Name of Employer (Required) HealthCare Plus		
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	09/30/2023	\$35.71
Mailing Address 4876 Brookwood Pl		
City, State, Zip Code Jackson, MS 39272-5706		
Name of Employer (Required) Not Employed		
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	07/30/2023	\$25.00
Mailing Address 108 Coachmans Rd		
City, State, Zip Code Madison, MS 39110-9227		
Name of Employer (Required) Not Employed		
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	08/31/2023	\$100.00
Mailing Address 609 Spring Camp Rd		
City, State, Zip Code Ellijay, GA 30536-8557		
Name of Employer (Required) Georgia Institute of Technology		
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 Sidney Whitehurst	08/22/2023	\$100.00
Mailing Address PO Box 966		
City, State, Zip Code Iuka, MS 38852-0966		
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 Adrienne 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) 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 Alan Saleski	09/13/2023	\$50.00
Mailing Address 2116 Harrison St		
City, State, Zip Code Evanston, IL 60201-2223		
Name of Employer (Required) Loyola University Chicago		
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	08/08/2023	\$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 Denotee Martin	08/18/2023	\$100.00
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 James D. Bryan	08/08/2023	\$500.00
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	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	08/09/2023	\$50.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/09/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/09/2023	\$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 James Feeley	08/10/2023	\$50.00
Mailing Address 7371 N Aberdeen Dr		
City, State, Zip Code Pass Christian, MS 39571-7012		
Name of Employer (Required) Self Employed		
Occupation (Required) 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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carol Taff	09/21/2023	\$50.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/31/2023	\$100.00
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	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	08/31/2023	\$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 Charles Lacavera	09/23/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Latham	08/03/2023	\$500.00
Mailing Address 2090 Jefferson Pkwy		
City, State, Zip Code Hernando, MS 38632-5905		
Name of Employer (Required) Not Employed		
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	09/03/2023	\$250.00
Mailing Address 292 Highway 2 NE		
City, State, Zip Code Corinth, MS 38834-6906		
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 Curtis Gray	09/24/2023	\$50.00
Mailing Address 37 County Road 317		
City, State, Zip Code Heidelberg, MS 39439-3679		
Name of Employer (Required) Jasper		
Occupation (Required) County Supervisor	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	08/04/2023	\$1,000.00
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	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	08/14/2023	\$1,000.00
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 Bruce Bellande	08/24/2023	\$100.00
Mailing Address 318 N 16th St		
City, State, Zip Code Oxford, MS 38655-3712		
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 Eugene Bramlett Jr	08/05/2023	\$50.00
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	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	09/26/2023	\$200.00
Mailing Address 4025 Dunsinane St		
City, State, Zip Code Ocean Springs, MS 39564-3444		
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 Hines Hall	09/06/2023	\$250.00
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	\$1,000.00

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	09/06/2023	\$1,000.00
Mailing Address 5025 Wayneland Dr		
City, State, Zip Code Jackson, MS 39211-4431		
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 Ron Coleman	09/16/2023	\$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 Susan Goldhor	09/27/2023	\$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 Ted Wilson	09/28/2023	\$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 Robert Price	08/08/2023	\$5,000.00
Mailing Address 7777 Fay Ave		
City, State, Zip Code La Jolla, CA 92037-4327		
Name of Employer (Required) Pricesmart Inc.		
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	08/28/2023	\$500.00
Mailing Address 703 N 7th Ave		
City, State, Zip Code Laurel, MS 39440-3468		
Name of Employer (Required) Sanderson Farms		
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	08/28/2023	\$250.00
Mailing Address 831 Cedar Lake Rd		
City, State, Zip Code Biloxi, MS 39532-4671		
Name of Employer (Required) Not Employed		
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	08/28/2023	\$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 David E. Brevard	09/29/2023	\$1,000.00
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	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	09/19/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kelly Coleman	09/30/2023	\$500.00
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 Lillie Randolph	09/30/2023	\$25.00
Mailing Address 117 Harris St		
City, State, Zip Code Nettleton, MS 38858-5964		
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 Sarah S. Landry	08/01/2023	\$100.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Baler	08/11/2023	\$50.00
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 Tomie Green	08/21/2023	\$25.00
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 Dorsey R. Carson Jr	08/31/2023	\$500.00
Mailing Address 2431 Lake Cir		
City, State, Zip Code Jackson, MS 39211-6622		
Name of Employer (Required) Carson Law Group		
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	09/22/2023	\$50.00
Mailing Address 10611 County Road 500		
City, State, Zip Code Ripley, MS 38663-9199		
Name of Employer (Required) Not Employed		
Occupation (Required) 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 Mary Macwade	09/22/2023	\$1,000.00
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	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	08/02/2023	\$275.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/02/2023	\$10.00
Mailing Address 451 Bordeaux Cv		
City, State, Zip Code Biloxi, MS 39531-2296		
Name of Employer (Required) Memorial Health Group		
Occupation (Required) Physician	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	09/12/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne Walsh	09/23/2023	\$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 Dannie Ball	08/03/2023	\$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 J. Dudley Butler	08/03/2023	\$500.00
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	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	08/05/2023	\$50.00
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 Sumati Thomas	08/15/2023	\$10.00
Mailing Address 4146 Crestview Pl		
City, State, Zip Code Jackson, MS 39211-6404		
Name of Employer (Required) Change Research		
Occupation (Required) Analyst	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	08/25/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eric Beamon	09/05/2023	\$10.00
Mailing Address 15055 Swan Lake Blvd		
City, State, Zip Code Gulfport, MS 39503-8613		
Name of Employer (Required) Not Employed		
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 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	09/28/2023	\$50.00
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 Owen Fairbank	08/28/2023	\$250.00
Mailing Address 815 Van Buren St		
City, State, Zip Code Port Townsend, WA 98368-8052		
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 Paige Lawrence	09/29/2023	\$100.00
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	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	09/29/2023	\$500.00
Mailing Address 1239 Winwood Cv		
City, State, Zip Code Tupelo, MS 38801-6472		
Name of Employer (Required) Sullivan Insurance Solutions		
Occupation (Required) Business Owner	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	08/01/2023	\$100.00
Mailing Address 1112 S 11th St		
City, State, Zip Code Oxford, MS 38655-4610		
Name of Employer (Required) Not Employed		
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 Edson Griswold	08/31/2023	\$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 Kathy Olsen	09/22/2023	\$10,000.00
Mailing Address 4416 Sunnybrook Dr		
City, State, Zip Code Nashville, TN 37205-3860		
Name of Employer (Required) Not Employed		
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 John Patterson	09/22/2023	\$500.00
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	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	08/12/2023	\$50.00
Mailing Address 1435 Saint Ann St		
City, State, Zip Code Jackson, MS 39202-1847		
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 Andrea Walker	09/12/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/03/2023	\$40.00
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 Cynthia Yap	08/03/2023	\$10.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/24/2023	\$100.00
Mailing Address 318 N 16th St		
City, State, Zip Code Oxford, MS 38655-3712		
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 Gregory E. Brock	09/24/2023	\$1,000.00
Mailing Address 208 W Marion Ave		
City, State, Zip Code Crystal Springs, MS 39059-2714		
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 John R. Bradley	08/14/2023	\$1,000.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/04/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/25/2023	\$25.00
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	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	09/15/2023	\$500.00
Mailing Address 526 N 11th St		
City, State, Zip Code Oxford, MS 38655-3108		
Name of Employer (Required) Not Employed		
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	08/16/2023	\$10.00
Mailing Address 317 Autumn Crest Dr		
City, State, Zip Code Ridgeland, MS 39157-2604		
Name of Employer (Required) Self Employed		
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	08/16/2023	\$100.00
Mailing Address 831 Cedar Lake Rd		
City, State, Zip Code Biloxi, MS 39532-4671		
Name of Employer (Required) Not Employed		
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	08/26/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/06/2023	\$200.00
Mailing Address 11 County Road 3064		
City, State, Zip Code Oxford, MS 38655-8354		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Professor	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	09/16/2023	\$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 Doug Hill	09/27/2023	\$250.00
Mailing Address 136 Courtland Dr		
City, State, Zip Code Saltillo, MS 38866-6007		
Name of Employer (Required) Cardiology Associates		
Occupation (Required) Physician	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	09/29/2023	\$100.00
Mailing Address PO Box 1408		
City, State, Zip Code Ridgeland, MS 39158-1408		
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 Allan Benglen	08/09/2023	\$500.00
Mailing Address 1725 Forrest Hill Dr		
City, State, Zip Code Columbus, MS 39701-3530		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,550.00
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 Kathleen Coward	08/29/2023	\$35.00
Mailing Address 6245 Woodland Cir		
City, State, Zip Code Meridian, MS 39305-9082		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Jenkins-Joffe	09/20/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	07/30/2023	\$250.00
Mailing Address 18 Bridgewater Dr		
City, State, Zip Code Hattiesburg, MS 39402-1667		
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 John T. Edge	08/10/2023	\$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 Joey Dumas	08/20/2023	\$5,000.00
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	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	07/31/2023	\$25.00
Mailing Address 5540 Gibson Rd		
City, State, Zip Code Vicksburg, MS 39180-6318		
Name of Employer (Required) Self Employed		
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 Susan Weatherholt	09/22/2023	\$10.00
Mailing Address 207 Greenfield Pl		
City, State, Zip Code Brandon, MS 39047-9007		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael T. Kayes	09/22/2023	\$200.00
Mailing Address 510 Evergreen Dr		
City, State, Zip Code Long Beach, MS 39560-3228		
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 E. K. Pruitt	08/22/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/22/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/02/2023	\$25.00
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	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	09/12/2023	\$10.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/12/2023	\$250.00
Mailing Address 6751 Quiet Ln		
City, State, Zip Code Brentwood, TN 37027-8308		
Name of Employer (Required) Cooley Public Strategies		
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 Robbie D. Fisher	09/13/2023	\$100.00
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	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	09/24/2023	\$10.00
Mailing Address 9 Marie Ave		
City, State, Zip Code Cambridge, MA 02139-1002		
Name of Employer (Required) Tufts University		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Daniel Leist	09/24/2023	\$500.00
Mailing Address 7 Paul Rd		
City, State, Zip Code Medford, MA 02155-2514		
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 Jonathan Hamilton	08/24/2023	\$2,500.00
Mailing Address 4100 Warren St NW		
City, State, Zip Code Washington, DC 20016-2136		
Name of Employer (Required) White & Case LLP		
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 Gary Thompson	09/25/2023	\$200.00
Mailing Address 4742 5th Ave		
City, State, Zip Code Meridian, MS 39305-2823		
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 Eugene Bramlett Jr	09/16/2023	\$25.00
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	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	08/07/2023	\$50.00
Mailing Address 728 N Congress St		
City, State, Zip Code Jackson, MS 39202-3008		
Name of Employer (Required) Self Employed		
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	09/18/2023	\$1,000.00
Mailing Address 2431 Lake Cir		
City, State, Zip Code Jackson, MS 39211-6622		
Name of Employer (Required) Carson Law Group		
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	09/28/2023	\$5.00
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 David Rozier	08/18/2023	\$1,000.00
Mailing Address 303 Woodland Hills Dr		
City, State, Zip Code Oxford, MS 38655-8429		
Name of Employer (Required) MGC Law		
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	08/29/2023	\$250.00
Mailing Address 108 Coachmans Rd		
City, State, Zip Code Madison, MS 39110-9227		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John R. Bradley	09/30/2023	\$100.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	07/30/2023	\$100.00
Mailing Address 6007 SW 240th St		
City, State, Zip Code Vashon, WA 98070-7247		
Name of Employer (Required) Health Net		
Occupation (Required) 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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	08/31/2023	\$20.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barry Powell	09/22/2023	\$500.00
Mailing Address 600 S Pear Orchard Rd		
City, State, Zip Code Ridgeland, MS 39157-4225		
Name of Employer (Required) Not Employed		
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 Faye Cox	08/12/2023	\$25.00
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 Edson Griswold	09/02/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/12/2023	\$250.00
Mailing Address 1132 Windsor Rd		
City, State, Zip Code Teaneck, NJ 07666-2724		
Name of Employer (Required) Morgan State University		
Occupation (Required) Educator	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	08/13/2023	\$5.00
Mailing Address 11 Helen Ln		
City, State, Zip Code Walpole, MA 02081-2046		
Name of Employer (Required) Long and Foster		
Occupation (Required) Recruiter	Aggregate year-to-date	\$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	09/24/2023	\$50.00
Mailing Address 913 Southgate Dr		
City, State, Zip Code Starkville, MS 39759-9434		
Name of Employer (Required) Self Employed		
Occupation (Required) Engineer	Aggregate year-to-date	\$1,671.00
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	09/14/2023	\$500.00
Mailing Address 276 Santini St		
City, State, Zip Code Biloxi, MS 39530-2946		
Name of Employer (Required) MS Center for Justice		
Occupation (Required) Attorney	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	08/05/2023	\$25.00
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	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 Edson Griswold	08/06/2023	\$5.00
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 Debbie Hall	09/16/2023	\$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 Andrew Jenkins	09/18/2023	\$1,000.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/18/2023	\$33.00
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 Colby Langston	08/18/2023	\$500.00
Mailing Address 129 Marcie Dr		
City, State, Zip Code Long Beach, MS 39560-5714		
Name of Employer (Required) Self Employed		
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	09/08/2023	\$1,000.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/29/2023	\$50.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/29/2023	\$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 Susan McCready	09/29/2023	\$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 Rebecca Long	09/30/2023	\$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 Elizabeth Bailey	07/30/2023	\$50.00
Mailing Address 140 Chickasaw Dr		
City, State, Zip Code West Point, MS 39773-3270		
Name of Employer (Required) Not Employed		
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	08/30/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Reita E. Schmidtling	09/10/2023	\$25.00
Mailing Address 102 Driftwood Dr		
City, State, Zip Code Long Beach, MS 39560-5811		
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 Mary Geoghegan	08/21/2023	\$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 Charles H. Hooker Jr	08/21/2023	\$500.00
Mailing Address 1204 Saint Ann St		
City, State, Zip Code Jackson, MS 39202-2148		
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 Jean Fenwick	08/31/2023	\$250.00
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 Ron Coleman	09/22/2023	\$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 Diane Cockrum	08/12/2023	\$25.00
Mailing Address 600 County Road 515		
City, State, Zip Code Ripley, MS 38663-8347		
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 Bernell McGehee	09/23/2023	\$100.00
Mailing Address PO Box 410		
City, State, Zip Code Liberty, MS 39645-0410		
Name of Employer (Required) Self Employed		
Occupation (Required) Accountant	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	09/13/2023	\$50.00
Mailing Address 714 N 14th St		
City, State, Zip Code Oxford, MS 38655-3222		
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 Carla Kirkland	09/13/2023	\$1,000.00
Mailing Address 137 Herons Bay Cir		
City, State, Zip Code Madison, MS 39110-1103		
Name of Employer (Required) The Kirkland Group		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Benjamin Griffith	09/24/2023	\$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 Kathy Davis	09/04/2023	\$500.00
Mailing Address 777 Shady Oaks Cir		
City, State, Zip Code Oxford, MS 38655-5450		
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 Darryl Gibbs	09/25/2023	\$250.00
Mailing Address 128 Livingston Dr		
City, State, Zip Code Madison, MS 39110-2000		
Name of Employer (Required) Chhabra & Gibbs, P.A.		
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 Harold D. Copeland	09/25/2023	\$25.00
Mailing Address PO Box 631145		
City, State, Zip Code Houston, TX 77263-1145		
Name of Employer (Required) Not Employed		
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 Elizabeth Stauter	08/25/2023	\$50.00
Mailing Address 148 Seaside Dr		
City, State, Zip Code Ocean Springs, MS 39564-5145		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	09/05/2023	\$50.00
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	Aggregate year-to-date	\$1,175.00

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 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) _____	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	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) _____	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	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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	08/18/2023	\$33.00
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 George Q. Evans	09/08/2023	\$100.00
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 Thomas Linenberger	09/19/2023	\$200.00
Mailing Address 2584 Rue Palafox		
City, State, Zip Code Biloxi, MS 39531-3733		
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 Kathy Howard	09/29/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/29/2023	\$1,000.00
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	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	08/09/2023	\$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 Robert Conwill	09/30/2023	\$50.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/30/2023	\$500.00
Mailing Address PO Box 128		
City, State, Zip Code Becker, MS 38825-0128		
Name of Employer (Required) Not Employed		
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 Jane Woosley	07/30/2023	\$50.00
Mailing Address 618 Brampton Pl		
City, State, Zip Code Ridgeland, MS 39157-4195		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pamela Pearson	08/20/2023	\$2,500.00
Mailing Address 2301 E 13th St		
City, State, Zip Code Austin, TX 78702-1805		
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 Robert Galloway	08/30/2023	\$250.00
Mailing Address 18 Cedarwood Ln		
City, State, Zip Code Gulfport, MS 39503-6222		
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 Mari Harris	07/31/2023	\$50.00
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	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	09/22/2023	\$500.00
Mailing Address 4404 O Leary Ave		
City, State, Zip Code Pascagoula, MS 39581-2353		
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 Edson Griswold	09/22/2023	\$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 Michael O'Neal	08/12/2023	\$100.00
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 David Fisher	09/23/2023	\$250.00
Mailing Address 1445 Broadhead School Rd		
City, State, Zip Code Greenville, VA 24440-1908		
Name of Employer (Required) Not Employed		
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	09/13/2023	\$250.00
Mailing Address 235 Pine Ridge Dr		
City, State, Zip Code Waveland, MS 39576-3929		
Name of Employer (Required) MEBA Union		
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	09/24/2023	\$100.00
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 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	08/04/2023	\$1,000.00
Mailing Address 4450 Old Canton Rd		
City, State, Zip Code Jackson, MS 39211-5991		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>LLC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Safe and Sound Home Care LLC	08/14/2023	\$1,500.00
Mailing Address PO Box 2136		
City, State, Zip Code Oxford, MS 38655-7136		
Name of Employer (Required)		
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	08/24/2023	\$25.00
Mailing Address PO Box 369		
City, State, Zip Code Kiln, MS 39556-0369		
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 Lori Karny	08/24/2023	\$18.00
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 Daryl Porter	09/15/2023	\$500.00
Mailing Address PO Box 772		
City, State, Zip Code Summit, MS 39666-0772		
Name of Employer (Required) MS House of Representatives		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Beckett Howorth	09/25/2023	\$250.00
Mailing Address 921 Hayes Ave		
City, State, Zip Code Oxford, MS 38655-4615		
Name of Employer (Required) Not Employed		
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	08/05/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/15/2023	\$50.00
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	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	09/05/2023	\$5.00
Mailing Address 1626 Francisco St		
City, State, Zip Code Berkeley, CA 94703-1255		
Name of Employer (Required) Self Employed		
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	09/15/2023	\$250.00
Mailing Address 303 Woodland Hills Dr		
City, State, Zip Code Oxford, MS 38655-8429		
Name of Employer (Required) MGC Law		
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	09/26/2023	\$100.00
Mailing Address 705 N Overlook Dr		
City, State, Zip Code Alexandria, VA 22305-1223		
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 C. Jackson Williams	09/26/2023	\$25.00
Mailing Address PO Box 69		
City, State, Zip Code Taylor, MS 38673-0069		
Name of Employer (Required) University of Mississippi		
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 Paul Haahr	08/06/2023	\$2,500.00
Mailing Address 4222 22nd St		
City, State, Zip Code San Francisco, CA 94114-3110		
Name of Employer (Required) Google		
Occupation (Required) Programmer	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	09/16/2023	\$25.00
Mailing Address 1081 Raymond Bolton Rd		
City, State, Zip Code Raymond, MS 39154-9394		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	08/07/2023	\$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 Ouida Meruvia	08/17/2023	\$100.00
Mailing Address 1 Dr Ml King Jr Ave		
City, State, Zip Code Memphis, TN 38103-1766		
Name of Employer (Required) Social Security Administration		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ann Rabalais	09/17/2023	\$25.00
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 Douglas Masterson	09/28/2023	\$25.00
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	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	08/28/2023	\$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 Hugh Parker	09/19/2023	\$2,500.00
Mailing Address 113 Royal Garden Ter		
City, State, Zip Code Madison, MS 39110-7635		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael Collins	08/19/2023	\$100.00
Mailing Address 1826 Ray St		
City, State, Zip Code Ocean Springs, MS 39564-2930		
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 James L. Barksdale	08/29/2023	\$10,000.00
Mailing Address 800 Woodlands Pkwy		
City, State, Zip Code Ridgeland, MS 39157-5200		
Name of Employer (Required) Self Employed		
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	08/30/2023	\$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 Richard Ballard	08/30/2023	\$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 Brenda J. West	08/30/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/30/2023	\$1,000.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/10/2023	\$250.00
Mailing Address 3710 Richland Ave		
City, State, Zip Code Nashville, TN 37205-2438		
Name of Employer (Required) Wyatt, Tarrant & Combs LP		
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 Derek Rusch	08/31/2023	\$1,000.00
Mailing Address 1066th St		
City, State, Zip Code Oakland, CA 94608		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kyle McDaniel	08/31/2023	\$1,000.00
Mailing Address 2741 Calkins Rd		
City, State, Zip Code Herndon, VA 20171-2002		
Name of Employer (Required) Jet Aviation		
Occupation (Required) Pilot	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	08/02/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/22/2023	\$500.00
Mailing Address 1317 Wilson St		
City, State, Zip Code Tupelo, MS 38804-6017		
Name of Employer (Required) General Services Administration		
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 Mari Harris	09/24/2023	\$25.00
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	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 Lori Karny	08/15/2023	\$18.00
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 Margaret Thomas	08/25/2023	\$25.00
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 Karen K. Sawyer	09/26/2023	\$500.00
Mailing Address 150 Spence Dr		
City, State, Zip Code Pass Christian, MS 39571-4839		
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 Edson Griswold	08/06/2023	\$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 Laura Hamilton	09/06/2023	\$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 Nan Shiverdecker	09/27/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/07/2023	\$25.00
Mailing Address 103 Pinetrail Pl		
City, State, Zip Code Madison, MS 39110-8008		
Name of Employer (Required) Not Employed		
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	08/17/2023	\$100.00
Mailing Address 827 Beaumont Dr		
City, State, Zip Code Madison, MS 39110-7494		
Name of Employer (Required) Bradley Arant		
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	08/27/2023	\$10.00
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 Jason Rhodes	09/18/2023	\$500.00
Mailing Address 28 Hyde Ave		
City, State, Zip Code Newton, MA 02458		
Name of Employer (Required) Atlas Venture		
Occupation (Required) Biotech	Aggregate year-to-date	\$500.00

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 Wayne L. Gray	08/18/2023	\$100.00
Mailing Address 520 College Hill Rd		
City, State, Zip Code Oxford, MS 38655-2000		
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 Laura Hamilton	08/28/2023	\$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 Claire Levine	09/29/2023	\$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 Elizabeth Stauter	09/20/2023	\$50.00
Mailing Address 148 Seaside Dr		
City, State, Zip Code Ocean Springs, MS 39564-5145		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	08/12/2023	\$50.00
Mailing Address 505 Ward Ave		
City, State, Zip Code Ocean Springs, MS 39564-4844		
Name of Employer (Required) Not Employed		
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 Blakely Fender	08/22/2023	\$250.00
Mailing Address 2233 E Manor Dr		
City, State, Zip Code Jackson, MS 39211-6150		
Name of Employer (Required) Millsaps College		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Wages	08/03/2023	\$50.00
Mailing Address 138 Road 199		
City, State, Zip Code Tupelo, MS 38801-7809		
Name of Employer (Required) Panorama Research, Inc.		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton	08/03/2023	\$5.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/23/2023	\$250.00
Mailing Address PO Box 1963		
City, State, Zip Code Athens, GA 30603-1963		
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 Charles R. Wilson	08/14/2023	\$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 Ivy Whitlatch	09/14/2023	\$2,000.00
Mailing Address 1117 Prince St		
City, State, Zip Code Alexandria, VA 22314-2934		
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 Dale Riser	08/25/2023	\$25.00
Mailing Address 605 Tuscan Valley Dr		
City, State, Zip Code Oxford, MS 38655-9324		
Name of Employer (Required) Beard + Riser Architects		
Occupation (Required) Architect	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	09/26/2023	\$45.71
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/26/2023	\$1,000.00
Mailing Address 143 Camino Don Miguel		
City, State, Zip Code Orinda, CA 94563-1709		
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 John Brombacher	09/27/2023	\$50.00
Mailing Address 108 Coachmans Rd		
City, State, Zip Code Madison, MS 39110-9227		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Entrekin	09/27/2023	\$10.00
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 John Weaver	09/28/2023	\$250.00
Mailing Address 1320 Belvoir Cir		
City, State, Zip Code Jackson, MS 39202-1268		
Name of Employer (Required) Weaver Architecture		
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	09/28/2023	\$100.00
Mailing Address 5535 Marblehead Dr		
City, State, Zip Code Jackson, MS 39211-4249		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stephen Baylot	09/18/2023	\$500.00
Mailing Address 9269 Highway 18		
City, State, Zip Code Raymond, MS 39154-8914		
Name of Employer (Required) Mardi Gras Motors		
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	08/09/2023	\$50.00
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 Raleigh Byars	09/20/2023	\$5.00
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 Elizabeth Payne	09/21/2023	\$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	08/01/2023	\$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 David Fisher	09/11/2023	\$500.00
Mailing Address 1445 Broadhead School Rd		
City, State, Zip Code Greenville, VA 24440-1908		
Name of Employer (Required) Not Employed		
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	08/03/2023	\$10.00
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 Pamela Banks	08/23/2023	\$250.00
Mailing Address 25 Saint Andrews Dr		
City, State, Zip Code Jackson, MS 39211-2438		
Name of Employer (Required) Jackson State University		
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	09/24/2023	\$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 Paul Carter	08/04/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/08/2023	\$250.00
Mailing Address 1000 38th Ave		
City, State, Zip Code Gulfport, MS 39501-1628		
Name of Employer (Required) Gaming Marketing Inc.		
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	08/08/2023	\$500.00
Mailing Address PO Box 3747		
City, State, Zip Code Jackson, MS 39207-3747		
Name of Employer (Required) Gulf South Capital		
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	08/29/2023	\$10.00
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 Alma Walls	09/09/2023	\$50.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	08/30/2023	\$25.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jacob Knight	08/30/2023	\$50.00
Mailing Address 6873 Sweetclover Dr		
City, State, Zip Code Ocean Springs, MS 39564-5079		
Name of Employer (Required) JSR Micro		
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 Reilly Morse	09/21/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	07/31/2023	\$500.00
Mailing Address 43 Holly Way		
City, State, Zip Code Bridgeton, NJ 08302-7143		
Name of Employer (Required) Salmon Ventures, Ltd.		
Occupation (Required) Government Relations	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

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 Robert Munford	09/06/2023	\$250.00
Mailing Address 5510 Wisconsin Ave		
City, State, Zip Code Chevy Chase, MD 20815-4403		
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 Andrew Mallette	09/06/2023	\$1,000.00
Mailing Address 204 Jefferson Rdg		
City, State, Zip Code Ridgeland, MS 39157-9101		
Name of Employer (Required) Baptist Memorial Health Care		
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	09/16/2023	\$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 James Raymond	08/07/2023	\$1,000.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/28/2023	\$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 Ashley N. Wicks	09/29/2023	\$100.00
Mailing Address 63 Springridge Cir		
City, State, Zip Code Jackson, MS 39211-2903		
Name of Employer (Required) Butler Snow		
Occupation (Required) Attorney	Aggregate year-to-date	\$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	09/29/2023	\$100.00
Mailing Address 435 Center Ave N		
City, State, Zip Code Philadelphia, MS 39350-2918		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$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	09/19/2023	\$100.00
Mailing Address 1018 Morton Rounds		
City, State, Zip Code New Albany, MS 38652-6035		
Name of Employer (Required) Not Employed		
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 O'Neal	07/31/2023	\$250.00
Mailing Address 27 Andiamo		
City, State, Zip Code Newport Coast, CA 92657-1202		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	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	08/21/2023	\$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 Frankie Blount	08/31/2023	\$35.71
Mailing Address 4876 Brookwood Pl		
City, State, Zip Code Jackson, MS 39272-5706		
Name of Employer (Required) Not Employed		
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 Wayne T. Adkison	08/31/2023	\$100.00
Mailing Address 5406 Lakeview Dr		
City, State, Zip Code Moss Point, MS 39563-2132		
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 Kelly Coleman Mailing Address 66 Grandview Cir City, State, Zip Code Brandon, MS 39047-7398 Name of Employer (Required) Not Employed	08/31/2023	\$100.00
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 Glen Davidson Jr Mailing Address 1123 Quail Creek Cv City, State, Zip Code Tupelo, MS 38801-7257 Name of Employer (Required) Not Employed	09/22/2023	\$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 Douglas A. Horne Mailing Address 412 N Cedar Bluff Rd City, State, Zip Code Knoxville, TN 37923-3631 Name of Employer (Required) Horne Properties, Inc.	09/22/2023	\$1,000.00
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 Mailing Address PO Box 219 City, State, Zip Code Braxton, MS 39044-0219 Name of Employer (Required) Not Employed	09/23/2023	\$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 Douglas Masterson	08/13/2023	\$10.00
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	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 Sarah Dabney	08/23/2023	\$500.00
Mailing Address PO Box 89		
City, State, Zip Code Pinola, MS 39149-0089		
Name of Employer (Required) Strong River Camp and Farm		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Jenkins	08/14/2023	\$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 David O'Donnell	08/15/2023	\$250.00
Mailing Address 420 Turnberry Cir		
City, State, Zip Code Oxford, MS 38655-2568		
Name of Employer (Required) Clayton O'Donnell PLLC		
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	09/05/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/06/2023	\$50.00
Mailing Address 1435 Saint Ann St		
City, State, Zip Code Jackson, MS 39202-1847		
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 Anita Yarbrough	08/16/2023	\$25.00
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 Aurelia Jones-Taylor	08/26/2023	\$100.00
Mailing Address 470 Hopson Pixley Rd		
City, State, Zip Code Clarksdale, MS 38614-9044		
Name of Employer (Required) Aaron Henry CHC		
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	08/07/2023	\$100.00
Mailing Address PO Box 410		
City, State, Zip Code Liberty, MS 39645-0410		
Name of Employer (Required) Self Employed		
Occupation (Required) Accountant	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	09/07/2023	\$250.00
Mailing Address 3845 Majestic Oaks Dr		
City, State, Zip Code Oxford, MS 38655-8153		
Name of Employer (Required) Square Books		
Occupation (Required) Book Seller	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	09/18/2023	\$250.00
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 Thomas Ruffin Smith	08/28/2023	\$1,000.00
Mailing Address PO Box 265		
City, State, Zip Code Louise, MS 39097-0265		
Name of Employer (Required) Town of Louise		
Occupation (Required) Mayor	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	08/28/2023	\$50.00
Mailing Address 1413 College St		
City, State, Zip Code Columbus, MS 39701-5904		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sharon E. Crane	09/29/2023	\$300.00
Mailing Address 299 Bismark Rd		
City, State, Zip Code Jayess, MS 39641-3588		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jean Fenwick	09/29/2023	\$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 Jacob Knight	08/09/2023	\$250.00
Mailing Address 6873 Sweetclover Dr		
City, State, Zip Code Ocean Springs, MS 39564-5079		
Name of Employer (Required) JSR Micro		
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	08/19/2023	\$100.00
Mailing Address 56 J C Bryant Rd		
City, State, Zip Code Hattiesburg, MS 39401-8447		
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 Janice Walker	09/30/2023	\$100.00
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	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 Kathaleen Miller	07/30/2023	\$10.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/30/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	07/31/2023	\$100.00
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	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	07/31/2023	\$35.71
Mailing Address 4876 Brookwood Pl		
City, State, Zip Code Jackson, MS 39272-5706		
Name of Employer (Required) Not Employed		
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 Robert M. Pugh	08/11/2023	\$25.00
Mailing Address 5924 Whitestone Rd		
City, State, Zip Code Jackson, MS 39206-2515		
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 Susan Teasley	08/31/2023	\$100.00
Mailing Address 100 Aspen Dr		
City, State, Zip Code Madison, MS 39110-9712		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	09/22/2023	\$50.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/22/2023	\$10.00
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 Linda J. Davis	08/12/2023	\$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 Kathi Tomsky	09/02/2023	\$25.00
Mailing Address 1018 Morton Rounds		
City, State, Zip Code New Albany, MS 38652-6035		
Name of Employer (Required) Not Employed		
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	08/24/2023	\$5,000.00
Mailing Address 8 Berkeley St		
City, State, Zip Code Cambridge, MA 02138-3464		
Name of Employer (Required) Not Employed		
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 Leslie F. Gold	08/14/2023	\$1,000.00
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 Mari Harris	09/04/2023	\$25.00
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	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	08/16/2023	\$50.00
Mailing Address 123 Nottingham Ter		
City, State, Zip Code Buffalo, NY 14216-3504		
Name of Employer (Required) University at Buffalo		
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 Michael McRee	09/06/2023	\$500.00
Mailing Address PO Box 1006		
City, State, Zip Code Jackson, MS 39215-1006		
Name of Employer (Required) Investek, Inc.		
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	09/27/2023	\$250.00
Mailing Address 178 Raymond St		
City, State, Zip Code Cambridge, MA 02140-3323		
Name of Employer (Required) Anderson & Kreiger LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Juanita Boutin	08/07/2023	\$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 Dianne Martin	08/27/2023	\$75.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/07/2023	\$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 Tom Taft	09/07/2023	\$1,000.00
Mailing Address 3301 Star Hill Farm Rd		
City, State, Zip Code Greenville, NC 27834-0859		
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 Claudean Ervin	09/18/2023	\$50.00
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	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	09/29/2023	\$100.00
Mailing Address 2559 River Place Blvd		
City, State, Zip Code Biloxi, MS 39531-2752		
Name of Employer (Required) Self Employed		
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	08/09/2023	\$500.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/29/2023	\$25.00
Mailing Address 4146 Crestview Pl		
City, State, Zip Code Jackson, MS 39211-6404		
Name of Employer (Required) Change Research		
Occupation (Required) Analyst	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	09/20/2023	\$50.00
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 Elwin Hall	09/30/2023	\$100.00
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

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 Theresa Steinberger	08/31/2023	\$100.00
Mailing Address 4713 Forrest St		
City, State, Zip Code Moss Point, MS 39563-2413		
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 Keith Eddins	09/01/2023	\$250.00
Mailing Address 1970 Columbia St		
City, State, Zip Code Eugene, OR 97403-1440		
Name of Employer (Required) University of Oregon		
Occupation (Required) Adjunct Faculty	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	08/12/2023	\$250.00
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	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	08/12/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/13/2023	\$2,000.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Theresa Steinberger	08/03/2023	\$100.00
Mailing Address 4713 Forrest St		
City, State, Zip Code Moss Point, MS 39563-2413		
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 Barbara Rankin	08/23/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/13/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rube D. Harden	09/24/2023	\$100.00
Mailing Address 450 E President Ave		
City, State, Zip Code Tupelo, MS 38801-5599		
Name of Employer (Required) Harden Enterprises		
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	09/24/2023	\$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 Natalie Bernstein	08/24/2023	\$5,000.00
Mailing Address 2130 E Lake Rd NE		
City, State, Zip Code Atlanta, GA 30307-1836		
Name of Employer (Required) Not Employed		
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	09/25/2023	\$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 Carol Halliburton	09/06/2023	\$10.00
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 Brenda Plunkett	09/06/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/07/2023	\$500.00
Mailing Address 805 Oak Grove Rd		
City, State, Zip Code Tupelo, MS 38804-2031		
Name of Employer (Required) Mississippi Arts Commission		
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	09/18/2023	\$1,000.00
Mailing Address 208 Waterford Sq		
City, State, Zip Code Madison, MS 39110-6857		
Name of Employer (Required) Diaz Law Firm		
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	09/28/2023	\$250,000.00
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 Carol Halliburton	08/08/2023	\$50.00
Mailing Address 5032 Sunnyvale Dr		
City, State, Zip Code Jackson, MS 39211-4843		
Name of Employer (Required) Not Employed		
Occupation (Required)	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	08/18/2023	\$100.00
Mailing Address 108 Grand Ridge Rd		
City, State, Zip Code Starkville, MS 39759-4112		
Name of Employer (Required) Not Employed		
Occupation (Required)	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	09/19/2023	\$5.00
Mailing Address 11 Helen Ln		
City, State, Zip Code Walpole, MA 02081-2046		
Name of Employer (Required) Long and Foster		
Occupation (Required)	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	09/29/2023	\$200.00
Mailing Address 3105 N 1st St		
City, State, Zip Code Ocean Springs, MS 39564-8566		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$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	08/29/2023	\$10.00
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 Emilee C. Young	09/30/2023	\$100.00
Mailing Address 1194 Highway 370		
City, State, Zip Code Dumas, MS 38625-9604		
Name of Employer (Required) Tippah County Hospital		
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	08/10/2023	\$30.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/31/2023	\$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 Gloria Williamson	09/22/2023	\$2,500.00
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 Etta Smith	08/12/2023	\$25.00
Mailing Address 409 Cherry Hill Dr		
City, State, Zip Code Madison, MS 39110-7501		
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 Marcus Wallace	09/12/2023	\$250.00
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	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	09/14/2023	\$500.00
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	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	08/04/2023	\$100.00
Mailing Address PO Box 119		
City, State, Zip Code Bailey, MS 39320-0119		
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 Louise Cole	09/25/2023	\$100.00
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	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	08/05/2023	\$200.00
Mailing Address 705 4th St S		
City, State, Zip Code Columbus, MS 39701-6725		
Name of Employer (Required) Technology Concepts & Design Inc.		
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	08/25/2023	\$250.00
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	\$1,600.00
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	09/27/2023	\$25.00
Mailing Address 1185 W Topisaw N		
City, State, Zip Code Ruth, MS 39662-9511		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Lacavera	08/17/2023	\$25.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Irvin	08/17/2023	\$25.00
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 Karen Kellum	09/07/2023	\$1,000.00
Mailing Address 509 College Hill Rd		
City, State, Zip Code Oxford, MS 38655-2027		
Name of Employer (Required) University of Mississippi		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Trudy Hart	09/17/2023	\$22.50
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 Lee Carson	09/18/2023	\$500.00
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 Karen Smith	08/08/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/18/2023	\$500.00
Mailing Address PO Box 257		
City, State, Zip Code Starkville, MS 39760-0257		
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 Sam Creasey	09/08/2023	\$500.00
Mailing Address 911 Pinehurst Pl		
City, State, Zip Code Jackson, MS 39202-1742		
Name of Employer (Required) Morgan & Morgan		
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 David Corliss	09/29/2023	\$50.00
Mailing Address 2379 Wendover Dr		
City, State, Zip Code Belden, MS 38826-8644		
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 Jean Fenwick	08/09/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	08/10/2023	\$100.00
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	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	08/20/2023	\$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 Karen Smith	08/30/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elvin Sunds	09/10/2023	\$25.00
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	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	08/21/2023	\$20.00
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 Douglas Masterson	08/31/2023	\$25.00
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	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 John Ballard	08/31/2023	\$100.00
Mailing Address 5488 Turningleaf Cv		
City, State, Zip Code Tupelo, MS 38801-9516		
Name of Employer (Required) Cardinal		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Audrey McBride	08/12/2023	\$25.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/24/2023	\$100.00
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 Dennis Mehiel	09/25/2023	\$5,000.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/25/2023	\$100.00
Mailing Address 65 Caitlynn Cir		
City, State, Zip Code Hattiesburg, MS 39402-7995		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	08/05/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/15/2023	\$10.00
Mailing Address 7844 E Sandalwood Dr		
City, State, Zip Code Scottsdale, AZ 85250-7269		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Fenner	08/25/2023	\$1,000.00
Mailing Address PO Box 759		
City, State, Zip Code Edna, TX 77957-0759		
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 Mary Lindsay	08/26/2023	\$50.00
Mailing Address 1256 Belvoir Pl		
City, State, Zip Code Jackson, MS 39202-1205		
Name of Employer (Required) City of Jackson		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Duncan M. Gray III	08/17/2023	\$50.00
Mailing Address 110 Philip Rd		
City, State, Zip Code Oxford, MS 38655-2014		
Name of Employer (Required) Nativity Episcopal Church		
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	08/29/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan W. Rabon	09/09/2023	\$500.00
Mailing Address 306 River Dr		
City, State, Zip Code Southport, NC 28461-4110		
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 Jean Fenwick	09/30/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/30/2023	\$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 Calvin S. Hill	09/30/2023	\$200.00
Mailing Address PO Box 31514		
City, State, Zip Code Jackson, MS 39286-1514		
Name of Employer (Required) Nissan		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gail Linson	07/30/2023	\$40.00
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 Cynthia Yap	08/20/2023	\$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 Randy Hall	08/30/2023	\$500.00
Mailing Address 104 Peninsula Dr		
City, State, Zip Code Carriere, MS 39426-7738		
Name of Employer (Required) Trace7 Services		
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	08/30/2023	\$100.00
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 Norman Powell	08/30/2023	\$1,000.00
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	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	07/31/2023	\$50.00
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 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	08/21/2023	\$500.00
Mailing Address 4915 I 55 N		
City, State, Zip Code Jackson, MS 39206-6212		
Name of Employer (Required)		
Occupation (Required)	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	08/21/2023	\$1,000.00
Mailing Address 835 Avondale St		
City, State, Zip Code Jackson, MS 39216-3316		
Name of Employer (Required) Bradley Arant Boulton Cummings LLP		
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	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 Jeff Richardson	08/12/2023	\$100.00
Mailing Address 115 Bristol Ln		
City, State, Zip Code Madison, MS 39110-5021		
Name of Employer (Required) Ontario Power Generation		
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	09/03/2023	\$25.00
Mailing Address 2584 Rue Palafox		
City, State, Zip Code Biloxi, MS 39531-3733		
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 Dennis Truax	09/13/2023	\$100.00
Mailing Address 913 Southgate Dr		
City, State, Zip Code Starkville, MS 39759-9434		
Name of Employer (Required) Self Employed		
Occupation (Required) Engineer	Aggregate year-to-date	\$1,671.00
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	08/04/2023	\$500.00
Mailing Address 188 Reunion Blvd		
City, State, Zip Code Madison, MS 39110-8096		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	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	08/04/2023	\$500.00
Mailing Address PO Box 24627		
City, State, Zip Code Jackson, MS 39225-4627		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan Fino	09/04/2023	\$100.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/27/2023	\$10.00
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 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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/27/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/18/2023	\$60.00
Mailing Address 5711 Clubview Dr		
City, State, Zip Code Jackson, MS 39211-4202		
Name of Employer (Required) Not Employed		
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	09/19/2023	\$50.00
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	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	09/19/2023	\$1,000.00
Mailing Address 8012 Maple Ridge Rd		
City, State, Zip Code Bethesda, MD 20814-1308		
Name of Employer (Required) Not Employed		
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	09/29/2023	\$250.00
Mailing Address 2595 Mount Vernon Rd		
City, State, Zip Code Tupelo, MS 38804-7102		
Name of Employer (Required) Hillen, Wicker & Tapscott, P.A.		
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	08/19/2023	\$50.00
Mailing Address 5 Douglas Rd		
City, State, Zip Code Ellisville, MS 39437-4805		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$300.00

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 Becky Meek	09/20/2023	\$300.00
Mailing Address 1 Oak Pl		
City, State, Zip Code Oxford, MS 38655-2519		
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 Robert Conwill	09/30/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	07/30/2023	\$25.00
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	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	08/30/2023	\$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

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 Kelly J. Jacobs	08/30/2023	\$1,000.00
Mailing Address 3985 Robertson Gin Rd		
City, State, Zip Code Hernando, MS 38632-8227		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Walkup	09/10/2023	\$250.00
Mailing Address 3710 Richland Ave		
City, State, Zip Code Nashville, TN 37205-2438		
Name of Employer (Required) Graves Gilbert Clinic		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paul Silverman	08/31/2023	\$2,500.00
Mailing Address 201 Montgomery St		
City, State, Zip Code Jersey City, NJ 07302-5057		
Name of Employer (Required) Silverman		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Wilson Golden	08/31/2023	\$50.00
Mailing Address 3136 White Magnolia Chase SW		
City, State, Zip Code Gainesville, GA 30504-5587		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	09/22/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/22/2023	\$18.00
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 Johnny D. Jones	08/02/2023	\$50.00
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	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	08/22/2023	\$100.00
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	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	08/22/2023	\$500.00
Occupation (Required) Farmer	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	08/14/2023	\$50.00
Occupation (Required) Advisor	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	08/24/2023	\$15.00
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 Terry Mangialardi Mailing Address 1181 McGowan Dr City, State, Zip Code Southaven, MS 38671-8430 Name of Employer (Required) Desoto County Schools	09/14/2023	\$25.00
Occupation (Required) Teacher	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	09/26/2023	\$25.00
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	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	08/06/2023	\$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 Charles Buchanan	08/26/2023	\$45.71
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/16/2023	\$25.00
Mailing Address 65 Vaiden Dr		
City, State, Zip Code Hernando, MS 38632-2313		
Name of Employer (Required) Not Employed		
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 Penelope Tose	09/27/2023	\$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 Lise Pearlman	09/07/2023	\$50.00
Mailing Address 1147 Clarendon Cres		
City, State, Zip Code Oakland, CA 94610-1807		
Name of Employer (Required) Self Employed		
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	09/28/2023	\$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 A. H. Cooper	08/18/2023	\$250.00
Mailing Address 401 Garner St		
City, State, Zip Code Oxford, MS 38655-2005		
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 Andrew Dickson	08/28/2023	\$250.00
Mailing Address 807 Sth 19Th Ave		
City, State, Zip Code Hattiesburg, MS 39401		
Name of Employer (Required) Not Employed		
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 John Brenke	09/29/2023	\$200.00
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	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	09/20/2023	\$500.00
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	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	08/30/2023	\$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 Jean Fenwick	08/30/2023	\$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 Phillip Pinkston	07/31/2023	\$100.00
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	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 Dennis J. J. Erby	08/31/2023	\$100.00
Mailing Address PO Box 2811		
City, State, Zip Code Columbus, MS 39704-2811		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frankie Blount	09/11/2023	\$100.00
Mailing Address 4876 Brookwood Pl		
City, State, Zip Code Jackson, MS 39272-5706		
Name of Employer (Required) Not Employed		
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	08/22/2023	\$500.00
Mailing Address 220 Saint Andrews Dr		
City, State, Zip Code Jackson, MS 39211-2519		
Name of Employer (Required) Women's Foundation of Mississippi		
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	08/03/2023	\$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 Charles Benvenutti	08/23/2023	\$250.00
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	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	08/23/2023	\$1,000.00
Mailing Address 24 Grand Bayou Cir		
City, State, Zip Code Hattiesburg, MS 39402-7931		
Name of Employer (Required) University of Southern Mississippi		
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	09/26/2023	\$25.00
Mailing Address 103 Pinetrail Pl		
City, State, Zip Code Madison, MS 39110-8008		
Name of Employer (Required) Not Employed		
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	08/16/2023	\$2,500.00
Mailing Address PO Box 2349		
City, State, Zip Code Collins, MS 39428-2349		
Name of Employer (Required) Rutland Lumber Co.		
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	09/27/2023	\$250.00
Mailing Address PO Box 145		
City, State, Zip Code Wheeler, MS 38880-0145		
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 Anne Winter	09/27/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/07/2023	\$500.00
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	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	08/07/2023	\$25.00
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 Keith Johnson	08/17/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/07/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/28/2023	\$250.00
Mailing Address 831 Cedar Lake Rd		
City, State, Zip Code Biloxi, MS 39532-4671		
Name of Employer (Required) Not Employed		
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 Leonette Slay	09/28/2023	\$100.00
Mailing Address 320 Albemarle Dr		
City, State, Zip Code Hoover, AL 35226-1503		
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 David Erdman	09/18/2023	\$300.00
Mailing Address 2445 Selwyn Ave		
City, State, Zip Code Charlotte, NC 28209-1668		
Name of Employer (Required) Self Employed		
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 Charles Addington	08/09/2023	\$50.00
Mailing Address 3747 Crane Blvd		
City, State, Zip Code Jackson, MS 39216-3606		
Name of Employer (Required) HORNE LLP		
Occupation (Required) Accountant	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	09/09/2023	\$50.00
Mailing Address 200 Jefferson Rdg		
City, State, Zip Code Ridgeland, MS 39157-9101		
Name of Employer (Required) Delta Health System		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Melissa Manuel	09/20/2023	\$25.00
Mailing Address 827 Beaumont Dr		
City, State, Zip Code Madison, MS 39110-7494		
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 Susan Chiarito	09/30/2023	\$250.00
Mailing Address 1724 Eisenhower Dr		
City, State, Zip Code Vicksburg, MS 39180-3753		
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 Cindy Akins	09/21/2023	\$50.00
Mailing Address 86449 Meadowwood Dr		
City, State, Zip Code Yulee, FL 32097-6427		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	07/31/2023	\$1,000.00
Mailing Address 19811 4th Pl		
City, State, Zip Code Escondido, CA 92029-7004		
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 Ed Penny	08/31/2023	\$17.60
Mailing Address 4366 N Honeysuckle Ln		
City, State, Zip Code Jackson, MS 39211-6131		
Name of Employer (Required) Self Employed		
Occupation (Required) Farmer	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	09/01/2023	\$1,000.00
Mailing Address 165 Audubon Pl		
City, State, Zip Code Picayune, MS 39466-8799		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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.	09/11/2023	\$250.00
Mailing Address PO Box 2566		
City, State, Zip Code Oxford, MS 38655-4900		
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 Sidney Whitehurst	09/22/2023	\$100.00
Mailing Address PO Box 966		
City, State, Zip Code Iuka, MS 38852-0966		
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 Jerry Sandlin	08/22/2023	\$100.00
Mailing Address 303 Robbers Trce		
City, State, Zip Code Ridgeland, MS 39157-8773		
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 Michael O'Neal	08/22/2023	\$100.00
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 Michael Lutz	09/12/2023	\$250.00
Mailing Address 6224 Sandhill Cv		
City, State, Zip Code Ocean Springs, MS 39564-5685		
Name of Employer (Required) Raytheon Technologies		
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	08/24/2023	\$33.00
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 Nan Tarlton	09/25/2023	\$100.00
Mailing Address 210 Meadowlane Dr		
City, State, Zip Code Madison, MS 39110-9611		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	08/25/2023	\$25.00
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	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	09/15/2023	\$50.00
Mailing Address 4230 Lakeshore Ave		
City, State, Zip Code Oakland, CA 94610-1136		
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 Anthony Baggett	09/06/2023	\$200.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/27/2023	\$50.00
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 Eugene Bramlett Jr	08/07/2023	\$500.00
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	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 Robert Carroll	08/27/2023	\$250.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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 Snowden	09/28/2023	\$5,000.00
Mailing Address 50 Riverside Dr		
City, State, Zip Code New York, NY 10024-6508		
Name of Employer (Required) Self Employed		
Occupation (Required) Theatrical Producer	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	09/18/2023	\$2,500.00
Mailing Address PO Box 332		
City, State, Zip Code West Point, MS 39773-0332		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	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	08/08/2023	\$1,000.00
Mailing Address PO Box 332		
City, State, Zip Code West Point, MS 39773-0332		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	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	09/29/2023	\$35.00
Mailing Address 6245 Woodland Cir		
City, State, Zip Code Meridian, MS 39305-9082		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	08/30/2023	\$25.00
Mailing Address 810 Sample Rd		
City, State, Zip Code Belden, MS 38826-9650		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David Miotke	09/21/2023	\$500.00
Mailing Address 1626 Francisco St		
City, State, Zip Code Berkeley, CA 94703-1255		
Name of Employer (Required) Self Employed		
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 Ken Rutherford	08/31/2023	\$1,000.00
Mailing Address 633 Park Dr		
City, State, Zip Code Oxford, MS 38655-2824		
Name of Employer (Required) Not Employed		
Occupation (Required) 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 Steven Smith	09/11/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/03/2023	\$25.00
Mailing Address 211 Stone Rd		
City, State, Zip Code Oxford, MS 38655-2021		
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 Sarah Glover	09/03/2023	\$250.00
Mailing Address 169 Brookstone Way		
City, State, Zip Code Madison, MS 39110-7566		
Name of Employer (Required) Tulane		
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 Theresa Guthrie	08/04/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Sandlin	08/05/2023	\$50.00
Mailing Address 303 Robbers Trce		
City, State, Zip Code Ridgeland, MS 39157-8773		
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 Helen Boone	08/25/2023	\$100.00
Mailing Address 3726 Crane Blvd		
City, State, Zip Code Jackson, MS 39216-3605		
Name of Employer (Required) Not Employed		
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	09/16/2023	\$1,000.00
Mailing Address 3534 Fulton St NW		
City, State, Zip Code Washington, DC 20007-1437		
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 Gene Corbin	09/26/2023	\$500.00
Mailing Address 123 Montgomery St		
City, State, Zip Code Cambridge, MA 02140-1726		
Name of Employer (Required) Tufts 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 David Clark	08/06/2023	\$1,000.00
Mailing Address 110 Olympia Flds		
City, State, Zip Code Jackson, MS 39211-2509		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$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	09/06/2023	\$5,000.00
Mailing Address 6330 Sanctuary Woods Ct		
City, State, Zip Code Burke, VA 22015-4071		
Name of Employer (Required) Not Employed		
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 Laura Hamilton	09/27/2023	\$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 Ronald Unz	08/07/2023	\$5.00
Mailing Address 2535 Wright Rd		
City, State, Zip Code Steens, MS 39766-9129		
Name of Employer (Required) Mississippi State University		
Occupation (Required) Scientist	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 Edwin Pittman	09/07/2023	\$250.00
Mailing Address 164 Summers Bay Dr		
City, State, Zip Code Ridgeland, MS 39157-9234		
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 Kathryn York	08/08/2023	\$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 Lloyd Gordon	08/08/2023	\$25.00
Mailing Address 105 Colony Crown		
City, State, Zip Code Brandon, MS 39047-8202		
Name of Employer (Required) Not Employed		
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 Martha Martin	08/08/2023	\$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 Steven Smith	08/28/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/29/2023	\$100.00
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	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	09/19/2023	\$500.00
Mailing Address PO Box 842		
City, State, Zip Code New Albany, MS 38652-0842		
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 Marilyn Vandemark	09/20/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/30/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/10/2023	\$500.00
Occupation (Required) Attorney	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	07/31/2023	\$250.00
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) _____	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	07/31/2023	\$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 Dorothy Roberts Mailing Address 252 Handy Ln City, State, Zip Code Pass Christian, MS 39571-4426 Name of Employer (Required) Not Employed	08/11/2023	\$50.00
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 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

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 Wayne T. Adkison	09/22/2023	\$25.00
Mailing Address 5406 Lakeview Dr		
City, State, Zip Code Moss Point, MS 39563-2132		
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 John B. Clark	09/23/2023	\$200.00
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 Janet Shanks	08/23/2023	\$25.00
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 Aileen Ajootian	09/25/2023	\$250.00
Mailing Address 403 Tyler Ave		
City, State, Zip Code Oxford, MS 38655-3821		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Professor	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	09/06/2023	\$1,000.00
Mailing Address 65 Caitlynn Cir		
City, State, Zip Code Hattiesburg, MS 39402-7995		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	08/07/2023	\$15.00
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 Suzanne H. Robinson	09/07/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/07/2023	\$1,000.00
Mailing Address 518 N 11th St		
City, State, Zip Code Oxford, MS 38655-3108		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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

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 Edson Griswold	08/09/2023	\$10.00
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 Lisa Stevens	08/19/2023	\$25.00
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	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	08/29/2023	\$1,200,000.00
Mailing Address 1225 Eye St NW		
City, State, Zip Code Washington, DC 20005-3914		
Name of Employer (Required) _____		
Occupation (Required) _____	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	09/20/2023	\$25.00
Mailing Address 321 County Road 416		
City, State, Zip Code Vardaman, MS 38878-9708		
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 Sean McGuinness	09/30/2023	\$100.00
Mailing Address 1605 Devine St		
City, State, Zip Code Jackson, MS 39202-1314		
Name of Employer (Required) Butler Snow LLP		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sam Pace	08/30/2023	\$250.00
Mailing Address 2013 N Parc Cir		
City, State, Zip Code Tupelo, MS 38804-9723		
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 Russell Smith	07/31/2023	\$100.00
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	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 Alma Walls	08/11/2023	\$500.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/31/2023	\$50.00
Mailing Address 105 Colony Crown		
City, State, Zip Code Brandon, MS 39047-8202		
Name of Employer (Required) Not Employed		
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	08/31/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/22/2023	\$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 William L. Chadwick	09/22/2023	\$100.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/22/2023	\$100.00
Mailing Address 1710 Linden Pl		
City, State, Zip Code Jackson, MS 39202-1217		
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 Charles Buchanan	08/03/2023	\$31.79
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/13/2023	\$50.00
Mailing Address 114 Harvey St		
City, State, Zip Code Belzoni, MS 39038-3112		
Name of Employer (Required) Self Employed		
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	09/24/2023	\$25.00
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 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

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 Mozella Conville	09/28/2023	\$250.00
Mailing Address 104 Cherokee Ct		
City, State, Zip Code Hattiesburg, MS 39401-7036		
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 Martha Swan	09/28/2023	\$50.00
Mailing Address 1665 Toccopola Junction Rd		
City, State, Zip Code Thaxton, MS 38871-9005		
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 Cornelis Gispen	09/30/2023	\$200.00
Mailing Address 1112 S 11th St		
City, State, Zip Code Oxford, MS 38655-4610		
Name of Employer (Required) Not Employed		
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 Linda J. Davis	09/30/2023	\$100.00
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 Nan Shiverdecker	07/30/2023	\$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 Brenda Elliott	08/20/2023	\$25.00
Mailing Address 977 CR-821		
City, State, Zip Code Saltillo, MS 38866		
Name of Employer (Required) WW Trucking Inc.		
Occupation (Required) Logistics Manager	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	08/11/2023	\$1,000.00
Mailing Address 907 Lincoln Ave		
City, State, Zip Code Oxford, MS 38655-4327		
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 Steven Laufer	08/31/2023	\$10,000.00
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	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	09/22/2023	\$250.00
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	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	08/12/2023	\$25.00
Mailing Address 1699 S Trenton St		
City, State, Zip Code Denver, CO 80231-5602		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	09/23/2023	\$25.00
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	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	08/03/2023	\$10.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/23/2023	\$250.00
Mailing Address 1845 Piedmont St		
City, State, Zip Code Jackson, MS 39202-1346		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donald Sittman	08/23/2023	\$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 Trudy Hart	09/24/2023	\$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 David Sawyer	09/14/2023	\$500.00
Mailing Address 150 Spence Dr		
City, State, Zip Code Pass Christian, MS 39571-4839		
Name of Employer (Required) Memorial Hospital		
Occupation (Required) Physician	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 Mailing Address 4830 Old West Point Rd City, State, Zip Code Starkville, MS 39759-8190 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 Mailing Address 4527 Union Ave City, State, Zip Code Nettleton, MS 38858-6037 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 Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 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 Mailing Address 2185 Longview Rd City, State, Zip Code Starkville, MS 39759-8974 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	09/06/2023	\$10.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name David E. Brevard	08/07/2023	\$500.00
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	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	09/07/2023	\$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 Joshua Boger	09/18/2023	\$1,000.00
Mailing Address 22 Liberty Dr		
City, State, Zip Code Boston, MA 02210-1333		
Name of Employer (Required) Alkeus Pharmaceuticals, Inc.		
Occupation (Required) Biotech Executive	Aggregate year-to-date	\$1,000.00

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 Carla Falkner	08/08/2023	\$50.00
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	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	08/28/2023	\$31.79
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/08/2023	\$100.00
Mailing Address 1194 Highway 370		
City, State, Zip Code Dumas, MS 38625-9604		
Name of Employer (Required) Tippah County Hospital		
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 Kathy Olsen	08/29/2023	\$25,000.00
Mailing Address 4416 Sunnybrook Dr		
City, State, Zip Code Nashville, TN 37205-3860		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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	09/09/2023	\$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 Mark McLain	09/30/2023	\$100.00
Mailing Address 120 Hickory Gln		
City, State, Zip Code Madison, MS 39110-7605		
Name of Employer (Required) MS Neuropsychiatric Center		
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 Brenda Roberts	07/30/2023	\$100.00
Mailing Address 709 Northdale Pl		
City, State, Zip Code Brandon, MS 39047-5110		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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 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	09/12/2023	\$250.00
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	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 Doug Hill	09/13/2023	\$250.00
Mailing Address 136 Courtland Dr		
City, State, Zip Code Saltillo, MS 38866-6007		
Name of Employer (Required) Cardiology Associates		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rodger Wilder	09/14/2023	\$500.00
Mailing Address 1159 BRIARSTONE Pl		
City, State, Zip Code Gulfport, MS 39503		
Name of Employer (Required) Balch & Bingham LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Frank Witherspoon	08/04/2023	\$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

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 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	08/07/2023	\$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 James A. Barnett Jr	09/07/2023	\$1,000.00
Mailing Address 2406 S Arlington Ridge Rd		
City, State, Zip Code Arlington, VA 22202-2234		
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 Diane Irvin	09/17/2023	\$25.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/18/2023	\$100.00
Mailing Address 753 E Second St		
City, State, Zip Code Pass Christian, MS 39571-4613		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$350.00

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 John B. Clark Mailing Address 167 Rolling Meadows Rd City, State, Zip Code Ridgeland, MS 39157-9488 Name of Employer (Required) Not Employed	09/08/2023	\$1,000.00
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) _____	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	08/29/2023	\$50.00
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 Anita Yarbrough Mailing Address 202 Lakeside Dr City, State, Zip Code Houston, MS 38851-7432 Name of Employer (Required) Not Employed	08/29/2023	\$10.00
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) _____	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	09/09/2023	\$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 Josephine W. Ashmead	09/30/2023	\$200.00
Mailing Address 540 E Van Dorn Ave		
City, State, Zip Code Holly Springs, MS 38635-2515		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marilyn Vandemark	08/10/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/20/2023	\$50.00
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 James Galloway	08/30/2023	\$100.00
Mailing Address 17 Baytowne Row		
City, State, Zip Code Madison, MS 39110-9179		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,333.60

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 William Janeway	08/21/2023	\$5,000.00
Mailing Address 8 E 80th St		
City, State, Zip Code New York, NY 10075-0110		
Name of Employer (Required) Not Employed		
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 J. David Orlansky	08/21/2023	\$500.00
Mailing Address 1013 Laramie Ct		
City, State, Zip Code Madison, MS 39110-7746		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Caleb Dana	08/23/2023	\$20.00
Mailing Address 103 Pinetrail Pl		
City, State, Zip Code Madison, MS 39110-8008		
Name of Employer (Required) Not Employed		
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 Joseph Sheppard	09/13/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/13/2023	\$2,500.00
Mailing Address 30 Common St		
City, State, Zip Code Belmont, MA 02478-3042		
Name of Employer (Required) Not Employed		
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	09/24/2023	\$100.00
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	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	08/24/2023	\$25.00
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 David Miotke	09/25/2023	\$5.00
Mailing Address 1626 Francisco St		
City, State, Zip Code Berkeley, CA 94703-1255		
Name of Employer (Required) Self Employed		
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	09/25/2023	\$250.00
Mailing Address 304 Cassidy St		
City, State, Zip Code Sumner, MS 38957-9715		
Name of Employer (Required) Self Employed		
Occupation (Required) Photographer	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	08/05/2023	\$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 William Lawhead	08/05/2023	\$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 Michael Klarman	08/05/2023	\$250.00
Mailing Address 103 Irving St		
City, State, Zip Code Cambridge, MA 02138-2025		
Name of Employer (Required) Harvard Law School		
Occupation (Required) Law 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 Philip Kuhn	09/05/2023	\$50.00
Mailing Address PO Box 82		
City, State, Zip Code Raymond, MS 39154-0082		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Steven Smith	08/06/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/07/2023	\$10.00
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 John Dunbar	08/17/2023	\$200.00
Mailing Address 621 N Lamar Blvd		
City, State, Zip Code Oxford, MS 38655-3207		
Name of Employer (Required) Not Employed		
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	09/28/2023	\$25.00
Mailing Address 5642 Gibson Rd		
City, State, Zip Code Vicksburg, MS 39180-6320		
Name of Employer (Required) Not Employed		
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 Sally W. Featherstone	09/29/2023	\$1,500.00
Mailing Address 406 Thomas St		
City, State, Zip Code Oxford, MS 38655-2918		
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 Graham Slakie	09/29/2023	\$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 Graham Slakie	09/09/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/30/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/30/2023	\$500.00
Mailing Address 805 Santa Ray Ave		
City, State, Zip Code Oakland, CA 94610-1738		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anne Hill	08/30/2023	\$100.00
Mailing Address 200 Craft St		
City, State, Zip Code Holly Springs, MS 38635-2912		
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 George L. Jordan	08/30/2023	\$5,000.00
Mailing Address 1087 Augusta Dr		
City, State, Zip Code Oxford, MS 38655-6187		
Name of Employer (Required) Oxford Hotels & Resorts, LLC		
Occupation (Required) President	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. Schmidtling	07/31/2023	\$50.00
Mailing Address 102 Driftwood Dr		
City, State, Zip Code Long Beach, MS 39560-5811		
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 Charles R. Lindsay Jr	08/21/2023	\$500.00
Mailing Address 1256 Belvoir Pl		
City, State, Zip Code Jackson, MS 39202-1205		
Name of Employer (Required) Matthews, Cutrer & Lindsay, P.A.		
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	08/31/2023	\$15,000.00
Mailing Address 1201 16th St NW		
City, State, Zip Code Washington, DC 20036-3201		
Name of Employer (Required) _____		
Occupation (Required) _____	Aggregate year-to-date	\$25,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Clarke	09/01/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/22/2023	\$50.00
Mailing Address 883 Highland Park Dr		
City, State, Zip Code Tupelo, MS 38801-6935		
Name of Employer (Required) R&D Marketing		
Occupation (Required) Finance	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	09/13/2023	\$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 James W. Powers	08/04/2023	\$250.00
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 John P. Samonds	09/25/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/05/2023	\$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 Dick Ledoux	09/15/2023	\$25.00
Mailing Address 488 CR 1460		
City, State, Zip Code Tupelo, MS 38804		
Name of Employer (Required) Insource Solutions		
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 Reita E. Schmidtling	09/26/2023	\$50.00
Mailing Address 102 Driftwood Dr		
City, State, Zip Code Long Beach, MS 39560-5811		
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 Robert Hamilton	09/16/2023	\$10.00
Mailing Address 3701 58th Ave		
City, State, Zip Code Meridian, MS 39307-2905		
Name of Employer (Required) Self Employed		
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.	08/07/2023	\$5,000.00
Mailing Address PO Box 63		
City, State, Zip Code Shelby, MS 38774-0063		
Name of Employer (Required)		
Occupation (Required)	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paul Carter	08/07/2023	\$25.00
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 Nan Tarlton	08/27/2023	\$50.00
Mailing Address 210 Meadowlane Dr		
City, State, Zip Code Madison, MS 39110-9611		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	08/27/2023	\$10.00
Mailing Address 5645 Traceside Dr		
City, State, Zip Code Nashville, TN 37221-4093		
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 Linda J. Davis	08/28/2023	\$100.00
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 Margaret Thomas	09/19/2023	\$100.00
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 Linda Breathitt	09/19/2023	\$1,000.00
Mailing Address 1405 Pendennis Cir		
City, State, Zip Code Lexington, KY 40502-2823		
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 Joan Peterman	08/09/2023	\$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

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 Cheryl Goggin	08/29/2023	\$100.00
Mailing Address 402 Mandalay Dr		
City, State, Zip Code Hattiesburg, MS 39402-2039		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Dennis J. J. Erby	08/29/2023	\$25.00
Mailing Address PO Box 2811		
City, State, Zip Code Columbus, MS 39704-2811		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cindy Brown	09/20/2023	\$250.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Angela Sallis	09/10/2023	\$250.00
Mailing Address 330 Demontluzin Ave		
City, State, Zip Code Bay St Louis, MS 39520-4408		
Name of Employer (Required) Stennis Space Center		
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	09/21/2023	\$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 Francis Turner	08/31/2023	\$25.00
Mailing Address 166 Steep Holw		
City, State, Zip Code Hattiesburg, MS 39402-7004		
Name of Employer (Required) Self Employed		
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	09/11/2023	\$1,250.00
Mailing Address 3630 Kings Hwy		
City, State, Zip Code Jackson, MS 39216-3321		
Name of Employer (Required) Not Employed		
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	09/22/2023	\$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

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 Frank Alley	08/02/2023	\$50.00
Mailing Address 735 Gillespie St		
City, State, Zip Code Jackson, MS 39202-1712		
Name of Employer (Required) Not Employed		
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	08/22/2023	\$15,000.00
Mailing Address 765 Park Ave		
City, State, Zip Code New York, NY 10021-4271		
Name of Employer (Required) Not Employed		
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	08/23/2023	\$500.00
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	\$1,000.00
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	09/03/2023	\$100.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/14/2023	\$10,000.00
Mailing Address 4100 Warren St NW		
City, State, Zip Code Washington, DC 20016-2136		
Name of Employer (Required) White & Case LLP		
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	08/25/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/25/2023	\$15.00
Mailing Address 7069 Tudor Ln		
City, State, Zip Code Horn Lake, MS 38637-1259		
Name of Employer (Required) Young Williams		
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	09/05/2023	\$50.00
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 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	09/27/2023	\$100.00
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 Mary Entrekin	08/07/2023	\$3.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/07/2023	\$25.00
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 Claudean Ervin	08/17/2023	\$25.00
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	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	08/27/2023	\$10.00
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	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	09/07/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marian Kurz	08/08/2023	\$10.00
Mailing Address 1300 Central St		
City, State, Zip Code Evanston, IL 60201-1676		
Name of Employer (Required) Self Employed		
Occupation (Required) Public Relations	Aggregate year-to-date	\$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	08/18/2023	\$100.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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

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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Partnership</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Green Hills Farm	09/22/2023	\$150.00
Mailing Address 1721 Highway 4 W		
City, State, Zip Code Ripley, MS 38663-9678		
Name of Employer (Required) 		
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	08/22/2023	\$250.00
Mailing Address 735 Gillespie St		
City, State, Zip Code Jackson, MS 39202-1712		
Name of Employer (Required) Not Employed		
Occupation (Required)	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	09/12/2023	\$32.25
Mailing Address 505 Ward Ave		
City, State, Zip Code Ocean Springs, MS 39564-4844		
Name of Employer (Required) Not Employed		
Occupation (Required)	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	08/03/2023	\$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)	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	08/25/2023	\$250.00
Mailing Address 405 Le Bourgeois Ln		
City, State, Zip Code Brandon, MS 39047-7501		
Name of Employer (Required) Institute of Southern Jewish Life		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cynthia Yap	08/06/2023	\$10.00
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 Perry Hood	08/26/2023	\$2,500.00
Mailing Address 402 Lake Hazle Dr		
City, State, Zip Code Hazlehurst, MS 39083-2210		
Name of Employer (Required) J & K Interest Inc		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard Raspet	09/06/2023	\$500.00
Mailing Address PO Box 2595		
City, State, Zip Code Oxford, MS 38655-4900		
Name of Employer (Required) Not Employed		
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	09/16/2023	\$100.00
Mailing Address 4713 Forrest St		
City, State, Zip Code Moss Point, MS 39563-2413		
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 Judy Woods	09/27/2023	\$500.00
Mailing Address 119 King Richard Rd		
City, State, Zip Code Starkville, MS 39759-3848		
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 Glenn Taylor	09/27/2023	\$50.00
Mailing Address 3644 Old Canton Rd		
City, State, Zip Code Jackson, MS 39216-3313		
Name of Employer (Required) Copeland Cook Taylor & Bush		
Occupation (Required) Attorney	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 Mark A. Novotny	08/07/2023	\$250.00
Mailing Address 515 9th St N		
City, State, Zip Code Columbus, MS 39701-4635		
Name of Employer (Required) Mississippi State University		
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	09/18/2023	\$25.00
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 Mitchell Berger	09/28/2023	\$1,000.00
Mailing Address 201 E Las Olas Blvd		
City, State, Zip Code Fort Lauderdale, FL 33301-4439		
Name of Employer (Required) Berger Singerman, LLP		
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	08/08/2023	\$500.00
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 Anonymous Anonymous	08/18/2023	\$200.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/28/2023	\$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 Anne Bailey	09/09/2023	\$50.00
Mailing Address 705 N Overlook Dr		
City, State, Zip Code Alexandria, VA 22305-1223		
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 Lori Karny	09/09/2023	\$15.00
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 Edson Griswold	09/30/2023	\$35.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	09/21/2023	\$1,000.00
Mailing Address 311 Eagle Spring Rd		
City, State, Zip Code Oxford, MS 38655-2211		
Name of Employer (Required) Rayner Eye Clinic		
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 Stephen Stojcich	08/31/2023	\$100.00
Mailing Address 319 Magnolia Ave		
City, State, Zip Code Ocean Springs, MS 39564-4816		
Name of Employer (Required) EGH Architects		
Occupation (Required) Architect	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	09/22/2023	\$500.00
Mailing Address PO Box 1246		
City, State, Zip Code Pascagoula, MS 39568-1246		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eva Lantrip	08/23/2023	\$100.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/27/2023	\$50.00
Mailing Address 65 Vaiden Dr		
City, State, Zip Code Hernando, MS 38632-2313		
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 William Himel	08/17/2023	\$25.00
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 Judith Herr	08/27/2023	\$50.00
Mailing Address 8012 Maple Ridge Rd		
City, State, Zip Code Bethesda, MD 20814-1308		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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	09/07/2023	\$500.00
Mailing Address INFORMATION REQUESTED		
City, State, Zip Code , MS		
Name of Employer (Required)		
Occupation (Required)	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	09/28/2023	\$2,500.00
Mailing Address 84 State St		
City, State, Zip Code Boston, MA 02109-2202		
Name of Employer (Required) Waterville Consulting		
Occupation (Required) Consultant	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	09/28/2023	\$100.00
Mailing Address 630 Savannah Estates Blvd		
City, State, Zip Code Biloxi, MS 39532-3703		
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 Suzanne Walsh	09/28/2023	\$25.00
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 Gail Linson	08/08/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/09/2023	\$50.00
Mailing Address PO Box 13050		
City, State, Zip Code Sacramento, CA 95813-3050		
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 Walsh	09/09/2023	\$50.00
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 Karen Smith	07/30/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James N. Butts	07/31/2023	\$500.00
Mailing Address 703 N 7th Ave		
City, State, Zip Code Laurel, MS 39440-3468		
Name of Employer (Required) Sanderson Farms		
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	09/11/2023	\$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 Daniel Mars	09/22/2023	\$500.00
Mailing Address PO Box 612		
City, State, Zip Code Philadelphia, MS 39350-0612		
Name of Employer (Required) Self Employed		
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 William Himel	08/22/2023	\$30.00
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 Elvin Sunds	09/23/2023	\$25.00
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	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	09/23/2023	\$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 Richard Rhoden	08/03/2023	\$25.00
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 Gary Elden	08/23/2023	\$2,500.00
Mailing Address 3750 N Lake Shore Dr		
City, State, Zip Code Chicago, IL 60613-4238		
Name of Employer (Required) Shook Hardy Bacon		
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 Peyton D. Prospere	08/23/2023	\$500.00
Mailing Address 1336 Saint Mary St		
City, State, Zip Code Jackson, MS 39202-1848		
Name of Employer (Required) Watkins & Eager PLLC		
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	08/14/2023	\$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 Richard Dabbs	08/25/2023	\$100.00
Mailing Address 5 Turnbury Dr		
City, State, Zip Code Hattiesburg, MS 39401-8229		
Name of Employer (Required) South Central Regional Medical Center		
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	08/25/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/05/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/16/2023	\$1,000.00
Mailing Address 117 Park Circle Dr		
City, State, Zip Code Flowood, MS 39232-8878		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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	09/26/2023	\$500.00
Mailing Address 827 Beaumont Dr		
City, State, Zip Code Madison, MS 39110-7494		
Name of Employer (Required) Bradley Arant		
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 Gary Taylor	09/06/2023	\$500.00
Mailing Address 140 Felicity St		
City, State, Zip Code Bay St Louis, MS 39520-3716		
Name of Employer (Required) ABP Humber		
Occupation (Required) Pilot	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	09/27/2023	\$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 Susan Watson	08/07/2023	\$250.00
Mailing Address 42 County Road 317		
City, State, Zip Code Oxford, MS 38655-5922		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Onellis Stanford	09/28/2023	\$30.00
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 type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James H. Best	08/28/2023	\$200.00
Mailing Address 1355 Kimwood Dr		
City, State, Zip Code Jackson, MS 39211-5912		
Name of Employer (Required) Self Employed		
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 Beckett Howorth	09/08/2023	\$250.00
Mailing Address 921 Hayes Ave		
City, State, Zip Code Oxford, MS 38655-4615		
Name of Employer (Required) Not Employed		
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 Jacqueline Amos	09/29/2023	\$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 Lux	09/29/2023	\$50.00
Mailing Address 616 S 19th Ave		
City, State, Zip Code Hattiesburg, MS 39401-7454		
Name of Employer (Required) University of Southern Mississippi		
Occupation (Required) Professor	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	08/30/2023	\$50.00
Mailing Address 140 Chickasaw Dr		
City, State, Zip Code West Point, MS 39773-3270		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Benjamin Griffith	08/30/2023	\$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 Christopher Dunbar	07/31/2023	\$250.00
Mailing Address 34 A Mardell Cir		
City, State, Zip Code Asheville, NC 28806-3532		
Name of Employer (Required) Blue Ridge Power		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stanley S. Owen	08/11/2023	\$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 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	08/31/2023	\$50,000.00
Mailing Address 501 3rd St NW		
City, State, Zip Code Washington, DC 20001-2760		
Name of Employer (Required) _____		
Occupation (Required) _____	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	08/31/2023	\$100.00
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

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 Jason Lee Shelton	09/22/2023	\$500.00
Mailing Address 1317 Wilson St		
City, State, Zip Code Tupelo, MS 38804-6017		
Name of Employer (Required) General Services Administration		
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	09/22/2023	\$250.00
Mailing Address 1004 Alta Vista Blvd		
City, State, Zip Code Jackson, MS 39209-7104		
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 Michael O'Neal	09/23/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alan Saleski	08/03/2023	\$25.00
Mailing Address 2116 Harrison St		
City, State, Zip Code Evanston, IL 60201-2223		
Name of Employer (Required) Loyola University Chicago		
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	08/03/2023	\$1,000.00
Mailing Address 65 W 13th St		
City, State, Zip Code New York, NY 10011-7910		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Darryl Bishop	08/23/2023	\$500.00
Mailing Address 17 Drake Ldg		
City, State, Zip Code Raymond, MS 39154-7659		
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 Ginny Troutt	09/24/2023	\$25.00
Mailing Address 185 Oakley Rd		
City, State, Zip Code Senatobia, MS 38668-6481		
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 Kerry Hamilton	09/24/2023	\$250.00
Mailing Address 43 County Road 332		
City, State, Zip Code Taylor, MS 38673-4552		
Name of Employer (Required) Kerry Hamilton, Inc.		
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	09/25/2023	\$250.00
Mailing Address 5510 Wisconsin Ave		
City, State, Zip Code Chevy Chase, MD 20815-4403		
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 Edson Griswold	08/05/2023	\$15.00
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 Robin Weigle	08/15/2023	\$50.00
Mailing Address 14046 W Old River Trl		
City, State, Zip Code Gulfport, MS 39503-9046		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Alan Arendale	09/05/2023	\$10.00
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 Hackett Cummins	08/06/2023	\$50.00
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 David Gambetta	08/26/2023	\$100.00
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 Suzanne H. Robinson	08/26/2023	\$25.00
Mailing Address 206 Wood St		
City, State, Zip Code Water Valley, MS 38965-2603		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,425.00
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 Ken Hipple	09/06/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/07/2023	\$15.00
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 Steven Smith	09/18/2023	\$25.00
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 Leesa Golden	09/28/2023	\$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 Mark Olson	08/28/2023	\$250.00
Mailing Address 403 Arbor Vw		
City, State, Zip Code Brandon, MS 39047-7073		
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 Aubrey F. Hunt	09/29/2023	\$100.00
Mailing Address 105 Cannon Ridge Dr		
City, State, Zip Code Brandon, MS 39042-9436		
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 Margaret Thomas	09/30/2023	\$100.00
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 Mark McLain	08/10/2023	\$150.00
Mailing Address 120 Hickory Gln		
City, State, Zip Code Madison, MS 39110-7605		
Name of Employer (Required) MS Neuropsychiatric Center		
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 Dannie Ball	08/30/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	07/31/2023	\$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 Susan Phillips	09/22/2023	\$500.00
Mailing Address 168 Highway 6 E		
City, State, Zip Code Oxford, MS 38655-8708		
Name of Employer (Required) Oxford University United Methodist Church		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathy Griffith	09/22/2023	\$250.00
Mailing Address 162 Oxford Creek Dr		
City, State, Zip Code Oxford, MS 38655-2242		
Name of Employer (Required) Griffith Law Firm		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Miriam Harrington	08/02/2023	\$30.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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 Mozingo	08/12/2023	\$500.00
Mailing Address 1016 Louisville St		
City, State, Zip Code Starkville, MS 39759-3953		
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 Richard Courtney	08/12/2023	\$50.00
Mailing Address PO Box 23126		
City, State, Zip Code Jackson, MS 39225-3126		
Name of Employer (Required) Courtney Elder Law		
Occupation (Required) Attorney	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	08/22/2023	\$25.00
Mailing Address 5406 Lakeview Dr		
City, State, Zip Code Moss Point, MS 39563-2132		
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 Joyce Ellis	08/24/2023	\$250.00
Mailing Address 106 Napa Valley Dr		
City, State, Zip Code Clinton, MS 39056-5732		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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 Mailing Address 1030 Augusta Dr City, State, Zip Code Oxford, MS 38655-8142 Name of Employer (Required) Not Employed	08/16/2023	\$200.00
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 Mailing Address PO Box 12630 City, State, Zip Code Jackson, MS 39236-2630 Name of Employer (Required) Not Employed	09/06/2023	\$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 Ann Smith Mailing Address PO Box 1865 City, State, Zip Code Gulfport, MS 39502-1865 Name of Employer (Required) Not Employed	09/27/2023	\$25.00
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) _____	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	09/07/2023	\$100.00
Occupation (Required) Retired	Aggregate year-to-date	\$425.00

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 Landis Becker Young	09/18/2023	\$250.00
Mailing Address 430 Stuart St		
City, State, Zip Code Boston, MA 02116-6533		
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 Hines Hall	09/28/2023	\$250.00
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	\$1,000.00
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	09/28/2023	\$50.00
Mailing Address 4100 Poplar Ave		
City, State, Zip Code Richton Park, IL 60471-1236		
Name of Employer (Required) Jackson State University		
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 Cliff Johnson	08/29/2023	\$250.00
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	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	08/29/2023	\$10.00
Mailing Address 15055 Swan Lake Blvd		
City, State, Zip Code Gulfport, MS 39503-8613		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Cockrum	09/20/2023	\$25.00
Mailing Address 600 County Road 515		
City, State, Zip Code Ripley, MS 38663-8347		
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 Lisa Dyre	09/30/2023	\$100.00
Mailing Address 2107 Country Club Rd		
City, State, Zip Code Grenada, MS 38901-4834		
Name of Employer (Required) Not Employed		
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	07/30/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	07/31/2023	\$78.25
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	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 Charles Dunagin	08/31/2023	\$25.00
Mailing Address 1302 Fillmore Ave		
City, State, Zip Code Oxford, MS 38655-4424		
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 Emily Fox	09/22/2023	\$10.00
Mailing Address 707 N Rankin St		
City, State, Zip Code Natchez, MS 39120-2944		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brandy Burnette	08/12/2023	\$25.00
Mailing Address 7069 Tudor Ln		
City, State, Zip Code Horn Lake, MS 38637-1259		
Name of Employer (Required) Young Williams		
Occupation (Required) Attorney	Aggregate year-to-date	\$216.00

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 William Haynes	09/12/2023	\$1,000.00
Mailing Address 1501 Jackson Ave W		
City, State, Zip Code Oxford, MS 38655-2566		
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 Willie Crossley	08/23/2023	\$500.00
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	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	\$25.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/13/2023	\$25.00
Mailing Address 15055 Swan Lake Blvd		
City, State, Zip Code Gulfport, MS 39503-8613		
Name of Employer (Required) Not Employed		
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 Cherri Musser	09/24/2023	\$50.00
Mailing Address 105 Piute Cir		
City, State, Zip Code Loudon, TN 37774-2138		
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 Constance Murray	08/04/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/05/2023	\$25.00
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	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	09/26/2023	\$1,000,000.00
Mailing Address 1225 Eye St NW		
City, State, Zip Code Washington, DC 20005-3914		
Name of Employer (Required) _____		
Occupation (Required) _____	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	08/16/2023	\$50.00
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 William R. Wheeler Jr	09/07/2023	\$1,000.00
Mailing Address 1700 Jefferson Ave		
City, State, Zip Code Oxford, MS 38655-3722		
Name of Employer (Required) Wheeler and Franks Law Firm PC		
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 Patrick Malouf	09/18/2023	\$1,000.00
Mailing Address 209 Saint Andrews Dr		
City, State, Zip Code Jackson, MS 39211-2520		
Name of Employer (Required) Porter and Malouf Law Firm		
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 Thomas Wooldridge	08/18/2023	\$500.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/29/2023	\$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 Steve Tadlock	09/09/2023	\$25.00
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 Beckett Howorth	07/30/2023	\$100.00
Mailing Address 921 Hayes Ave		
City, State, Zip Code Oxford, MS 38655-4615		
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 Cynthia Yap	07/30/2023	\$10.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/20/2023	\$100.00
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	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	08/30/2023	\$150.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/30/2023	\$50.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Jackson	09/10/2023	\$100.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$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	08/11/2023	\$30.00
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 Leigh Soares Mailing Address 2605 Pin Oak Dr City, State, Zip Code Starkville, MS 39759-3514 Name of Employer (Required) Mississippi State University	08/21/2023	\$100.00
Occupation (Required) Professor	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	08/31/2023	\$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 Karen Smith Mailing Address 14624 S Vandalia Ave City, State, Zip Code Bixby, OK 74008-3754 Name of Employer (Required) Not Employed	09/22/2023	\$15.00
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 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	09/16/2023	\$100.00
Mailing Address 709 Northdale Pl		
City, State, Zip Code Brandon, MS 39047-5110		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paloma Wu	08/07/2023	\$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 Thomas S. Howorth	09/07/2023	\$250.00
Mailing Address 315 Eagle Spring Rd		
City, State, Zip Code Oxford, MS 38655-2211		
Name of Employer (Required) Howorth & Associates Architects		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Glenn Oliver	08/28/2023	\$10.00
Mailing Address 5642 Gibson Rd		
City, State, Zip Code Vicksburg, MS 39180-6320		
Name of Employer (Required) Not Employed		
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	09/29/2023	\$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 Suzanne H. Robinson	08/09/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/29/2023	\$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 Karen Smith	09/09/2023	\$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 Glenda Burns	09/20/2023	\$50.00
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	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 Michael T. Kayes	09/30/2023	\$200.00
Mailing Address 510 Evergreen Dr		
City, State, Zip Code Long Beach, MS 39560-3228		
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 David Corliss	07/30/2023	\$50.00
Mailing Address 2379 Wendover Dr		
City, State, Zip Code Belden, MS 38826-8644		
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 Bill Brasher	08/30/2023	\$500.00
Mailing Address 830 Holcomb Sweethome Rd		
City, State, Zip Code Holcomb, MS 38940-9310		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$500.00

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 Cathy Garrett	09/10/2023	\$100.00
Mailing Address 26 Lake Barnett Dr		
City, State, Zip Code Brandon, MS 39047-6278		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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	08/21/2023	\$100.00
Mailing Address 562 W End Ave		
City, State, Zip Code New York, NY 10024-2747		
Name of Employer (Required) Teneo		
Occupation (Required) Senior Associate	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	08/21/2023	\$1,000.00
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	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	09/22/2023	\$10.00
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 Cynthia Morse	08/12/2023	\$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 Elizabeth Stevens	09/13/2023	\$2,500.00
Mailing Address 3050 Avon Ln NW		
City, State, Zip Code Washington, DC 20007-2908		
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 Greg White	09/24/2023	\$100.00
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	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 Bradley D. Campbell	08/24/2023	\$100.00
Mailing Address 111 Lakeshore Dr		
City, State, Zip Code Brandon, MS 39047-6019		
Name of Employer (Required) Southern Resource Service Inc.		
Occupation (Required) President	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	09/25/2023	\$100.00
Mailing Address 210 Meadowlane Dr		
City, State, Zip Code Madison, MS 39110-9611		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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 Lisa Bates	09/15/2023	\$500.00
Mailing Address PO Box 306		
City, State, Zip Code Tylertown, MS 39667-0306		
Name of Employer (Required) Geartek		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Walter T. Moore	09/25/2023	\$200.00
Mailing Address 103 Waterstone Dr		
City, State, Zip Code Oxford, MS 38655-0009		
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 Juanita Boutin	08/05/2023	\$100.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/05/2023	\$1,000.00
Mailing Address 8012 Maple Ridge Rd		
City, State, Zip Code Bethesda, MD 20814-1308		
Name of Employer (Required) Not Employed		
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 Janice Jackson	08/15/2023	\$34.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$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	09/05/2023	\$50.00
Mailing Address 123 Nottingham Ter		
City, State, Zip Code Buffalo, NY 14216-3504		
Name of Employer (Required) University at Buffalo		
Occupation (Required) Faculty	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	09/05/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/26/2023	\$50.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/17/2023	\$25.00
Mailing Address 301 Woodrun Dr		
City, State, Zip Code Ridgeland, MS 39157-2504		
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 David Clark	08/17/2023	\$3,000.00
Mailing Address 110 Olympia Flds		
City, State, Zip Code Jackson, MS 39211-2509		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$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	09/08/2023	\$300.00
Mailing Address 1828 Gary Rd		
City, State, Zip Code Stewartsville, NJ 08886-2608		
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 Jerry Meadors	09/19/2023	\$25.00
Mailing Address PO Box 369		
City, State, Zip Code Kiln, MS 39556-0369		
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 Raburn Coln	08/20/2023	\$50.00
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 Lloyd Gordon	07/31/2023	\$50.00
Mailing Address 105 Colony Crown		
City, State, Zip Code Brandon, MS 39047-8202		
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 Catherine Smith	08/21/2023	\$100.00
Mailing Address 326 Windsor Dr N		
City, State, Zip Code Oxford, MS 38655-7091		
Name of Employer (Required) Southern Bird Studio		
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	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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/31/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/11/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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 Jackson	08/13/2023	\$25.00
Mailing Address 5157 Montavale S		
City, State, Zip Code Southaven, MS 38672-2513		
Name of Employer (Required) Not Employed		
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	09/25/2023	\$250.00
Mailing Address 710 Long Meadow Dr		
City, State, Zip Code Oxford, MS 38655-9792		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Peter Smith	09/26/2023	\$100.00
Mailing Address 403 Whippoorwill Rd		
City, State, Zip Code Brandon, MS 39047-6434		
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 Charles Fenner	08/06/2023	\$1,000.00
Mailing Address PO Box 759		
City, State, Zip Code Edna, TX 77957-0759		
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 Douglas Masterson	09/16/2023	\$25.00
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	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	08/07/2023	\$1,000.00
Mailing Address 30038 Hideaway Dr		
City, State, Zip Code Amory, MS 38821-8741		
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 R. Clark Webb	08/07/2023	\$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)	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	08/17/2023	\$25.00
Mailing Address 108 Sumach St		
City, State, Zip Code Lookout Mountai, TN 37350-1132		
Name of Employer (Required) Not Employed		
Occupation (Required)	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	08/17/2023	\$100.00
Mailing Address 101 County Road 178		
City, State, Zip Code Oxford, MS 38655-8479		
Name of Employer (Required) Self Employed		
Occupation (Required)	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	08/27/2023	\$50.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$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 Reita E. Schmidtling	09/28/2023	\$25.00
Mailing Address 102 Driftwood Dr		
City, State, Zip Code Long Beach, MS 39560-5811		
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 William Himel	09/19/2023	\$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 Arthur Collins	09/19/2023	\$1,000.00
Mailing Address 952 Mackall Farms Ln		
City, State, Zip Code Mclean, VA 22101-1645		
Name of Employer (Required) The GROUP DC		
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	08/19/2023	\$100.00
Mailing Address 520 Deer Creek Dr		
City, State, Zip Code Oxford, MS 38655-8559		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Hamilton	08/29/2023	\$10.00
Mailing Address 3701 58th Ave		
City, State, Zip Code Meridian, MS 39307-2905		
Name of Employer (Required) Self Employed		
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 Janice Walker	09/30/2023	\$25.00
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	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	07/30/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/21/2023	\$33.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Charles Richardson	08/31/2023	\$250.00
Mailing Address 6008 Vista Cir		
City, State, Zip Code Gulfport, MS 39507-4634		
Name of Employer (Required) Chism Strategies		
Occupation (Required) Consultant	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	08/31/2023	\$50.00
Mailing Address PO Box 1408		
City, State, Zip Code Ridgeland, MS 39158-1408		
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 Cindy Akins	08/02/2023	\$50.00
Mailing Address 86449 Meadowwood Dr		
City, State, Zip Code Yulee, FL 32097-6427		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	08/22/2023	\$250.00
Mailing Address 516 Chestnut Dr		
City, State, Zip Code Starkville, MS 39759-3639		
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 Mary Entrekin	09/23/2023	\$10.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/03/2023	\$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 Ron Coleman	08/13/2023	\$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

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 Bert Ehrhardt	08/23/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/24/2023	\$25.00
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	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	08/24/2023	\$500.00
Mailing Address 122 Airport Rd		
City, State, Zip Code Indianola, MS 38751-2685		
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 Felicia Brown-Williams	09/14/2023	\$50.00
Mailing Address 4010 Council Cir		
City, State, Zip Code Jackson, MS 39206-5813		
Name of Employer (Required) David & Lucile Packard Foundation		
Occupation (Required) Advisor	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	09/14/2023	\$1,000.00
Mailing Address 2509 Promenade Blvd		
City, State, Zip Code Ocean Springs, MS 39564-8720		
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 Raleigh Byars	08/25/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/05/2023	\$15.00
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 Drew Smith	09/26/2023	\$1,000.00
Mailing Address 2935 Corston Rd		
City, State, Zip Code Ann Arbor, MI 48105-3714		
Name of Employer (Required) University of Michigan		
Occupation (Required) Treasurer	Aggregate year-to-date	\$2,000.00

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 Randall B. Wall	08/06/2023	\$25.00
Mailing Address 2206 Culleywood Rd		
City, State, Zip Code Jackson, MS 39211-5815		
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 Donna S. Smith	08/07/2023	\$250.00
Mailing Address 711 6th Ave N		
City, State, Zip Code Columbus, MS 39701-4617		
Name of Employer (Required) Self Employed		
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 Misty Shaw-Feder	08/17/2023	\$500.00
Mailing Address 1202 Iola Rd		
City, State, Zip Code Ocean Springs, MS 39564-2819		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eric Beamon	08/27/2023	\$10.00
Mailing Address 15055 Swan Lake Blvd		
City, State, Zip Code Gulfport, MS 39503-8613		
Name of Employer (Required) Not Employed		
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	09/30/2023	\$1,000.00
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	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	08/31/2023	\$100.00
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	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	09/01/2023	\$500.00
Mailing Address PO Box 72		
City, State, Zip Code Aberdeen, MS 39730-0072		
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 Heather Denison	08/12/2023	\$200.00
Mailing Address 104 Temple Ter		
City, State, Zip Code Ocean Springs, MS 39564-5402		
Name of Employer (Required) Self Employed		
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 Lee Smithson	08/22/2023	\$250.00
Mailing Address 155 Castle Cir		
City, State, Zip Code Madison, MS 39110-9403		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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	09/12/2023	\$100.00
Mailing Address 10611 County Road 500		
City, State, Zip Code Ripley, MS 38663-9199		
Name of Employer (Required) Not Employed		
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 Karen Smith	09/23/2023	\$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 Belinda Alexander	08/03/2023	\$50.00
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	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 Anita Yarbrough	08/24/2023	\$7.50
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 Diane Cockrum	09/14/2023	\$25.00
Mailing Address 600 County Road 515		
City, State, Zip Code Ripley, MS 38663-8347		
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 Nathan Prescott	08/26/2023	\$250.00
Mailing Address 309 Live Oak Ave		
City, State, Zip Code Ocean Springs, MS 39564-3909		
Name of Employer (Required) Self Employed		
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 Stephanie Scott	09/06/2023	\$250.00
Mailing Address 433 Greenwood Ln		
City, State, Zip Code Ridgeland, MS 39157-4043		
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 Clinton Mayes	08/17/2023	\$50.00
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 Andrew Beck	08/27/2023	\$2,500.00
Mailing Address 5250 Vanston Rd		
City, State, Zip Code Cutchogue, NY 11935-1630		
Name of Employer (Required) Self Employed		
Occupation (Required) Public Policy	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	09/18/2023	\$100.00
Mailing Address 166 Steep Holw		
City, State, Zip Code Hattiesburg, MS 39402-7004		
Name of Employer (Required) Self Employed		
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 Vick Etheridge	09/28/2023	\$5,000.00
Mailing Address 4212 N Harper Rd		
City, State, Zip Code Corinth, MS 38834-2407		
Name of Employer (Required) Corinthian, Inc.		
Occupation (Required) President	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	09/28/2023	\$100.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/28/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/09/2023	\$50.00
Mailing Address 114 Harvey St		
City, State, Zip Code Belzoni, MS 39038-3112		
Name of Employer (Required) Self Employed		
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 William Himel	08/09/2023	\$25.00
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

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 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	09/12/2023	\$15.00
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 Synarus Green	08/23/2023	\$20.00
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	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	08/23/2023	\$500.00
Mailing Address 618 Brampton Pl		
City, State, Zip Code Ridgeland, MS 39157-4195		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mack Lowery	09/03/2023	\$5.00
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 Jacob Knight	09/13/2023	\$50.00
Mailing Address 6873 Sweetclover Dr		
City, State, Zip Code Ocean Springs, MS 39564-5079		
Name of Employer (Required) JSR Micro		
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	08/14/2023	\$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 Andrew Dickson	09/14/2023	\$200.00
Mailing Address 807 Sth 19Th Ave		
City, State, Zip Code Hattiesburg, MS 39401		
Name of Employer (Required) Not Employed		
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	08/16/2023	\$10.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/28/2023	\$100.00
Mailing Address 2090 Jefferson Pkwy		
City, State, Zip Code Hernando, MS 38632-5905		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	09/28/2023	\$31.79
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/08/2023	\$500.00
Mailing Address PO Box 128		
City, State, Zip Code Becker, MS 38825-0128		
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 Brenda Coleman	09/08/2023	\$25.00
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

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	09/08/2023	\$11,000.00
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 Karen Smith	09/29/2023	\$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 David Collins	09/19/2023	\$1,000.00
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	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	09/20/2023	\$50.00
Mailing Address 105 Colony Crown		
City, State, Zip Code Brandon, MS 39047-8202		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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

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 Jay K Johnson	09/21/2023	\$500.00
Mailing Address 908 Chickasaw Rd		
City, State, Zip Code Oxford, MS 38655-2725		
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 Raleigh Byars	08/31/2023	\$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 Danny Rasberry	08/02/2023	\$500.00
Mailing Address 754 N 8th Ave		
City, State, Zip Code Laurel, MS 39440-3451		
Name of Employer (Required) Rasberry Producer Group		
Occupation (Required) Sales	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	09/02/2023	\$25.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/23/2023	\$25.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold	09/23/2023	\$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 E. K. Pruitt	08/03/2023	\$25.00
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 Richard Barrett	08/23/2023	\$1,000.00
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	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	08/23/2023	\$100.00
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 Jeffrey Watt	08/14/2023	\$150.00
Mailing Address 915 Old Taylor Rd		
City, State, Zip Code Oxford, MS 38655-4637		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Professor	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	08/24/2023	\$10.00
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 Joyce Tubb	08/25/2023	\$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 Michael O'Neal	08/25/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sallye Howorth	09/15/2023	\$250.00
Mailing Address 1200 Harrison Ave		
City, State, Zip Code Oxford, MS 38655-3932		
Name of Employer (Required) Not Employed		
Occupation (Required) University Student	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	08/16/2023	\$250.00
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 Harold Barber Boone	09/06/2023	\$500.00
Mailing Address 3956 Old Canton Rd		
City, State, Zip Code Jackson, MS 39216-3617		
Name of Employer (Required) Butler Snow 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 Mark C. Wallfisch	09/16/2023	\$100.00
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	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 Alan Solomont	09/27/2023	\$500.00
Mailing Address 60 Beaver Rd		
City, State, Zip Code Weston, MA 02493-1018		
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 Janice Antonow	09/27/2023	\$25.00
Mailing Address 3336 Whippoorwill Ln		
City, State, Zip Code Oxford, MS 38655-5311		
Name of Employer (Required) City of Oxford		
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 Stacy Callender	08/07/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/28/2023	\$50.00
Mailing Address 7371 N Aberdeen Dr		
City, State, Zip Code Pass Christian, MS 39571-7012		
Name of Employer (Required) Self Employed		
Occupation (Required) 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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie Steverson	09/28/2023	\$30.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/08/2023	\$25.00
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 M. Westbrook	08/08/2023	\$2,500.00
Mailing Address 800 College Hill Rd		
City, State, Zip Code Oxford, MS 38655-2767		
Name of Employer (Required) Self Employed		
Occupation (Required) Marketing	Aggregate year-to-date	\$58,500.00

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 Mary Miller	08/28/2023	\$50.00
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	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	09/29/2023	\$100.00
Mailing Address 828 Battle Rd		
City, State, Zip Code Byhalia, MS 38611-8999		
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 John Brombacher	09/29/2023	\$25.00
Mailing Address 108 Coachmans Rd		
City, State, Zip Code Madison, MS 39110-9227		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jo Ann Denley	08/29/2023	\$1,000.00
Mailing Address PO Box 278		
City, State, Zip Code Bruce, MS 38915-0278		
Name of Employer (Required) Calhoun County Journal		
Occupation (Required) Columnist	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

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 Joyce N. Dortch	08/11/2023	\$500.00
Mailing Address 4626 Hickory Ridge Rd		
City, State, Zip Code Jackson, MS 39211-5846		
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 David Erdman	09/11/2023	\$250.00
Mailing Address 2445 Selwyn Ave		
City, State, Zip Code Charlotte, NC 28209-1668		
Name of Employer (Required) Self Employed		
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 Brian Johnson	09/22/2023	\$1,000.00
Mailing Address 113 Rosedowne Dr		
City, State, Zip Code Madison, MS 39110-4757		
Name of Employer (Required) Trustmark National Bank		
Occupation (Required) Insurance Consultant	Aggregate year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jerry Sandlin	09/12/2023	\$50.00
Mailing Address 303 Robbers Trce		
City, State, Zip Code Ridgeland, MS 39157-8773		
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 Patrick Phillips	09/23/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/03/2023	\$25.00
Mailing Address 968 Road 261		
City, State, Zip Code Tupelo, MS 38801-7600		
Name of Employer (Required) Social Security Administration		
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) _____	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 Joyce Leech	09/13/2023	\$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 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

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	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	09/07/2023	\$1,000.00
Mailing Address PO Box 7081		
City, State, Zip Code Gulfport, MS 39506-7081		
Name of Employer (Required) Gastroenterology Center PA		
Occupation (Required) Healthcare	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	09/18/2023	\$25.00
Mailing Address 411 N Montgomery St		
City, State, Zip Code Starkville, MS 39759-2605		
Name of Employer (Required) MS State University		
Occupation (Required) Instructor	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	09/28/2023	\$10,000.00
Mailing Address 1201 16th St NW		
City, State, Zip Code Washington, DC 20036-3201		
Name of Employer (Required) _____		
Occupation (Required) _____	Aggregate year-to-date	\$25,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leesa Golden	09/28/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/18/2023	\$100.00
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	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	09/29/2023	\$250.00
Mailing Address PO Box 566		
City, State, Zip Code Iuka, MS 38852-0566		
Name of Employer (Required) Phillips & Phillips, P.A.		
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 Marjorie Williams	08/19/2023	\$100.00
Mailing Address 505 Ward Ave		
City, State, Zip Code Ocean Springs, MS 39564-4844		
Name of Employer (Required) Not Employed		
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 William Himel	08/29/2023	\$20.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/30/2023	\$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
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	08/21/2023	\$25,000.00
Mailing Address 1750 New York Ave NW		
City, State, Zip Code Washington, DC 20006-5301		
Name of Employer (Required)		
Occupation (Required)	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	08/31/2023	\$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 Joanne Rhodes	08/31/2023	\$250.00
Mailing Address 7904 Ashbrook Cv		
City, State, Zip Code Germantown, TN 38138-2907		
Name of Employer (Required) University of Memphis		
Occupation (Required) Instructor	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	09/01/2023	\$250.00
Mailing Address 2122 Taryn Ln		
City, State, Zip Code Nesbit, MS 38651-9513		
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 Emily Liles	09/22/2023	\$50.00
Mailing Address 6346 Nellwood Dr		
City, State, Zip Code Olive Branch, MS 38654-8253		
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 Robert Hamilton	09/23/2023	\$10.00
Mailing Address 3701 58th Ave		
City, State, Zip Code Meridian, MS 39307-2905		
Name of Employer (Required) Self Employed		
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	08/03/2023	\$10.00
Mailing Address 37 County Road 317		
City, State, Zip Code Heidelberg, MS 39439-3679		
Name of Employer (Required) Jasper		
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	08/13/2023	\$500.00
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 David Ward Mailing Address 1725 Hearthglow Ln City, State, Zip Code Charlottesville, VA 22901-1273 Name of Employer (Required) Crutchfield Corporation	09/24/2023	\$200.00
Occupation (Required) Sales Advisor	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	09/04/2023	\$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 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	\$30.00
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 Lori Karny	08/25/2023	\$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 Gerald Blessey	09/06/2023	\$500.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Jenkins-Joffe	09/16/2023	\$35.00
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 Carol Halliburton	09/27/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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 Mailing Address 1656 Highway 43 S City, State, Zip Code Pelahatchie, MS 39145-3440 Name of Employer (Required) Not Employed	07/30/2023	\$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) _____	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	07/30/2023	\$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) _____	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	08/20/2023	\$10.00
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 James W. Powers Mailing Address 113 Greens View Dr City, State, Zip Code Madison, MS 39110-8050 Name of Employer (Required) Not Employed	07/31/2023	\$10.00
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 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	\$43.30
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 Miriam Harrington Mailing Address 3800 Fairfax Dr City, State, Zip Code Arlington, VA 22203-1720 Name of Employer (Required) Not Employed	09/01/2023	\$26.00
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 Roy S. Mitchell Mailing Address 704 Forest Point Dr City, State, Zip Code Brandon, MS 39047-6220 Name of Employer (Required) Not Employed	09/22/2023	\$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 Cherri Lightsey Mailing Address 3701 Crawford Rd City, State, Zip Code Crawford, MS 39743-9629 Name of Employer (Required) Not Employed	09/02/2023	\$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 Joshua Phillips	09/12/2023	\$3.00
Mailing Address 184 Sundown Cv		
City, State, Zip Code Madison, MS 39110-8168		
Name of Employer (Required) Mississippi Asthma and Allergy		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William B. Thompson	08/23/2023	\$200.00
Mailing Address 4444 Woodlark Dr		
City, State, Zip Code Jackson, MS 39211-6226		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ed Clynch	09/24/2023	\$250.00
Mailing Address 401 Colonial Cir		
City, State, Zip Code Starkville, MS 39759-4213		
Name of Employer (Required) Not Employed		
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 Leonard A. Blackwell II	09/14/2023	\$250.00
Mailing Address 11857 Lorraine Rd		
City, State, Zip Code Gulfport, MS 39503-3951		
Name of Employer (Required) Brunini Law Firm		
Occupation (Required) Attorney	Aggregate year-to-date	\$2,250.00

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	09/17/2023	\$100.00
Mailing Address 1300 E Lafayette St		
City, State, Zip Code Detroit, MI 48207-2921		
Name of Employer (Required) Doner Detroit		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Karen Sweet	09/18/2023	\$250.00
Mailing Address 25 Kenmore St		
City, State, Zip Code Newton, MA 02459-2105		
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 Crymes M. Pittman	09/08/2023	\$250.00
Mailing Address 2213 Heritage Hill Dr		
City, State, Zip Code Jackson, MS 39211-5822		
Name of Employer (Required) Self Employed		
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 Elvin Sunds	09/19/2023	\$25.00
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	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	09/29/2023	\$50.00
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	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	09/29/2023	\$10.00
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 Lee Carson	08/29/2023	\$500.00
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 Ron Coleman	08/29/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	07/30/2023	\$100.00
Mailing Address 1329 Willis Rd		
City, State, Zip Code Carthage, MS 39051-9126		
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 Donald Sittman	09/10/2023	\$100.00
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 Don A. Zatroch	07/31/2023	\$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 Sababu Rashid	09/22/2023	\$500.00
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	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	09/12/2023	\$250.00
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 Audrey McBride	09/13/2023	\$50.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joe Love	08/04/2023	\$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 Nora Brownell	09/25/2023	\$250.00
Mailing Address 105 Pommander Walk		
City, State, Zip Code Alexandria, VA 22314-3844		
Name of Employer (Required) ESPY Energy Solutions, LLC		
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	09/25/2023	\$100.00
Mailing Address 3701 58th Ave		
City, State, Zip Code Meridian, MS 39307-2905		
Name of Employer (Required) Self Employed		
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 Maureen McKerns	09/27/2023	\$25.00
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 Brenda Daniels	09/17/2023	\$100.00
Mailing Address 120 Cascade Ave		
City, State, Zip Code Winston Salem, NC 27127-2027		
Name of Employer (Required) University of North Carolina School of the Arts		
Occupation (Required) 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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Stephen Stojcich	09/19/2023	\$100.00
Mailing Address 319 Magnolia Ave		
City, State, Zip Code Ocean Springs, MS 39564-4816		
Name of Employer (Required) EGH Architects		
Occupation (Required) Architect	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	09/29/2023	\$15,000.00
Mailing Address 17 Winthrop St		
City, State, Zip Code West Newton, MA 02465-2308		
Name of Employer (Required) Anaylsis Group		
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	08/09/2023	\$100.00
Mailing Address 160 Cabrini Blvd		
City, State, Zip Code New York, NY 10033-1143		
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 Pamela Helms	09/09/2023	\$25.00
Mailing Address 317 Autumn Crest Dr		
City, State, Zip Code Ridgeland, MS 39157-2604		
Name of Employer (Required) Self Employed		
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	09/30/2023	\$25.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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. Eisenhower	09/30/2023	\$200.00
Mailing Address 354 9th St NE		
City, State, Zip Code Atlanta, GA 30309-4209		
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 Glenn Taylor	07/30/2023	\$50.00
Mailing Address 3644 Old Canton Rd		
City, State, Zip Code Jackson, MS 39216-3313		
Name of Employer (Required) Copeland Cook Taylor & Bush		
Occupation (Required) Attorney	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 Tim Wolf	08/21/2023	\$2,500.00
Mailing Address 5311 Waterstone Dr		
City, State, Zip Code Boulder, CO 80301-4399		
Name of Employer (Required) Wolf Interests, Inc.		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Michael C. Moore	08/21/2023	\$1,000.00
Mailing Address 104 Hidden Oaks Cv		
City, State, Zip Code Ridgeland, MS 39157-7703		
Name of Employer (Required) Self Employed		
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	09/11/2023	\$25.00
Mailing Address 5924 Whitestone Rd		
City, State, Zip Code Jackson, MS 39206-2515		
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 Jackie Ray	08/02/2023	\$500.00
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	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	09/13/2023	\$100.00
Mailing Address 6007 SW 240th St		
City, State, Zip Code Vashon, WA 98070-7247		
Name of Employer (Required) Health Net		
Occupation (Required) 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 Angelos Vamvakas	09/24/2023	\$100.00
Mailing Address 3161 Wayne Dr		
City, State, Zip Code Diberville, MS 39540-8554		
Name of Employer (Required) Self Employed		
Occupation (Required) Psychiatrist	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	09/25/2023	\$1,000.00
Mailing Address 521 N 11th St		
City, State, Zip Code Oxford, MS 38655-3107		
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 David Gambetta	08/05/2023	\$100.00
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 George Trout IV	08/05/2023	\$200.00
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	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	09/05/2023	\$50.00
Mailing Address 1713 Reserve Dr		
City, State, Zip Code Clinton, MS 39056-5667		
Name of Employer (Required) Submittable		
Occupation (Required) Campaign Support Lead	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	09/15/2023	\$25.00
Mailing Address 7844 E Sandalwood Dr		
City, State, Zip Code Scottsdale, AZ 85250-7269		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Brenda Daniels	08/17/2023	\$100.00
Mailing Address 120 Cascade Ave		
City, State, Zip Code Winston Salem, NC 27127-2027		
Name of Employer (Required) University of North Carolina School of the Arts		
Occupation (Required) 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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Alexander	08/17/2023	\$100.00
Mailing Address 18 Highland Meadows Dr		
City, State, Zip Code Jackson, MS 39211-5949		
Name of Employer (Required) Alexander CPA, LLC		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Smithson	09/20/2023	\$100.00
Mailing Address 155 Castle Cir		
City, State, Zip Code Madison, MS 39110-9403		
Name of Employer (Required) Not Employed		
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

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 Sanford Johnson	08/31/2023	\$100.00
Mailing Address 643 W 2nd St		
City, State, Zip Code Clarksdale, MS 38614-3801		
Name of Employer (Required) Teach Plus		
Occupation (Required) State Director	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	09/11/2023	\$750,000.00
Mailing Address 1225 Eye St NW		
City, State, Zip Code Washington, DC 20005-3914		
Name of Employer (Required) 		
Occupation (Required) 	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	08/12/2023	\$100.00
Mailing Address 403 Whippoorwill Rd		
City, State, Zip Code Brandon, MS 39047-6434		
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 Jean Fenwick	09/12/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/23/2023	\$500.00
Mailing Address 1201 Mission Park Dr		
City, State, Zip Code Vicksburg, MS 39180-3747		
Name of Employer (Required) Nash Family Dentistry		
Occupation (Required) Dentist	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	08/03/2023	\$3.00
Mailing Address 470 Fairway Dr		
City, State, Zip Code New Orleans, LA 70124-1023		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	09/13/2023	\$500.00
Mailing Address 562 W End Ave		
City, State, Zip Code New York, NY 10024-2747		
Name of Employer (Required) Teneo		
Occupation (Required) Senior Associate	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	08/04/2023	\$500.00
Mailing Address 2217 Heritage Hill Dr		
City, State, Zip Code Jackson, MS 39211-5822		
Name of Employer (Required) Morgan & Morgan		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00

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 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	09/26/2023	\$50.00
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	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	09/26/2023	\$250.00
Mailing Address 200 Dominican Dr		
City, State, Zip Code Madison, MS 39110-8630		
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 Randy Wadkins	08/06/2023	\$25.00
Mailing Address 1605 Pierce Avenue Ext		
City, State, Zip Code Oxford, MS 38655-4459		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Scientist	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	08/07/2023	\$1,000.00
Mailing Address 406 3rd Ave N		
City, State, Zip Code Columbus, MS 39701-3917		
Name of Employer (Required)		
Occupation (Required)	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	08/17/2023	\$2,500.00
Mailing Address 108 Sumach St		
City, State, Zip Code Lookout Mountai, TN 37350-1132		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	08/17/2023	\$250.00
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	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	08/27/2023	\$50.00
Mailing Address 520 College Hill Rd		
City, State, Zip Code Oxford, MS 38655-2000		
Name of Employer (Required) Not Employed		
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 Faye Cox	09/18/2023	\$25.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/20/2023	\$5.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Carl Pechman	09/20/2023	\$250.00
Mailing Address 4414 Albemarle St NW		
City, State, Zip Code Washington, DC 20016-2014		
Name of Employer (Required) KeyLogic		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Theresa Guthrie	08/10/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anthony Vita	08/30/2023	\$500.00
Mailing Address 65 Vaiden Dr		
City, State, Zip Code Hernando, MS 38632-2313		
Name of Employer (Required) Not Employed		
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 Janice Walker	08/31/2023	\$25.00
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	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	08/31/2023	\$25.00
Mailing Address 333 W 86th St		
City, State, Zip Code New York, NY 10024-3114		
Name of Employer (Required) Self Employed		
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	09/23/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/03/2023	\$50.00
Mailing Address 204 Eastbrooke St		
City, State, Zip Code Jackson, MS 39216-4716		
Name of Employer (Required) Not Employed		
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) _____	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	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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	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	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	09/14/2023	\$250.00
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	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	08/25/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/15/2023	\$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 Janet Bland	09/26/2023	\$50.00
Mailing Address 810 Sample Rd		
City, State, Zip Code Belden, MS 38826-9650		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	08/07/2023	\$100.00
Mailing Address 211 Chapman Rd		
City, State, Zip Code Columbus, MS 39705-1666		
Name of Employer (Required) Mississippi Association of Recovering Pharmacists		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Entrekin	09/18/2023	\$5.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Vonda Reeves-Darby	09/28/2023	\$25.00
Mailing Address 3866 Forest Hill Rd		
City, State, Zip Code Jackson, MS 39212-5301		
Name of Employer (Required) GI Alliance		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jonathan McBride	09/18/2023	\$500.00
Mailing Address 7697 Eureka Rd		
City, State, Zip Code Courtland, MS 38620-9456		
Name of Employer (Required) McBride Cattle Company		
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	08/08/2023	\$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 James Raymond	08/18/2023	\$500.00
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 Brent Buehrer	08/29/2023	\$25.00
Mailing Address 3249 Pepper Ridge Dr		
City, State, Zip Code Maumee, OH 43537-9697		
Name of Employer (Required) Buehrer Group Architecture & Engineering		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Eleanor Haimsohn	09/30/2023	\$25.00
Mailing Address 4700 Treadway Rd		
City, State, Zip Code Hernando, MS 38632-9149		
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 Christy Jones	09/30/2023	\$250.00
Mailing Address 205 Duck Cv		
City, State, Zip Code Madison, MS 39110-9280		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marc Doyle	07/30/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/22/2023	\$25.00
Mailing Address 5645 Traceside Dr		
City, State, Zip Code Nashville, TN 37221-4093		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name C&B Enterprise Inc	09/22/2023	\$300.00
Mailing Address PO Box 2816		
City, State, Zip Code Madison, MS 39130-2816		
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 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	09/13/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/14/2023	\$50.00
Mailing Address 1665 Toccopola Junction Rd		
City, State, Zip Code Thaxton, MS 38871-9005		
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 James Hutto	08/24/2023	\$7.50
Mailing Address 62 Redfern Trl		
City, State, Zip Code Petal, MS 39465-9415		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Cox	09/14/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/15/2023	\$50.00
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 Ann J. Abadie	09/15/2023	\$50.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Billy Wilemon	09/16/2023	\$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 Wilbur O. Colom	08/07/2023	\$1,000.00
Mailing Address 800 2nd St S		
City, State, Zip Code Columbus, MS 39701-7202		
Name of Employer (Required) The Colom Law Firm LLC		
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	08/09/2023	\$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 Onellis Stanford	08/29/2023	\$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 type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/09/2023	\$50.00
Mailing Address 244 Old Magee Rd		
City, State, Zip Code Magee, MS 39111-3349		
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 Gloria Williamson	09/20/2023	\$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

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 Steve Tadlock	07/30/2023	\$25.00
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 Glenn Taylor	09/10/2023	\$50.00
Mailing Address 3644 Old Canton Rd		
City, State, Zip Code Jackson, MS 39216-3313		
Name of Employer (Required) Copeland Cook Taylor & Bush		
Occupation (Required) Attorney	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	09/21/2023	\$25.00
Mailing Address PO Box 85		
City, State, Zip Code Taylor, MS 38673-0085		
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 Cristen Hemmins	08/31/2023	\$100.00
Mailing Address 101 County Road 178		
City, State, Zip Code Oxford, MS 38655-8479		
Name of Employer (Required) Self Employed		
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 Benvenuti	08/31/2023	\$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 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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/11/2023	\$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 David Goodman	09/11/2023	\$1,000.00
Mailing Address 42 Rolling Ridge Rd		
City, State, Zip Code Upper Saddle Ri, NJ 07458-1705		
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 Steve Tadlock	08/12/2023	\$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 Debra Warner	08/22/2023	\$30.00
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 Mike Brown	08/03/2023	\$250.00
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		
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 Betty Wong	08/23/2023	\$250.00
Mailing Address 533 Windy Ridge Ln		
City, State, Zip Code Madison, MS 39110-8523		
Name of Employer (Required) New Stage Theatre		
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	08/23/2023	\$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 Melita Thorpe	08/04/2023	\$50.00
Mailing Address 5 Douglas Rd		
City, State, Zip Code Ellisville, MS 39437-4805		
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 George B. Schimmel	09/04/2023	\$1,250.00
Mailing Address 3630 Kings Hwy		
City, State, Zip Code Jackson, MS 39216-3321		
Name of Employer (Required) Not Employed		
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	09/25/2023	\$30.00
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 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

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 Jane D. Thomley	08/17/2023	\$25.00
Mailing Address 18 Bridgewater Dr		
City, State, Zip Code Hattiesburg, MS 39402-1667		
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 Graham Slakie	09/28/2023	\$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 Gail Tapscott	09/28/2023	\$100.00
Mailing Address 1711 Anderson Rd		
City, State, Zip Code Oxford, MS 38655-2570		
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 Diane Cockrum	09/28/2023	\$25.00
Mailing Address 600 County Road 515		
City, State, Zip Code Ripley, MS 38663-8347		
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 Brenda Plunkett	08/08/2023	\$250.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/28/2023	\$500.00
Mailing Address 65 W 13th St		
City, State, Zip Code New York, NY 10011-7910		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary J. Westerlund	09/08/2023	\$25.00
Mailing Address 1201 Cowden Dr		
City, State, Zip Code Amory, MS 38821-1306		
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 Jason L. Shelton	09/19/2023	\$500.00
Mailing Address PO Box 1310		
City, State, Zip Code Tupelo, MS 38802-1310		
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 Zilla Spencer	08/09/2023	\$50.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/09/2023	\$10.00
Mailing Address 317 Autumn Crest Dr		
City, State, Zip Code Ridgeland, MS 39157-2604		
Name of Employer (Required) Self Employed		
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	09/20/2023	\$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 Elwin Hall	08/30/2023	\$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 Eric Beamon	09/10/2023	\$35.00
Mailing Address 15055 Swan Lake Blvd		
City, State, Zip Code Gulfport, MS 39503-8613		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Barbara Hogan	09/21/2023	\$100.00
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 Chris Jones	07/31/2023	\$250.00
Mailing Address 2 Hoggards Rdg		
City, State, Zip Code Little Rock, AR 72211-3795		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Thomas Adams	08/31/2023	\$5.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/11/2023	\$25.00
Mailing Address 120 Hickory Gln		
City, State, Zip Code Madison, MS 39110-7605		
Name of Employer (Required) MS Neuropsychiatric Center		
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	09/22/2023	\$250.00
Mailing Address 516 Cook St		
City, State, Zip Code Philadelphia, MS 39350-2404		
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 Wayne Minyard	08/12/2023	\$5.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/23/2023	\$250.00
Mailing Address 133 U St NE		
City, State, Zip Code Washington, DC 20002-1319		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Professor	Aggregate year-to-date	\$500.00

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 Forrest Morris	08/03/2023	\$500.00
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	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	08/03/2023	\$1,000.00
Mailing Address 1830 Hubbard Rd		
City, State, Zip Code Courtland, MS 38620-9741		
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 Robert Kyle	08/23/2023	\$1,000.00
Mailing Address 107 Carriage Ln		
City, State, Zip Code Madison, MS 39110-9205		
Name of Employer (Required) Kyle, Wynn & Associates		
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 Elizabeth Payne	08/14/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/14/2023	\$100.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/25/2023	\$100.00
Mailing Address 10611 County Road 500		
City, State, Zip Code Ripley, MS 38663-9199		
Name of Employer (Required) Not Employed		
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	09/05/2023	\$200.00
Mailing Address 5601 N Lake Dr		
City, State, Zip Code Meridian, MS 39307-4140		
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 Elise Gomez-Sanchez	09/16/2023	\$1,000.00
Mailing Address 536 Countryside Pl		
City, State, Zip Code Madison, MS 39110-9301		
Name of Employer (Required) University of Mississippi Medical Center		
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	09/27/2023	\$25.00
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 Allen Salyer	08/07/2023	\$250.00
Mailing Address 1657 Welling Dr		
City, State, Zip Code Troy, MI 48085-5022		
Name of Employer (Required) HUF North America		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Staci Morgan	08/07/2023	\$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 Obie M. McNair Jr	08/17/2023	\$100.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	08/28/2023	\$500.00
Mailing Address 210 W 101st St		
City, State, Zip Code New York, NY 10025-5039		
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 Nathan Prescott	09/29/2023	\$100.00
Mailing Address 309 Live Oak Ave		
City, State, Zip Code Ocean Springs, MS 39564-3909		
Name of Employer (Required) Self Employed		
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 William Himel	09/29/2023	\$30.00
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 Frances M. Coleman	09/29/2023	\$25.00
Mailing Address 108 Royal Garden Ter		
City, State, Zip Code Madison, MS 39110-7637		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	08/09/2023	\$250.00
Mailing Address 24 Raven Dr		
City, State, Zip Code Morristown, NJ 07960-6412		
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 Marcy Petrini	08/30/2023	\$50.00
Mailing Address 950 Fairfax Cir		
City, State, Zip Code Jackson, MS 39211-4250		
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 Dot Courson	08/01/2023	\$250.00
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 Cynthia Yap	08/31/2023	\$10.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/31/2023	\$250.00
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 Elise Gomez-Sanchez	09/01/2023	\$500.00
Mailing Address 536 Countryside Pl		
City, State, Zip Code Madison, MS 39110-9301		
Name of Employer (Required) University of Mississippi Medical Center		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ian Gustafson	09/11/2023	\$100.00
Mailing Address 7520 Ruby Ct		
City, State, Zip Code Ocean Springs, MS 39564-1801		
Name of Employer (Required) MS Center for Justice		
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 James Evans	09/22/2023	\$500.00
Mailing Address PO Box 1167		
City, State, Zip Code Jackson, MS 39215-1167		
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 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	09/13/2023	\$25.00
Mailing Address 419 3rd St S		
City, State, Zip Code Columbus, MS 39701-5632		
Name of Employer (Required) Gastroenterology Associates of Columbus		
Occupation (Required) 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	09/24/2023	\$25.00
Mailing Address 3161 Wayne Dr		
City, State, Zip Code Diberville, MS 39540-8554		
Name of Employer (Required) Self Employed		
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	09/24/2023	\$25.00
Mailing Address PO Box 631145		
City, State, Zip Code Houston, TX 77263-1145		
Name of Employer (Required) Not Employed		
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	09/25/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jan Garrick Mailing Address 4217 Oakridge Dr City, State, Zip Code Jackson, MS 39216-3420 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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary J. Westerlund Mailing Address 1201 Cowden Dr City, State, Zip Code Amory, MS 38821-1306 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) _____	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	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	09/06/2023	\$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 Heather McTeer-Toney	09/06/2023	\$250.00
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	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 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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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 Dale	08/08/2023	\$100.00
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	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	08/28/2023	\$500.00
Mailing Address PO Box 1789		
City, State, Zip Code Jackson, MS 39215-1789		
Name of Employer (Required) Bradley Arant Boulton Cummings		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James P. Smith	09/29/2023	\$500.00
Mailing Address 14077 W Old River Trl		
City, State, Zip Code Gulfport, MS 39503-9057		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$1,600.00
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	08/29/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lillie Randolph	08/29/2023	\$10.00
Mailing Address 117 Harris St		
City, State, Zip Code Nettleton, MS 38858-5964		
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 Vicki Hartley	09/30/2023	\$250.00
Mailing Address 813 Harvard St		
City, State, Zip Code Cleveland, MS 38732-3629		
Name of Employer (Required) St. Joe Greenville		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Vi Risser	08/10/2023	\$250.00
Mailing Address 377 County Road 653B		
City, State, Zip Code Saltillo, MS 38866-5716		
Name of Employer (Required) Not Employed		
Occupation (Required) 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 Francisco J. Sierra	08/30/2023	\$25.00
Mailing Address 425 Locust Ln		
City, State, Zip Code Tupelo, MS 38801-9457		
Name of Employer (Required) Monroe Hospital		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Don Keim	07/31/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/11/2023	\$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 Michael Henderson	09/01/2023	\$250.00
Mailing Address 900 E Sherwood Rd		
City, State, Zip Code Williamston, MI 48895-9328		
Name of Employer (Required) Advanced Radiology		
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 Denise Pilgrim	09/22/2023	\$100.00
Mailing Address 108 Bellingham Dr		
City, State, Zip Code Madison, MS 39110-8524		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Miriam Harrington	08/02/2023	\$28.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	09/24/2023	\$50.00
Mailing Address 108 Coachmans Rd		
City, State, Zip Code Madison, MS 39110-9227		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tamara Brown	09/24/2023	\$1,000.00
Mailing Address PO Box 1808		
City, State, Zip Code New Milford, CT 06776-1808		
Name of Employer (Required) Linde		
Occupation (Required) 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 Fraser Hunter	08/04/2023	\$1,000.00
Mailing Address 645 W End Ave		
City, State, Zip Code New York, NY 10025-7322		
Name of Employer (Required) WilmerHale LLP		
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 James Raymond	08/26/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/07/2023	\$100.00
Mailing Address 2106 Harris Dr		
City, State, Zip Code Oxford, MS 38655-4223		
Name of Employer (Required) Not Employed		
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	09/07/2023	\$250.00
Mailing Address 316 Sonoma Cv		
City, State, Zip Code Madison, MS 39110-9549		
Name of Employer (Required) Not Employed		
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	09/18/2023	\$250.00
Mailing Address 6 Montgomery Ave		
City, State, Zip Code Takoma Park, MD 20912-4615		
Name of Employer (Required) Andalman & Flynn		
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	08/18/2023	\$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

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 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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	09/20/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/30/2023	\$100.00
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 James Feeley	08/30/2023	\$10.00
Mailing Address 7371 N Aberdeen Dr		
City, State, Zip Code Pass Christian, MS 39571-7012		
Name of Employer (Required) Self Employed		
Occupation (Required) 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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Edson Griswold	07/31/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/01/2023	\$50.00
Mailing Address 321 County Road 416		
City, State, Zip Code Vardaman, MS 38878-9708		
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 John C. Henegan	09/22/2023	\$1,000.00
Mailing Address 1921 E Bourne Pl		
City, State, Zip Code Jackson, MS 39211-6714		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tor Kwembe	08/12/2023	\$25.00
Mailing Address 4100 Poplar Ave		
City, State, Zip Code Richton Park, IL 60471-1236		
Name of Employer (Required) Jackson State University		
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 Barbara Rankin	09/12/2023	\$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

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

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

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 Clarissa A. Jordan	09/29/2023	\$100.00
Mailing Address 913 Sleepy Hollow Cv		
City, State, Zip Code Oxford, MS 38655-8494		
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 Jacqueline Amos	09/29/2023	\$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 Joe Love	08/09/2023	\$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 Sheila Newtown	08/29/2023	\$10.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/10/2023	\$100.00
Mailing Address 210 Meadowlane Dr		
City, State, Zip Code Madison, MS 39110-9611		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	08/20/2023	\$100.00
Mailing Address 6 Trotting Horse Dr		
City, State, Zip Code Lexington, MA 02421-6339		
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 Ginny Troutt	09/10/2023	\$100.00
Mailing Address 185 Oakley Rd		
City, State, Zip Code Senatobia, MS 38668-6481		
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 Will Manuel	08/21/2023	\$1,000.00
Mailing Address 827 Beaumont Dr		
City, State, Zip Code Madison, MS 39110-7494		
Name of Employer (Required) Bradley Arant		
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 Charles Buchanan	09/11/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/22/2023	\$100.00
Mailing Address 333 W 86th St		
City, State, Zip Code New York, NY 10024-3114		
Name of Employer (Required) Self Employed		
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 Joan Santa Cruz	09/22/2023	\$50.00
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 Alma Walls	08/12/2023	\$25.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/12/2023	\$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 Graham Slakie	09/12/2023	\$10.00
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 Mary Entrekin	08/13/2023	\$5.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/03/2023	\$500.00
Mailing Address 17 New Bethel Rd		
City, State, Zip Code Tylertown, MS 39667-6608		
Name of Employer (Required) Self Employed		
Occupation (Required) Farmer	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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	08/05/2023	\$100.00
Mailing Address 817 Chartres St		
City, State, Zip Code New Orleans, LA 70116-3206		
Name of Employer (Required) Not Employed		
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 Elizabeth Cagle	08/05/2023	\$25.00
Mailing Address 411 N Montgomery St		
City, State, Zip Code Starkville, MS 39759-2605		
Name of Employer (Required) MS State University		
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 Stephen Schear	08/05/2023	\$1,000.00
Mailing Address 805 Santa Ray Ave		
City, State, Zip Code Oakland, CA 94610-1738		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Theresa Guthrie	08/06/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/07/2023	\$25.00
Occupation (Required) Consultant	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	09/17/2023	\$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 Philip Kuhn Mailing Address PO Box 82 City, State, Zip Code Raymond, MS 39154-0082 Name of Employer (Required) Not Employed	08/18/2023	\$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) _____	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	09/08/2023	\$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 Susan Riddell	09/19/2023	\$2,000.00
Mailing Address 519 E Peace St		
City, State, Zip Code Canton, MS 39046-4712		
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 Steve Leeds	09/29/2023	\$500.00
Mailing Address 6410 Radiant Trce		
City, State, Zip Code Atlanta, GA 30328-2897		
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 Phillip Pinkston	08/29/2023	\$250.00
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	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	09/09/2023	\$250.00
Mailing Address 1829 Cedarbrook Cir		
City, State, Zip Code Belden, MS 38826-9528		
Name of Employer (Required) Tupelo Public School District		
Occupation (Required) Educator	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	07/30/2023	\$50.00
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 Robert Rubin	08/30/2023	\$5,000.00
Mailing Address 911 Park Ave		
City, State, Zip Code New York, NY 10075-0385		
Name of Employer (Required) Centerview Partners		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Miller	08/30/2023	\$25.00
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	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	09/10/2023	\$250.00
Mailing Address 377 County Road 653B		
City, State, Zip Code Saltillo, MS 38866-5716		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$2,400.00

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 Debra Warner Mailing Address 502 E Lakeshore Dr City, State, Zip Code Carriere, MS 39426-7905 Name of Employer (Required) Not Employed	07/31/2023	\$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 Raymond E. Mabus Jr Mailing Address 74 Woodcutters Ln City, State, Zip Code Harpers Ferry, WV 25425-7121 Name of Employer (Required) Self Employed	08/21/2023	\$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) _____	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	08/31/2023	\$10.00
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 Rheta Johnson Mailing Address 117 County Road 259 City, State, Zip Code Iuka, MS 38852-8542 Name of Employer (Required) Not Employed	09/22/2023	\$100.00
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	08/02/2023	\$25,000.00
Mailing Address 17 Winthrop St		
City, State, Zip Code West Newton, MA 02465-2308		
Name of Employer (Required) Anaylsis Group		
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 Susan Adams	08/12/2023	\$25.00
Mailing Address 3203 Melinda Ln		
City, State, Zip Code Corinth, MS 38834-2219		
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 Ron Coleman	09/12/2023	\$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 Nan Tarlton	09/13/2023	\$50.00
Mailing Address 210 Meadowlane Dr		
City, State, Zip Code Madison, MS 39110-9611		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	09/13/2023	\$2,500.00
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 Bradley D. Campbell	08/24/2023	\$100.00
Mailing Address 111 Lakeshore Dr		
City, State, Zip Code Brandon, MS 39047-6019		
Name of Employer (Required) Southern Resource Service Inc.		
Occupation (Required) President	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	09/04/2023	\$5,000.00
Mailing Address 41 Purdy Ave		
City, State, Zip Code Rye, NY 10580-7501		
Name of Employer (Required) Self Employed		
Occupation (Required) Investments	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	09/25/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/25/2023	\$1,000.00
Mailing Address 1739 Swann St NW		
City, State, Zip Code Washington, DC 20009-5536		
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 Susan Multer	08/05/2023	\$100.00
Mailing Address 15 Penny Ln		
City, State, Zip Code Ithaca, NY 14850-6267		
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 David Rozier	08/15/2023	\$250.00
Mailing Address 303 Woodland Hills Dr		
City, State, Zip Code Oxford, MS 38655-8429		
Name of Employer (Required) MGC Law		
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 Lloyd Gordon	09/05/2023	\$50.00
Mailing Address 105 Colony Crown		
City, State, Zip Code Brandon, MS 39047-8202		
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 Elizabeth Jenkins-Joffe	08/26/2023	\$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 Edson Griswold	09/06/2023	\$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 Richard Rhoden	08/07/2023	\$25.00
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 Ann T. Pincus	08/17/2023	\$250.00
Mailing Address 3202 Kingle Rd NW		
City, State, Zip Code Washington, DC 20008-3403		
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 James Raymond	08/28/2023	\$5.00
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 Abner C. Young	09/08/2023	\$200.00
Mailing Address PO Box 249		
City, State, Zip Code Como, MS 38619-0249		
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 Barney McCann	09/19/2023	\$25.00
Mailing Address 1081 Raymond Bolton Rd		
City, State, Zip Code Raymond, MS 39154-9394		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Lele W. Gillespie	09/19/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	08/30/2023	\$100.00
Mailing Address 13114 Romola Rd		
City, State, Zip Code Hermanville, MS 39086-9776		
Name of Employer (Required) Self Employed		
Occupation (Required) Cattle Rancher	Aggregate year-to-date	\$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	07/31/2023	\$50.00
Mailing Address 167 Court St		
City, State, Zip Code West Point, MS 39773-7990		
Name of Employer (Required) Johanna Rice, LLC		
Occupation (Required) Publisher	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	08/21/2023	\$250.00
Mailing Address 1935 E Bourne Pl		
City, State, Zip Code Jackson, MS 39211-6714		
Name of Employer (Required) Keifer's		
Occupation (Required) Manager	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	08/31/2023	\$200.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/31/2023	\$50.00
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 Donald W. Medley	08/22/2023	\$1,000.00
Mailing Address 902 W Pine St		
City, State, Zip Code Hattiesburg, MS 39401-4262		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	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	08/13/2023	\$100.00
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	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	08/24/2023	\$500.00
Mailing Address PO Box 621		
City, State, Zip Code Jackson, MS 39205-0621		
Name of Employer (Required) Not Employed		
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 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	09/06/2023	\$5.00
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 Tomie Green	09/16/2023	\$25.00
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 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	08/07/2023	\$1,000.00
Mailing Address PO Box 1500		
City, State, Zip Code West Point, MS 39773-1500		
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 Robert Alexander	08/17/2023	\$100.00
Mailing Address 18 Highland Meadows Dr		
City, State, Zip Code Jackson, MS 39211-5949		
Name of Employer (Required) Alexander CPA, LLC		
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 Graham Slakie <hr/> Mailing Address 4706 Buckingham Dr <hr/> City, State, Zip Code Chattanooga, TN 37421-1108 <hr/> Name of Employer (Required) Regal Cinemas	08/17/2023	\$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 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	08/27/2023	\$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) _____	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	09/28/2023	\$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 Charles R. Wilson <hr/> Mailing Address 114 Leighton Rd <hr/> City, State, Zip Code Oxford, MS 38655-2010 <hr/> Name of Employer (Required) Not Employed	08/18/2023	\$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 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	09/30/2023	\$50.00
Mailing Address 210 Meadowlane Dr		
City, State, Zip Code Madison, MS 39110-9611		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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 Robert Baler	09/30/2023	\$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 Martha Bergmark	09/30/2023	\$500.00
Mailing Address 6 Montgomery Ave		
City, State, Zip Code Takoma Park, MD 20912-4615		
Name of Employer (Required) Not Employed		
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 Glenda Burns	07/30/2023	\$25.00
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	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 Virden Jones	08/20/2023	\$500.00
Mailing Address 686 Hazelton Dr		
City, State, Zip Code Madison, MS 39110-7332		
Name of Employer (Required) Not Employed		
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 Kathy Griffith	08/30/2023	\$50.00
Mailing Address 162 Oxford Creek Dr		
City, State, Zip Code Oxford, MS 38655-2242		
Name of Employer (Required) Griffith Law Firm		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cedric Burnett	08/30/2023	\$500.00
Mailing Address PO Box 961		
City, State, Zip Code Tunica, MS 38676-0961		
Name of Employer (Required) Mississippi House of Representatives		
Occupation (Required) Member	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	08/31/2023	\$500.00
Mailing Address 115 Coals Hill Xing		
City, State, Zip Code Flora, MS 39071-5002		
Name of Employer (Required) Martin & Martin		
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 Paul Pavlov	09/11/2023	\$500.00
Mailing Address 3911 A Government St		
City, State, Zip Code Ocean Springs, MS 39564-7454		
Name of Employer (Required) Singing River Health System		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Don A. Zatroch	09/13/2023	\$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 Terry Mangialardi	08/14/2023	\$25.00
Mailing Address 1181 MCGOWAN DR		
City, State, Zip Code Southaven, MS 38671-8430		
Name of Employer (Required) Desoto County Schools		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Boyce Crowell	08/24/2023	\$5,000.00
Mailing Address 428 Highway 6 E		
City, State, Zip Code Batesville, MS 38606-3000		
Name of Employer (Required) Not Employed		
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	09/14/2023	\$1,000.00
Mailing Address 1155 23rd St NW		
City, State, Zip Code Washington, DC 20037-3301		
Name of Employer (Required) The Daschle Group		
Occupation (Required) 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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Diane Barrentine	08/25/2023	\$500.00
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	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	08/26/2023	\$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 Johnny Wray	09/27/2023	\$100.00
Mailing Address 731 Milam Rd		
City, State, Zip Code Cedarbluff, MS 39741-9021		
Name of Employer (Required) Self Employed		
Occupation (Required) Farm	Aggregate year-to-date	\$925.00

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 Lori Karny	08/27/2023	\$15.00
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 Keith Johnson	09/07/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/18/2023	\$100.00
Mailing Address 309 Live Oak Ave		
City, State, Zip Code Ocean Springs, MS 39564-3909		
Name of Employer (Required) Self Employed		
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 Warner McBride	09/18/2023	\$500.00
Mailing Address 7697 Eureka Rd		
City, State, Zip Code Courtland, MS 38620-9456		
Name of Employer (Required) Mississippi House of Representatives		
Occupation (Required) Representative	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	08/28/2023	\$50.00
Mailing Address 1435 Saint Ann St		
City, State, Zip Code Jackson, MS 39202-1847		
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 Jonathan Compretta	09/20/2023	\$1,000.00
Mailing Address 4254 Berlin Dr		
City, State, Zip Code Jackson, MS 39211-6017		
Name of Employer (Required) Bernstein Litowitz Berger & Grossmann LLP		
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	09/30/2023	\$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 Ron Coleman	09/21/2023	\$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

ITEMIZED RECEIPTS

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

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 John B. Clark	08/23/2023	\$200.00
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 Dana Gonzalez	09/14/2023	\$25.00
Mailing Address 3663 James Monroe Dr		
City, State, Zip Code Jackson, MS 39213-3020		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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 Denotee Martin	08/25/2023	\$7.50
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 Michael F. Smith	08/06/2023	\$10.00
Mailing Address 505 Dove Holw		
City, State, Zip Code Oxford, MS 38655-5178		
Name of Employer (Required) Self Employed		
Occupation (Required) Writer	Aggregate year-to-date	\$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	08/27/2023	\$500.00
Mailing Address 710 Long Meadow Dr		
City, State, Zip Code Oxford, MS 38655-9792		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Mcinnis	09/28/2023	\$1,000.00
Mailing Address 2509 Promenade Blvd		
City, State, Zip Code Ocean Springs, MS 39564-8720		
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 Cris Pickering	09/28/2023	\$100.00
Mailing Address 232 Calumet Dr		
City, State, Zip Code Madison, MS 39110-8685		
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 Lynn Dobbs	08/08/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/28/2023	\$1,000.00
Mailing Address 28 Waterford Pl		
City, State, Zip Code Jackson, MS 39211-2945		
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 Lori Karny	09/29/2023	\$16.00
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 Lisa Walker	08/29/2023	\$51.25
Mailing Address 1654 Stonehedge Dr		
City, State, Zip Code Southaven, MS 38671-8876		
Name of Employer (Required) Not Employed		
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	08/29/2023	\$15.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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 Jonathan Harris	07/30/2023	\$25.00
Mailing Address 9 Marie Ave		
City, State, Zip Code Cambridge, MA 02139-1002		
Name of Employer (Required) Tufts University		
Occupation (Required) Researcher	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	08/30/2023	\$300.00
Mailing Address 1305 Church Rd E		
City, State, Zip Code Southaven, MS 38671-9711		
Name of Employer (Required) _____		
Occupation (Required) _____	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	08/31/2023	\$100.00
Mailing Address PO Box 112		
City, State, Zip Code Magnolia, MS 39652-0112		
Name of Employer (Required) Not Employed		
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 Steven Smith Mailing Address 1439 Briarwood Dr City, State, Zip Code Marshfield, MO 65706-2407 Name of Employer (Required) Not Employed	09/22/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name William Harris Mailing Address 1010 Waltham St City, State, Zip Code Lexington, MA 02421-8061 Name of Employer (Required) Not Employed	08/23/2023	\$2,500.00
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 Mailing Address 116 Highland Meadow Rd City, State, Zip Code Flora, MS 39071-9553 Name of Employer (Required) AJA Management & Technical Services	08/23/2023	\$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 Joan Santa Cruz Mailing Address 5825 Cedar Rd City, State, Zip Code Ocean Springs, MS 39564-2250 Name of Employer (Required) Not Employed	08/23/2023	\$10.00
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	09/13/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/24/2023	\$250.00
Mailing Address 112 Westminster Dr		
City, State, Zip Code Oxford, MS 38655-6099		
Name of Employer (Required) Farese Farese & Farese PA		
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 Mahalia Jackson	08/04/2023	\$50.00
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	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	09/25/2023	\$5,000.00
Mailing Address 37 Lancaster St		
City, State, Zip Code Cambridge, MA 02140-2838		
Name of Employer (Required) Triumvirate Environmental, Inc.		
Occupation (Required) Executive	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	09/05/2023	\$1,000.00
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 Michael Andrew Rueff	09/06/2023	\$1,000.00
Mailing Address 4325 Dalrymple Ct		
City, State, Zip Code Jackson, MS 39211-6237		
Name of Employer (Required) Lunsford, Baskin & Priebe PLLC		
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 E. K. Pruitt	09/27/2023	\$30.00
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 Alma Walls	08/17/2023	\$50.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/27/2023	\$500.00
Mailing Address 3050 Avon Ln NW		
City, State, Zip Code Washington, DC 20007-2908		
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 Ronald Unz	09/07/2023	\$5.00
Mailing Address 2535 Wright Rd		
City, State, Zip Code Steens, MS 39766-9129		
Name of Employer (Required) Mississippi State University		
Occupation (Required) Scientist	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	09/28/2023	\$25.00
Mailing Address 206 Wood St		
City, State, Zip Code Water Valley, MS 38965-2603		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$1,425.00
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	08/08/2023	\$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 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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/10/2023	\$50.00
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 Mary Vi Risser	08/30/2023	\$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 Onile Sestokas	09/21/2023	\$250.00
Mailing Address 15 Christine Ln		
City, State, Zip Code Media, PA 19063-1519		
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 Edson Griswold	07/31/2023	\$15.00
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

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 Amanda Pannell	08/31/2023	\$500.00
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	\$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 Juanita Boutin	08/31/2023	\$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 Dan Webb	08/03/2023	\$500.00
Mailing Address PO Box 496		
City, State, Zip Code Tupelo, MS 38802-0496		
Name of Employer (Required) Webb Sanders Williams & Williams		
Occupation (Required) Attorney	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 James Sones	08/03/2023	\$500.00
Mailing Address 1225 3rd St		
City, State, Zip Code New Orleans, LA 70130-5741		
Name of Employer (Required) Tulane University		
Occupation (Required) Consultant	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	09/16/2023	\$300.00
Mailing Address 201 Hoffman Ln		
City, State, Zip Code Waveland, MS 39576-4312		
Name of Employer (Required) American Airlines		
Occupation (Required) Flight Attendant	Aggregate year-to-date	\$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	08/16/2023	\$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 Jay Murphy	08/07/2023	\$100.00
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 Richard Ballard	08/07/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/28/2023	\$500.00
Mailing Address 3335 Quesada St NW		
City, State, Zip Code Washington, DC 20015-1664		
Name of Employer (Required) Self Employed		
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	08/08/2023	\$250.00
Mailing Address 1191 County Road 506		
City, State, Zip Code Shannon, MS 38868-9734		
Name of Employer (Required) Cadence Bank		
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	08/28/2023	\$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 Patrick Benvenutti	09/29/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/30/2023	\$100.00
Mailing Address 3942 Oakridge Dr		
City, State, Zip Code Jackson, MS 39216-3411		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Linda Foshee	07/30/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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 Bedford	08/30/2023	\$500.00
Mailing Address 50 Sherwood Dr		
City, State, Zip Code Tuscaloosa, AL 35401-1170		
Name of Employer (Required) Self Employed		
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 Mack Lowery	08/11/2023	\$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 Glen W. Fortinberry	08/11/2023	\$1,000.00
Mailing Address 1900 Eastover Dr		
City, State, Zip Code Jackson, MS 39211-6434		
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 Talisca Tobias	08/31/2023	\$25.00
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	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	09/22/2023	\$250.00
Mailing Address 5102 Yuma Pl NW		
City, State, Zip Code Washington, DC 20016-4309		
Name of Employer (Required) Dylan Green		
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	09/12/2023	\$200.00
Mailing Address 1112 S 11th St		
City, State, Zip Code Oxford, MS 38655-4610		
Name of Employer (Required) Not Employed		
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	09/23/2023	\$25.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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 Benvenutti	08/03/2023	\$250.00
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	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 Ann Smith	09/13/2023	\$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 David Kaye	09/24/2023	\$50.00
Mailing Address 123 Nottingham Ter		
City, State, Zip Code Buffalo, NY 14216-3504		
Name of Employer (Required) University at Buffalo		
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	09/26/2023	\$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 Mahalia Jackson	08/06/2023	\$15.00
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	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	08/16/2023	\$5.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jamie W. Rebentisch	08/26/2023	\$25.00
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	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	09/06/2023	\$250.00
Mailing Address PO Box 2811		
City, State, Zip Code Columbus, MS 39704-2811		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ellen Lake	08/27/2023	\$100.00
Mailing Address 4230 Lakeshore Ave		
City, State, Zip Code Oakland, CA 94610-1136		
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 Leigh Soares	09/07/2023	\$75.00
Mailing Address 2605 Pin Oak Dr		
City, State, Zip Code Starkville, MS 39759-3514		
Name of Employer (Required) Mississippi State University		
Occupation (Required) Professor	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	09/18/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/08/2023	\$100.00
Mailing Address 60010 Indian Cv		
City, State, Zip Code Amory, MS 38821-6007		
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 Thomas V. Obrien	09/29/2023	\$100.00
Mailing Address 511 Dabbs St		
City, State, Zip Code Hattiesburg, MS 39401-3941		
Name of Employer (Required) University of Southern Mississippi		
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	09/30/2023	\$250.00
Mailing Address 2013 N Parc Cir		
City, State, Zip Code Tupelo, MS 38804-9723		
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 Richard Courtney	09/30/2023	\$100.00
Mailing Address PO Box 23126		
City, State, Zip Code Jackson, MS 39225-3126		
Name of Employer (Required) Courtney Elder Law		
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	08/20/2023	\$1,000.00
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	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 Bethany Theilman	07/31/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne Walsh	08/11/2023	\$25.00
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 Angelos Vamvakas	09/01/2023	\$100.00
Mailing Address 3161 Wayne Dr		
City, State, Zip Code Diberville, MS 39540-8554		
Name of Employer (Required) Self Employed		
Occupation (Required) Psychiatrist	Aggregate year-to-date	\$250.00

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 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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	08/04/2023	\$50.00
Mailing Address 1286 John Amacker Rd		
City, State, Zip Code Poplarville, MS 39470-6396		
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 Curtis Wilkie	08/15/2023	\$250.00
Mailing Address 4 Colebrook Rd		
City, State, Zip Code Little Compton, RI 02837-2042		
Name of Employer (Required) Akamai		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathryn Goff	08/16/2023	\$25.00
Mailing Address 108 Formosa Dr		
City, State, Zip Code Brandon, MS 39047-7911		
Name of Employer (Required) Carson Law Group		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Elizabeth Cagle	09/16/2023	\$25.00
Mailing Address 411 N Montgomery St		
City, State, Zip Code Starkville, MS 39759-2605		
Name of Employer (Required) MS State University		
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	08/07/2023	\$300.00
Mailing Address 9269 Highway 18		
City, State, Zip Code Raymond, MS 39154-8914		
Name of Employer (Required) Mardi Gras Motors		
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	09/07/2023	\$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 Susan S. Jones	09/07/2023	\$100.00
Mailing Address 204 Eastbrooke St		
City, State, Zip Code Jackson, MS 39216-4716		
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 Beth Stoor	09/18/2023	\$10.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/18/2023	\$33.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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 Dwyer	09/29/2023	\$50.00
Mailing Address 950 Fairfax Cir		
City, State, Zip Code Jackson, MS 39211-4250		
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 Raleigh Byars	09/29/2023	\$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 Peggy B. Peterson	09/29/2023	\$100.00
Mailing Address 604 Abbots Ln		
City, State, Zip Code Ridgeland, MS 39157-2852		
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 Ricky Johnston	08/09/2023	\$250.00
Mailing Address 419 3rd St S		
City, State, Zip Code Columbus, MS 39701-5632		
Name of Employer (Required) Gastroenterology Associates of Columbus		
Occupation (Required) Gastroenterologist	Aggregate year-to-date	\$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	08/29/2023	\$100.00
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 Maureen McKerns	08/29/2023	\$25.00
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 Daniel Pair	09/09/2023	\$25.00
Mailing Address 968 Road 261		
City, State, Zip Code Tupelo, MS 38801-7600		
Name of Employer (Required) Social Security Administration		
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	08/20/2023	\$50.00
Mailing Address 3644 Old Canton Rd		
City, State, Zip Code Jackson, MS 39216-3313		
Name of Employer (Required) Copeland Cook Taylor & Bush		
Occupation (Required) Attorney	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 Reilly Morse	08/30/2023	\$100.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/30/2023	\$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 Charles Barland	08/31/2023	\$100.00
Mailing Address 13114 Romola Rd		
City, State, Zip Code Hermanville, MS 39086-9776		
Name of Employer (Required) Self Employed		
Occupation (Required) Cattle Rancher	Aggregate year-to-date	\$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	08/12/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/12/2023	\$10,000.00
Mailing Address 108 Sumach St		
City, State, Zip Code Lookout Mountai, TN 37350-1132		
Name of Employer (Required) None		
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	08/03/2023	\$100.00
Mailing Address 9 Meaders Ln		
City, State, Zip Code Oxford, MS 38655-6074		
Name of Employer (Required) Self Employed		
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	08/23/2023	\$1,000.00
Mailing Address 2 Grove Park Pl		
City, State, Zip Code Jackson, MS 39216-3615		
Name of Employer (Required) Not Employed		
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	09/14/2023	\$100.00
Mailing Address 601 N Forest Dr		
City, State, Zip Code Gulfport, MS 39507-2031		
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 Kathy Griffith	08/04/2023	\$100.00
Mailing Address 162 Oxford Creek Dr		
City, State, Zip Code Oxford, MS 38655-2242		
Name of Employer (Required) Griffith Law Firm		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Billy Wilemon	09/25/2023	\$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 Linda Foshee	08/16/2023	\$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 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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	08/29/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/09/2023	\$100.00
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	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 Don A. Zatroch	09/20/2023	\$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 Marcy Petrini	09/30/2023	\$50.00
Mailing Address 950 Fairfax Cir		
City, State, Zip Code Jackson, MS 39211-4250		
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 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	09/04/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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 Blandford	09/25/2023	\$1,000.00
Mailing Address 46 Mayfair Dr		
City, State, Zip Code Rancho Mirage, CA 92270-2562		
Name of Employer (Required) Blandford Group		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Jo Durst	08/05/2023	\$100.00
Mailing Address 799 Pine Cir		
City, State, Zip Code Starkville, MS 39759-3729		
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 Robert Baler	08/05/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/05/2023	\$100.00
Mailing Address 1329 Willis Rd		
City, State, Zip Code Carthage, MS 39051-9126		
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 Graham Slakie	08/25/2023	\$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 Andrew Jenkins	08/25/2023	\$50.00
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 Rath Iyer	09/16/2023	\$25.00
Mailing Address 130 Whippoorwill Rd		
City, State, Zip Code Brandon, MS 39047-6429		
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 Jolee Hussey	08/17/2023	\$100.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/27/2023	\$25.00
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 A. K. McCarthy	08/18/2023	\$200.00
Mailing Address 22332 Freddie Frank Rd		
City, State, Zip Code Long Beach, MS 39560-9728		
Name of Employer (Required) US Dept of Housing and Urban Development		
Occupation (Required) Investigator	Aggregate year-to-date	\$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	09/19/2023	\$1,000.00
Mailing Address 411 Hawthorne Rd		
City, State, Zip Code Baltimore, MD 21210-2304		
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 Joseph P. Hudson	09/29/2023	\$250.00
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	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	09/29/2023	\$250.00
Mailing Address 224 Cedarhurst Dr		
City, State, Zip Code Jackson, MS 39206-4005		
Name of Employer (Required) Hope Enterprise Corporation		
Occupation (Required) Banking	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	08/29/2023	\$25.00
Mailing Address 110 Philip Rd		
City, State, Zip Code Oxford, MS 38655-2014		
Name of Employer (Required) Nativity Episcopal Church		
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 Johnny R. Green	09/30/2023	\$200.00
Mailing Address 973 Dixie Creek Rd		
City, State, Zip Code Saltillo, MS 38866-9061		
Name of Employer (Required) Not Employed		
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 Anthony Baggett	07/30/2023	\$50.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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 Haimsohn	08/30/2023	\$25.00
Mailing Address 4700 Treadway Rd		
City, State, Zip Code Hernando, MS 38632-9149		
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 Charlie Kireker	08/30/2023	\$250.00
Mailing Address 303 Cow Hill Rd		
City, State, Zip Code Weybridge, VT 05753-9541		
Name of Employer (Required) Twin Birches Ltd.		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Anonymous Anonymous	08/30/2023	\$200.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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	09/15/2023	\$500.00
Mailing Address 1675 Lakeland Dr		
City, State, Zip Code Jackson, MS 39216-4843		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Curtis C. Wilkie	09/25/2023	\$500.00
Mailing Address 1016 S 11th St		
City, State, Zip Code Oxford, MS 38655-4608		
Name of Employer (Required) Not Employed		
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 Elise Gillespie	08/05/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/05/2023	\$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

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 Roger Klingler	08/15/2023	\$25.00
Mailing Address 7844 E Sandalwood Dr		
City, State, Zip Code Scottsdale, AZ 85250-7269		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Suzanne H. Robinson	09/05/2023	\$50.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/15/2023	\$10.00
Mailing Address 7844 E Sandalwood Dr		
City, State, Zip Code Scottsdale, AZ 85250-7269		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Lindsay	09/26/2023	\$50.00
Mailing Address 1256 Belvoir Pl		
City, State, Zip Code Jackson, MS 39202-1205		
Name of Employer (Required) City of Jackson		
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	08/26/2023	\$50.00
Mailing Address 513 Roses Bluff Dr		
City, State, Zip Code Madison, MS 39110-7545		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marian Kurz	09/16/2023	\$10.00
Mailing Address 1300 Central St		
City, State, Zip Code Evanston, IL 60201-1676		
Name of Employer (Required) Self Employed		
Occupation (Required) Public Relations	Aggregate year-to-date	\$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 Gloria Williamson	08/17/2023	\$500.00
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 Ronald Janis	08/17/2023	\$1,000.00
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 Richard Ballard	09/07/2023	\$10.00
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 Kathaleen Miller	09/17/2023	\$10.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/28/2023	\$25.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/19/2023	\$5.00
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 Barney Frank	09/29/2023	\$500.00
Mailing Address PO Box 1555		
City, State, Zip Code Ogunquit, ME 03907-1555		
Name of Employer (Required) Signature Bank NY		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mike Boyd	08/29/2023	\$50.00
Mailing Address 1139 W Gamwyn Park Dr		
City, State, Zip Code Greenville, MS 38701-6392		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	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	09/20/2023	\$100.00
Mailing Address 1704 Poplar Blvd		
City, State, Zip Code Jackson, MS 39202-2119		
Name of Employer (Required) Not Employed		
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 Leigh A. Miller	09/30/2023	\$100.00
Mailing Address 107 Robinhood Rd		
City, State, Zip Code Vicksburg, MS 39180-8935		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$250.00

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 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	08/21/2023	\$900.00
Mailing Address 12 Oakleigh Pl		
City, State, Zip Code Jackson, MS 39211-2204		
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 Kristin Hull	08/22/2023	\$1,000.00
Mailing Address 2666 Shasta Rd		
City, State, Zip Code Berkeley, CA 94708-1922		
Name of Employer (Required) MatCap		
Occupation (Required) Foundation Officer	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	09/23/2023	\$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 Cynthia Yap	08/13/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/04/2023	\$500.00
Mailing Address 188 Reunion Blvd		
City, State, Zip Code Madison, MS 39110-8096		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Jackson	09/14/2023	\$100.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$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	09/15/2023	\$2,000.00
Mailing Address 313 Colony Ridge Ct		
City, State, Zip Code Ridgeland, MS 39157-2032		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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 Rath Iyer	08/05/2023	\$25.00
Mailing Address 130 Whippoorwill Rd		
City, State, Zip Code Brandon, MS 39047-6429		
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 Lisa McCollom	08/25/2023	\$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 Joel Brunt	09/26/2023	\$5,000.00
Mailing Address 5130 Arthur St		
City, State, Zip Code Moss Point, MS 39563-2706		
Name of Employer (Required) Ochsner		
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	08/07/2023	\$25.00
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 Cynthia Yap	08/07/2023	\$3.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/27/2023	\$10.00
Mailing Address 1185 W Topisaw N		
City, State, Zip Code Ruth, MS 39662-9511		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Richard C. Howorth	08/18/2023	\$250.00
Mailing Address 310 N 16th St		
City, State, Zip Code Oxford, MS 38655-3712		
Name of Employer (Required) Square Books		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Louis Rowles	09/08/2023	\$300.00
Mailing Address 145 A Road 1010		
City, State, Zip Code Tupelo, MS 38804-9675		
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 Marjorie Cervantes	08/29/2023	\$25.00
Mailing Address 2109 Sunset Dr		
City, State, Zip Code Hattiesburg, MS 39402-2843		
Name of Employer (Required) Not Employed		
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	09/30/2023	\$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 Eugene Perrier	09/30/2023	\$25.00
Mailing Address 5540 Gibson Rd		
City, State, Zip Code Vicksburg, MS 39180-6318		
Name of Employer (Required) Self Employed		
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 Elvin Sunds	07/30/2023	\$25.00
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	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 Jonathan Harris	08/30/2023	\$25.00
Mailing Address 9 Marie Ave		
City, State, Zip Code Cambridge, MA 02139-1002		
Name of Employer (Required) Tufts University		
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	08/21/2023	\$250.00
Mailing Address 2240 Mandeville Canyon Rd		
City, State, Zip Code Los Angeles, CA 90049-1827		
Name of Employer (Required) University of Southern California		
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 Barney McCann	08/21/2023	\$33.00
Mailing Address 1081 Raymond Bolton Rd		
City, State, Zip Code Raymond, MS 39154-9394		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cliff Heaton	08/31/2023	\$2,000.00
Mailing Address PO Box 158		
City, State, Zip Code Lyon, MS 38645-0158		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Glen Davidson Jr	08/31/2023	\$50.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/11/2023	\$1,200.00
Mailing Address 301 Cherokee Dr		
City, State, Zip Code Mccomb, MS 39648-6013		
Name of Employer (Required) Southwest Broadcast		
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	08/22/2023	\$500.00
Mailing Address 423 Turnberry Ct		
City, State, Zip Code Oxford, MS 38655-2578		
Name of Employer (Required) Triplette Advisors LLC		
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	09/23/2023	\$25.00
Mailing Address 317 Autumn Crest Dr		
City, State, Zip Code Ridgeland, MS 39157-2604		
Name of Employer (Required) Self Employed		
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	09/03/2023	\$25.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/24/2023	\$25.00
Mailing Address 15055 Swan Lake Blvd		
City, State, Zip Code Gulfport, MS 39503-8613		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Janice Jackson	08/14/2023	\$100.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$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	08/24/2023	\$100.00
Mailing Address 730 Forest Park Cir		
City, State, Zip Code Philadelphia, MS 39350-3314		
Name of Employer (Required) Self Employed		
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 Benjamin Griffith	09/14/2023	\$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 Rebecca Long	08/05/2023	\$10.00
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 Glen Davidson Jr	09/26/2023	\$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 Jim Rasberry	09/27/2023	\$250.00
Mailing Address 401 Central Ave		
City, State, Zip Code Laurel, MS 39440-3983		
Name of Employer (Required) Rasberry Financial		
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	09/27/2023	\$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 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	08/18/2023	\$50.00
Mailing Address 411 N Montgomery St		
City, State, Zip Code Starkville, MS 39759-2605		
Name of Employer (Required) MS State University		
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	08/28/2023	\$3,300.00
Mailing Address 6621 Sugarcane Cir		
City, State, Zip Code Ocean Springs, MS 39564-8955		
Name of Employer (Required) US Air Force		
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 Virden Jones	09/20/2023	\$500.00
Mailing Address 686 Hazelton Dr		
City, State, Zip Code Madison, MS 39110-7332		
Name of Employer (Required) Not Employed		
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	09/30/2023	\$16.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/30/2023	\$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 Gloria Butler Thomas	09/30/2023	\$250.00
Mailing Address 504 Fairways Dr		
City, State, Zip Code Vicksburg, MS 39183-8375		
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 Buford Anderson	07/31/2023	\$250.00
Mailing Address 494 Cassidy St		
City, State, Zip Code Sumner, MS 38957-9703		
Name of Employer (Required) Self Employed		
Occupation (Required) Farmer	Aggregate year-to-date	\$250.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Peter Buttross Jr	08/31/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/01/2023	\$100.00
Mailing Address 2800 W Main St		
City, State, Zip Code Tupelo, MS 38801-3027		
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 Kathy Olsen	08/22/2023	\$5,000.00
Mailing Address 4416 Sunnybrook Dr		
City, State, Zip Code Nashville, TN 37205-3860		
Name of Employer (Required) Not Employed		
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	09/02/2023	\$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 John Foy	09/23/2023	\$25.00
Mailing Address 1881 N Parc Cir		
City, State, Zip Code Tupelo, MS 38804-9774		
Name of Employer (Required) Not Employed		
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	08/23/2023	\$2,500.00
Mailing Address 1515 N State St		
City, State, Zip Code Jackson, MS 39202-1646		
Name of Employer (Required) NSS Partnership		
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 Johnny D. Jones	08/24/2023	\$133.00
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	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	08/24/2023	\$33.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/15/2023	\$5,000.00
Mailing Address 800 College Hill Rd		
City, State, Zip Code Oxford, MS 38655-2767		
Name of Employer (Required) Self Employed		
Occupation (Required) Marketing	Aggregate year-to-date	\$58,500.00

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 Susan Zachos	08/27/2023	\$250.00
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	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	09/18/2023	\$200.00
Mailing Address 408 Melissa Dr		
City, State, Zip Code Biloxi, MS 39531-2308		
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 David Clark	09/28/2023	\$2,000.00
Mailing Address 110 Olympia Flds		
City, State, Zip Code Jackson, MS 39211-2509		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	Aggregate year-to-date	\$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	09/28/2023	\$25.00
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 Karen K. Sawyer	08/18/2023	\$1,000.00
Mailing Address 150 Spence Dr		
City, State, Zip Code Pass Christian, MS 39571-4839		
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 Lise Pearlman	08/09/2023	\$50.00
Mailing Address 1147 Clarendon Cres		
City, State, Zip Code Oakland, CA 94610-1807		
Name of Employer (Required) Self Employed		
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	09/09/2023	\$50.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/30/2023	\$25.00
Mailing Address 5510 Wisconsin Ave		
City, State, Zip Code Chevy Chase, MD 20815-4403		
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 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	09/24/2023	\$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 Keith Johnson	08/04/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/14/2023	\$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 Vangela Wade	09/16/2023	\$500.00
Mailing Address 401 Pembroke Dr		
City, State, Zip Code Madison, MS 39110-8638		
Name of Employer (Required) Mississippi Center for Justice		
Occupation (Required) Attorney	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 Eggerman	09/26/2023	\$5,000.00
Mailing Address 77 Westcliff Rd		
City, State, Zip Code Weston, MA 02493-1409		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	09/06/2023	\$1,000.00
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 Lloyd Gordon	09/27/2023	\$50.00
Mailing Address 105 Colony Crown		
City, State, Zip Code Brandon, MS 39047-8202		
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 Mary Entrekin	09/27/2023	\$5.00
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 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 Mailing Address PO Box 688 City, State, Zip Code New Albany, MS 38652-0688 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) _____	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	08/09/2023	\$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) _____	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	09/30/2023	\$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) _____	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	08/10/2023	\$25.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$255.00

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 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	09/02/2023	\$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 Clarence E. Smith	09/23/2023	\$10.00
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 Janet Scott	08/03/2023	\$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 David Butts	08/03/2023	\$250.00
Mailing Address 1914 Patton Ln		
City, State, Zip Code Austin, TX 78723-1236		
Name of Employer (Required) Self Employed		
Occupation (Required) Political 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 Barry J. Walker	08/23/2023	\$100.00
Mailing Address PO Box 1023		
City, State, Zip Code Tupelo, MS 38802-1023		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Ron Coleman	09/14/2023	\$50.00
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 Rheta Johnson	09/25/2023	\$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 Anne Hill	08/25/2023	\$100.00
Mailing Address 200 Craft St		
City, State, Zip Code Holly Springs, MS 38635-2912		
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 Charles Buchanan	08/25/2023	\$30.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/25/2023	\$25.00
Mailing Address 404 Huntington Dr		
City, State, Zip Code Jackson, MS 39272-4486		
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 Graham Slakie	09/16/2023	\$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 David R. Mann	08/07/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/28/2023	\$50.00
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 Lena Grillo	08/18/2023	\$60.00
Mailing Address 5711 Clubview Dr		
City, State, Zip Code Jackson, MS 39211-4202		
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 Carol Puckett Palmer	08/08/2023	\$500.00
Mailing Address 3 Cypress Ln		
City, State, Zip Code Jackson, MS 39211-5935		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrea Hatfield	09/29/2023	\$500.00
Mailing Address 3509 34th St NW		
City, State, Zip Code Washington, DC 20008-3204		
Name of Employer (Required) Self Employed		
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	09/29/2023	\$100.00
Mailing Address 1941 E Bourne Pl		
City, State, Zip Code Jackson, MS 39211-6714		
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 Thomas Adams	08/29/2023	\$10.00
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 Joshua Phillips	09/30/2023	\$100.00
Mailing Address 184 Sundown Cv		
City, State, Zip Code Madison, MS 39110-8168		
Name of Employer (Required) Mississippi Asthma and Allergy		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert Alexander	08/30/2023	\$100.00
Mailing Address 18 Highland Meadows Dr		
City, State, Zip Code Jackson, MS 39211-5949		
Name of Employer (Required) Alexander CPA, LLC		
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	08/01/2023	\$5.00
Mailing Address PO Box 7189		
City, State, Zip Code Missoula, MT 59807-7189		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Leslie-Burl McLemore	08/11/2023	\$100.00
Mailing Address 7900 Michael Dr		
City, State, Zip Code Lake Cormorant, MS 38641-8211		
Name of Employer (Required) Not Employed		
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 James Hutto	08/31/2023	\$10.00
Mailing Address 62 Redfern Trl		
City, State, Zip Code Petal, MS 39465-9415		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John D. Giddens	09/01/2023	\$1,000.00
Mailing Address 226 N President St		
City, State, Zip Code Jackson, MS 39201-1903		
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 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	08/13/2023	\$5,000.00
Mailing Address 2210 Talbert Dr		
City, State, Zip Code Yazoo City, MS 39194-2545		
Name of Employer (Required) Self Employed		
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	09/24/2023	\$50.00
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 Douglas Masterson	09/05/2023	\$10.00
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	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	08/06/2023	\$50.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/06/2023	\$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 Louise Cole	09/06/2023	\$100.00
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	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	09/06/2023	\$100.00
Mailing Address 3336 Whippoorwill Ln		
City, State, Zip Code Oxford, MS 38655-5311		
Name of Employer (Required) City of Oxford		
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 Constance Murray	09/27/2023	\$250.00
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

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 Vivian Neill	09/07/2023	\$250.00
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	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	08/18/2023	\$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 Joe Davis	09/19/2023	\$500.00
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	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	09/29/2023	\$30,000.00
Mailing Address 1125 17th St NW		
City, State, Zip Code Washington, DC 20036-4709		
Name of Employer (Required)		
Occupation (Required)	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	08/09/2023	\$50.00
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 James Craig	09/09/2023	\$25.00
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	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	09/30/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/30/2023	\$100.00
Mailing Address 2905 Pinecrest Cir		
City, State, Zip Code Corinth, MS 38834-3864		
Name of Employer (Required) City Of Corinth		
Occupation (Required) Alderman	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	09/30/2023	\$25.00
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 William Himel	09/30/2023	\$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 Matthew Bernstein	07/30/2023	\$5,000.00
Mailing Address 2130 E Lake Rd NE		
City, State, Zip Code Atlanta, GA 30307-1836		
Name of Employer (Required) Emory University		
Occupation (Required) Professor	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	08/10/2023	\$1,000.00
Mailing Address 212 Greenbriar Loop		
City, State, Zip Code Oxford, MS 38655-2760		
Name of Employer (Required) Mayo Mallette		
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 Amanda Pannell	08/30/2023	\$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 Dennis Truax	08/30/2023	\$50.00
Mailing Address 913 Southgate Dr		
City, State, Zip Code Starkville, MS 39759-9434		
Name of Employer (Required) Self Employed		
Occupation (Required) Engineer	Aggregate year-to-date	\$1,671.00
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	09/22/2023	\$500.00
Mailing Address 1336 Saint Mary St		
City, State, Zip Code Jackson, MS 39202-1848		
Name of Employer (Required) Watkins & Eager PLLC		
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 Sheila Hailey	08/02/2023	\$100.00
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	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	09/02/2023	\$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 Thorne Butler	08/23/2023	\$100.00
Mailing Address 3942 Oakridge Dr		
City, State, Zip Code Jackson, MS 39216-3411		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Laura Hamilton	09/13/2023	\$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 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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/14/2023	\$100.00
Mailing Address 1201 Mission Park Dr		
City, State, Zip Code Vicksburg, MS 39180-3747		
Name of Employer (Required) Nash Family Dentistry		
Occupation (Required) Dentist	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	08/25/2023	\$10.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Drake	08/16/2023	\$100.00
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 Joanna Shows	09/07/2023	\$100.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/18/2023	\$100.00
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 Alan Saleski	08/18/2023	\$25.00
Mailing Address 2116 Harrison St		
City, State, Zip Code Evanston, IL 60201-2223		
Name of Employer (Required) Loyola University Chicago		
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 Joyce Leech	08/28/2023	\$25.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/09/2023	\$250.00
Mailing Address 2025 E Bourne Pl		
City, State, Zip Code Jackson, MS 39211-6716		
Name of Employer (Required) Insurance Company		
Occupation (Required) Physician	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	08/29/2023	\$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 Mack Lowery Mailing Address 5055 Myers Rd City, State, Zip Code Terry, MS 39170-9429 Name of Employer (Required) Aamco Transmission	08/29/2023	\$50.00
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 Cynthia Yap Mailing Address 1955 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed	09/30/2023	\$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) _____	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	07/30/2023	\$100.00
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 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	09/23/2023	\$250.00
Mailing Address 377 County Road 653B		
City, State, Zip Code Saltillo, MS 38866-5716		
Name of Employer (Required) Not Employed		
Occupation (Required) 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 Inez Kelleher	09/14/2023	\$500.00
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	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	08/04/2023	\$200.00
Mailing Address 1112 S 11th St		
City, State, Zip Code Oxford, MS 38655-4610		
Name of Employer (Required) Not Employed		
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 David Kaye	08/24/2023	\$50.00
Mailing Address 123 Nottingham Ter		
City, State, Zip Code Buffalo, NY 14216-3504		
Name of Employer (Required) University at Buffalo		
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 Cynthia Yap	09/14/2023	\$50.00
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 Kathryn York	09/25/2023	\$250.00
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	\$1,600.00
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	09/25/2023	\$100.00
Mailing Address 1016 Louisville St		
City, State, Zip Code Starkville, MS 39759-3953		
Name of Employer (Required) Mazingo 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 Rath Iyer	08/16/2023	\$25.00
Mailing Address 130 Whippoorwill Rd		
City, State, Zip Code Brandon, MS 39047-6429		
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 Margaret Thomas	08/07/2023	\$10.00
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 Janice Antonow	08/27/2023	\$25.00
Mailing Address 3336 Whippoorwill Ln		
City, State, Zip Code Oxford, MS 38655-5311		
Name of Employer (Required) City of Oxford		
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	09/07/2023	\$250.00
Mailing Address 128 Vivian St		
City, State, Zip Code Oxford, MS 38655-2718		
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 Alexe Van Beuren	09/18/2023	\$250.00
Mailing Address 509 Wagner St		
City, State, Zip Code Water Valley, MS 38965-2301		
Name of Employer (Required) BTC 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 Linda Brewer	08/18/2023	\$250.00
Mailing Address 154 Axley Dr		
City, State, Zip Code Brandon, MS 39042-7817		
Name of Employer (Required) Self Employed		
Occupation (Required) Nurse Practitioner	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	09/29/2023	\$50.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/29/2023	\$10.00
Mailing Address 15055 Swan Lake Blvd		
City, State, Zip Code Gulfport, MS 39503-8613		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Sumati Thomas	09/29/2023	\$25.00
Mailing Address 4146 Crestview Pl		
City, State, Zip Code Jackson, MS 39211-6404		
Name of Employer (Required) Change Research		
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 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) _____	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	09/20/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
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) _____	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	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	08/31/2023	\$50.00
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 James Warlick	09/12/2023	\$500.00
Mailing Address 100 Princess St		
City, State, Zip Code Alexandria, VA 22314-2325		
Name of Employer (Required) White House Gift Center		
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	09/23/2023	\$25.00
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 Roger Byrd	09/13/2023	\$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 William Denman	09/24/2023	\$240.00
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 Leigh A. Miller	08/24/2023	\$100.00
Mailing Address 107 Robinhood Rd		
City, State, Zip Code Vicksburg, MS 39180-8935		
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 Ron Coleman	09/25/2023	\$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 Walter Taylor	09/25/2023	\$100.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/25/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Will Baetz	08/05/2023	\$100.00
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 Margaret Thomas	08/15/2023	\$10.00
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 John C. Maxwell	08/25/2023	\$50.00
Mailing Address 1710 Linden Pl		
City, State, Zip Code Jackson, MS 39202-1217		
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 Joanne P. Morris	09/27/2023	\$25.00
Mailing Address 801 Arlington St		
City, State, Zip Code Jackson, MS 39202-1655		
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 Benjamin Bailey	08/17/2023	\$100.00
Mailing Address 1300 E Lafayette St		
City, State, Zip Code Detroit, MI 48207-2921		
Name of Employer (Required) Doner Detroit		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Johnny Wray	08/17/2023	\$100.00
Mailing Address 731 Milam Rd		
City, State, Zip Code Cedarbluff, MS 39741-9021		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Roger Byrd	08/27/2023	\$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 Laura McKerns	08/18/2023	\$100.00
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	\$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 Lisa Stevens	09/19/2023	\$25.00
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	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 Graham Slakie	09/29/2023	\$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 Elise Gillespie	08/29/2023	\$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

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 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	08/30/2023	\$100.00
Mailing Address 837 Joliet Ct		
City, State, Zip Code Biloxi, MS 39532-7023		
Name of Employer (Required) Not Employed		
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 Graham Slakie	09/10/2023	\$35.00
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 Nan Tarlton	09/21/2023	\$25.00
Mailing Address 210 Meadowlane Dr		
City, State, Zip Code Madison, MS 39110-9611		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	08/21/2023	\$250.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/21/2023	\$1,000.00
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	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	09/01/2023	\$25.00
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 Frances M. Coleman	09/22/2023	\$25.00
Mailing Address 108 Royal Garden Ter		
City, State, Zip Code Madison, MS 39110-7637		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	08/13/2023	\$25.00
Mailing Address 419 3rd St S		
City, State, Zip Code Columbus, MS 39701-5632		
Name of Employer (Required) Gastroenterology Associates of Columbus		
Occupation (Required) Gastroenterologist	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	09/13/2023	\$100.00
Mailing Address 811 Kell Ave		
City, State, Zip Code Pascagoula, MS 39567-2152		
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 Amanda Alexander	09/13/2023	\$250.00
Mailing Address 208 Charlestowne Dr		
City, State, Zip Code Madison, MS 39110-6920		
Name of Employer (Required) Alexander Law PA		
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 Gayle Massey	09/24/2023	\$25.00
Mailing Address 186 Parke Dr		
City, State, Zip Code Ridgeland, MS 39157-9402		
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 Scurlock	09/25/2023	\$250.00
Mailing Address 1009 Whispering Valley Cv		
City, State, Zip Code Oxford, MS 38655-7701		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Dean	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	09/17/2023	\$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 George White	08/18/2023	\$33.00
Mailing Address 5361 Wayneland Dr		
City, State, Zip Code Jackson, MS 39211-4042		
Name of Employer (Required) Not Employed		
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	08/28/2023	\$50.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/19/2023	\$100.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/30/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/30/2023	\$25.00
Mailing Address 425 Locust Ln		
City, State, Zip Code Tupelo, MS 38801-9457		
Name of Employer (Required) Monroe Hospital		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Marquis Sledge	09/30/2023	\$400.00
Mailing Address 322 Murray St		
City, State, Zip Code Oxford, MS 38655-2912		
Name of Employer (Required) Merchants and Farmers Bank		
Occupation (Required) Banker	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	07/30/2023	\$25.00
Mailing Address 425 Locust Ln		
City, State, Zip Code Tupelo, MS 38801-9457		
Name of Employer (Required) Monroe Hospital		
Occupation (Required) Physician	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	09/22/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/22/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/12/2023	\$25.00
Mailing Address 317 Autumn Crest Dr		
City, State, Zip Code Ridgeland, MS 39157-2604		
Name of Employer (Required) Self Employed		
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 Garry Breland	08/03/2023	\$25.00
Mailing Address 138 Jervis Mims Rd		
City, State, Zip Code Hattiesburg, MS 39401-8854		
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 Andrew Cunningham	08/13/2023	\$100.00
Mailing Address 13462 MS Highway 388		
City, State, Zip Code Brooksville, MS 39739-9167		
Name of Employer (Required) Valley Farm		
Occupation (Required) Farm Worker	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	08/23/2023	\$15.00
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 Cherri Musser	09/13/2023	\$100.00
Mailing Address 105 Piute Cir		
City, State, Zip Code Loudon, TN 37774-2138		
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 Elvin Sunds	09/14/2023	\$50.00
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	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	09/15/2023	\$1,000.00
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	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 Marie McKellar	08/25/2023	\$1,000.00
Mailing Address 425 Davis St		
City, State, Zip Code Evanston, IL 60201-4830		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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 Deborah Gochfeld	09/05/2023	\$250.00
Mailing Address 429 Cherokee Dr		
City, State, Zip Code Oxford, MS 38655-2701		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Research 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 Kelly O'Neal	09/26/2023	\$100.00
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	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	09/26/2023	\$1,000.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Debra Warner	08/06/2023	\$25.00
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 Debra Wray	08/07/2023	\$1,000.00
Mailing Address 731 Milam Rd		
City, State, Zip Code Cedarbluff, MS 39741-9021		
Name of Employer (Required) High Hope Farm		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Donna Carpenter	08/07/2023	\$2,500.00
Mailing Address 51 W Shaw Hill Rd		
City, State, Zip Code Stowe, VT 05672-4613		
Name of Employer (Required) Burton		
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	08/27/2023	\$50.00
Mailing Address 130 Lake Holleman Pl		
City, State, Zip Code Ridgeland, MS 39157-5089		
Name of Employer (Required) Environmental Management Plus		
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	08/27/2023	\$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 Mary Entrekin	08/27/2023	\$5.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/18/2023	\$25.00
Mailing Address 119 Belle Pointe		
City, State, Zip Code Madison, MS 39110-8287		
Name of Employer (Required) Not Employed		
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	08/18/2023	\$250.00
Mailing Address 526 N 11th St		
City, State, Zip Code Oxford, MS 38655-3108		
Name of Employer (Required) Not Employed		
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 William T. Buchanan	08/28/2023	\$25.00
Mailing Address 119 Belle Pointe		
City, State, Zip Code Madison, MS 39110-8287		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Cathleen Stone	09/20/2023	\$1,000.00
Mailing Address 12 Lime St		
City, State, Zip Code Boston, MA 02108-1103		
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 Joanne Edgar	09/30/2023	\$50.00
Mailing Address 333 W 86th St		
City, State, Zip Code New York, NY 10024-3114		
Name of Employer (Required) Self Employed		
Occupation (Required) Writer	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	07/30/2023	\$25.00
Mailing Address 513 Roses Bluff Dr		
City, State, Zip Code Madison, MS 39110-7545		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joshua Phillips	08/30/2023	\$100.00
Mailing Address 184 Sundown Cv		
City, State, Zip Code Madison, MS 39110-8168		
Name of Employer (Required) Mississippi Asthma and Allergy		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Susan M. Glisson	09/10/2023	\$180.75
Mailing Address 9 Meaders Ln		
City, State, Zip Code Oxford, MS 38655-6074		
Name of Employer (Required) Self Employed		
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 Michael Collins	08/31/2023	\$100.00
Mailing Address 1826 Ray St		
City, State, Zip Code Ocean Springs, MS 39564-2930		
Name of Employer (Required) Not Employed		
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	08/12/2023	\$200.00
Mailing Address 335 Hotophia Hill Dr		
City, State, Zip Code Batesville, MS 38606-5724		
Name of Employer (Required) Delta Gastroenterology		
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	08/22/2023	\$250.00
Mailing Address 207 Hathorn Rd		
City, State, Zip Code Oxford, MS 38655-4474		
Name of Employer (Required) Self Employed		
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	08/22/2023	\$250.00
Mailing Address 122 Appaloosa Trl		
City, State, Zip Code Apex, NC 27523-6094		
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 Barbara Austin	08/03/2023	\$25.00
Mailing Address 1435 Saint Ann St		
City, State, Zip Code Jackson, MS 39202-1847		
Name of Employer (Required) Not Employed		
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	09/13/2023	\$5.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/24/2023	\$100.00
Mailing Address 17 Baytowne Row		
City, State, Zip Code Madison, MS 39110-9179		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	08/14/2023	\$15.00
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	09/14/2023	\$500.00
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 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	09/18/2023	\$100.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$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	08/08/2023	\$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 Deirdre Phillips	08/09/2023	\$50.00
Mailing Address 200 Jefferson Rdg		
City, State, Zip Code Ridgeland, MS 39157-9101		
Name of Employer (Required) Delta Health System		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joanne Edgar	08/29/2023	\$9.50
Mailing Address 333 W 86th St		
City, State, Zip Code New York, NY 10024-3114		
Name of Employer (Required) Self Employed		
Occupation (Required) Writer	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	08/21/2023	\$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 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	09/22/2023	\$5,000.00
Mailing Address 900 7th St NW		
City, State, Zip Code Washington, DC 20001-3886		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	08/22/2023	\$100.00
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	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	09/12/2023	\$50.00
Mailing Address 15231 Rainhollow Dr		
City, State, Zip Code Houston, TX 77070-1328		
Name of Employer (Required) Not Employed		
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	08/03/2023	\$50.00
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 David R. Dykes	08/23/2023	\$200.00
Mailing Address 3524 Old Canton Rd		
City, State, Zip Code Jackson, MS 39216-3311		
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 Rick Smead	09/13/2023	\$250.00
Mailing Address 3918 Swarthmore St		
City, State, Zip Code Houston, TX 77005-3612		
Name of Employer (Required) RBN Energy, LLC		
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	08/14/2023	\$500.00
Mailing Address 113 Greens View Dr		
City, State, Zip Code Madison, MS 39110-8050		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	Aggregate year-to-date	\$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	08/24/2023	\$50,000.00
Mailing Address 800 College Hill Rd		
City, State, Zip Code Oxford, MS 38655-2767		
Name of Employer (Required) Self Employed		
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	09/25/2023	\$15.00
Mailing Address 7069 Tudor Ln		
City, State, Zip Code Horn Lake, MS 38637-1259		
Name of Employer (Required) Young Williams		
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	09/06/2023	\$250.00
Mailing Address 43 County Road 332		
City, State, Zip Code Taylor, MS 38673-4552		
Name of Employer (Required) Kerry Hamilton, Inc.		
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	09/16/2023	\$25.00
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 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	08/07/2023	\$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 Diane Alexander Mailing Address 46 Sagewood Dr City, State, Zip Code Brandon, MS 39042-2526 Name of Employer (Required) Fidelity Occupation (Required) Representative	08/17/2023	\$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 Phil Johnston Mailing Address 2 Heritage Dr City, State, Zip Code Quincy, MA 02171-2165 Name of Employer (Required) Self Employed Occupation (Required) Public Affairs Consultant	09/28/2023	\$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 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	09/28/2023	\$100.00
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	09/28/2023	\$10.00
Mailing Address 5642 Gibson Rd		
City, State, Zip Code Vicksburg, MS 39180-6320		
Name of Employer (Required) Not Employed		
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	08/08/2023	\$25.00
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 Stephen C. Frobouck	08/28/2023	\$15,000.00
Mailing Address 18 Overlook Dr		
City, State, Zip Code Pittsburgh, PA 15238-2146		
Name of Employer (Required) GTL Energy		
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	09/09/2023	\$50.00
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	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	09/30/2023	\$500.00
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	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	07/30/2023	\$25.00
Mailing Address PO Box 631145		
City, State, Zip Code Houston, TX 77263-1145		
Name of Employer (Required) Not Employed		
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 Barbara Austin	09/10/2023	\$50.00
Mailing Address 1435 Saint Ann St		
City, State, Zip Code Jackson, MS 39202-1847		
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 Suzanne Walsh	08/31/2023	\$25.00
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

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	08/31/2023	\$1,000.00
Mailing Address 384 Court St		
City, State, Zip Code West Point, MS 39773-2954		
Name of Employer (Required)		
Occupation (Required)	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	08/12/2023	\$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 Edson Griswold	08/13/2023	\$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 Claudia Hauberg	08/23/2023	\$1,000.00
Mailing Address 234 Eastbrooke St		
City, State, Zip Code Jackson, MS 39216-4716		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	09/27/2023	\$1,250.00
Mailing Address 5130 Arthur St		
City, State, Zip Code Moss Point, MS 39563-2706		
Name of Employer (Required) Ochsner		
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 Pamela Helms	09/27/2023	\$30.00
Mailing Address 317 Autumn Crest Dr		
City, State, Zip Code Ridgeland, MS 39157-2604		
Name of Employer (Required) Self Employed		
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 Ellis Turnage	08/07/2023	\$2,500.00
Mailing Address 1214 South St		
City, State, Zip Code Cleveland, MS 38732-3551		
Name of Employer (Required) Turnage Law Office		
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 Greg White	08/17/2023	\$100.00
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	Aggregate year-to-date	\$400.00

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 Charles Lacavera	09/28/2023	\$25.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Renne R Lohoefer	08/08/2023	\$200.00
Mailing Address 17017 Spring Lake Dr E		
City, State, Zip Code Vancleave, MS 39565-8966		
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 Terry Mangialardi	09/08/2023	\$25.00
Mailing Address 1181 MCGowan Dr		
City, State, Zip Code Southaven, MS 38671-8430		
Name of Employer (Required) Desoto County Schools		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Robert H. Hickman	09/19/2023	\$500.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/29/2023	\$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 Bertis Downs	09/30/2023	\$500.00
Mailing Address PO Box 1864		
City, State, Zip Code Athens, GA 30603-1864		
Name of Employer (Required) Self Employed		
Occupation (Required) Attorney	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	08/30/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/30/2023	\$250.00
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	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	09/21/2023	\$1,000.00
Mailing Address 1087 Augusta Dr		
City, State, Zip Code Oxford, MS 38655-6187		
Name of Employer (Required) Oxford Hotels & Resorts, LLC		
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	08/11/2023	\$50.00
Mailing Address 3203 Melinda Ln		
City, State, Zip Code Corinth, MS 38834-2219		
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 Cheryl Peters	09/22/2023	\$10.00
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Evelyn Walker	09/22/2023	\$200.00
Mailing Address 208 Bellewether Pass		
City, State, Zip Code Ridgeland, MS 39157-8763		
Name of Employer (Required) Facility		
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	08/23/2023	\$200.00
Mailing Address 2605 School St		
City, State, Zip Code Hernando, MS 38632-2217		
Name of Employer (Required) Self Employed		
Occupation (Required) Dentist	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	08/23/2023	\$300.00
Mailing Address 111 Rock Glen Pl		
City, State, Zip Code Jackson, MS 39206-3131		
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 Karen Smith	09/24/2023	\$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 Edward G. Klein Jr	08/14/2023	\$30.00
Mailing Address 308 Brookwoods Dr		
City, State, Zip Code Ridgeland, MS 39157-2029		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	08/15/2023	\$250.00
Mailing Address 532 Fazio Drive Extended		
City, State, Zip Code Oxford, MS 38655-2771		
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 Stefan Massong	08/25/2023	\$100.00
Mailing Address 307 Wisteria St		
City, State, Zip Code Ocean Springs, MS 39564-2840		
Name of Employer (Required) Self Employed		
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	09/05/2023	\$100.00
Mailing Address 817 Chartres St		
City, State, Zip Code New Orleans, LA 70116-3206		
Name of Employer (Required) Not Employed		
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	09/15/2023	\$10.00
Mailing Address 4146 Crestview Pl		
City, State, Zip Code Jackson, MS 39211-6404		
Name of Employer (Required) Change Research		
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	08/16/2023	\$25.00
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 Mary Haskell	09/16/2023	\$100.00
Mailing Address 6 Trotting Horse Dr		
City, State, Zip Code Lexington, MA 02421-6339		
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 Thomas Adams	09/27/2023	\$25.00
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 Donald Kilgore	08/07/2023	\$100.00
Mailing Address 730 Forest Park Cir		
City, State, Zip Code Philadelphia, MS 39350-3314		
Name of Employer (Required) Self Employed		
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 Beverly Hogan	08/07/2023	\$100.00
Mailing Address 111 Rock Glen Pl		
City, State, Zip Code Jackson, MS 39206-3131		
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 Timothy C. Medley	08/28/2023	\$250.00
Mailing Address 238 Eastbrooke St		
City, State, Zip Code Jackson, MS 39216-4716		
Name of Employer (Required) Medley & Brown		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joan Santa Cruz	09/29/2023	\$100.00
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 George W. Healy	08/09/2023	\$300.00
Mailing Address 1323 28th Ave		
City, State, Zip Code Gulfport, MS 39501-1942		
Name of Employer (Required) Healy & Jordan PLLC		
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	08/29/2023	\$25.00
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 Amanda Pannell	09/30/2023	\$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 Nancy Groninger	08/31/2023	\$20.00
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 Ken Hipple	08/03/2023	\$250.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/23/2023	\$1,000.00
Mailing Address 775 N Congress St		
City, State, Zip Code Jackson, MS 39202-3009		
Name of Employer (Required) Pigott Firm		
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 William B. Swain	09/24/2023	\$250.00
Mailing Address 1537 ALDERSON Loop		
City, State, Zip Code Oxford, MS 38655		
Name of Employer (Required) Develop Design Studio		
Occupation (Required) Architect	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	08/04/2023	\$25.00
Mailing Address 108 Coachmans Rd		
City, State, Zip Code Madison, MS 39110-9227		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Andrew Jenkins	08/14/2023	\$50.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/14/2023	\$1,000.00
Mailing Address PO Box 1287		
City, State, Zip Code Pascagoula, MS 39568-1287		
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 Lloyd Gordon	09/15/2023	\$25.00
Mailing Address 105 Colony Crown		
City, State, Zip Code Brandon, MS 39047-8202		
Name of Employer (Required) Not Employed		
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 Taliscia Tobias	08/06/2023	\$50.00
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	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	08/16/2023	\$25.00
Mailing Address 130 Whippoorwill Rd		
City, State, Zip Code Brandon, MS 39047-6429		
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 C. Jackson Williams	08/26/2023	\$25.00
Mailing Address PO Box 69		
City, State, Zip Code Taylor, MS 38673-0069		
Name of Employer (Required) University of Mississippi		
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	09/06/2023	\$100.00
Mailing Address PO Box 808		
City, State, Zip Code Waveland, MS 39576-0808		
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 Mahalia Jackson	09/06/2023	\$15.00
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	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	09/16/2023	\$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 James P. Coleman	09/27/2023	\$250.00
Mailing Address 7357 Savannah Dr		
City, State, Zip Code Marion, MS 39342-9004		
Name of Employer (Required) Vulcan Imaging Associates		
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 Harvey Johnson Jr	09/07/2023	\$250.00
Mailing Address 1141 Hallmark Dr		
City, State, Zip Code Jackson, MS 39206-2113		
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 Tiffany Bensen	09/29/2023	\$25.00
Mailing Address 237 Timber Ln		
City, State, Zip Code Oxford, MS 38655-5851		
Name of Employer (Required) University of Mississippi		
Occupation (Required) Educator	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	08/09/2023	\$1,250.00
Mailing Address 3630 Kings Hwy		
City, State, Zip Code Jackson, MS 39216-3321		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	08/09/2023	\$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 Terry Dwyer	08/29/2023	\$50.00
Mailing Address 950 Fairfax Cir		
City, State, Zip Code Jackson, MS 39211-4250		
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 Richard Rhoden	09/09/2023	\$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 Susan W. Rabon	09/30/2023	\$250.00
Mailing Address 306 River Dr		
City, State, Zip Code Southport, NC 28461-4110		
Name of Employer (Required) Not Employed		
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	09/30/2023	\$100.00
Mailing Address 207 Greenfield Pl		
City, State, Zip Code Brandon, MS 39047-9007		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Victor Campbell	07/30/2023	\$500.00
Mailing Address 1307 Chickering Rd		
City, State, Zip Code Nashville, TN 37215-4521		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Rick Addy	08/10/2023	\$1,000.00
Mailing Address 100 Highway 30 E		
City, State, Zip Code Oxford, MS 38655-8802		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Bethany Theilman	08/20/2023	\$5.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/16/2023	\$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 David Kaye	08/07/2023	\$50.00
Mailing Address 123 Nottingham Ter		
City, State, Zip Code Buffalo, NY 14216-3504		
Name of Employer (Required) University at Buffalo		
Occupation (Required) Faculty	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	09/07/2023	\$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 Lloyd Gordon	08/18/2023	\$50.00
Mailing Address 105 Colony Crown		
City, State, Zip Code Brandon, MS 39047-8202		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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	08/11/2023	\$100.00
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 Karen Smith	09/12/2023	\$8.00
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 James Covington	08/23/2023	\$1,000.00
Mailing Address 1061 Whitsett Walk		
City, State, Zip Code Jackson, MS 39206-6103		
Name of Employer (Required) Southeastern Consulting Group, Inc.		
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) _____	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 80231-5602		
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 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	08/04/2023	\$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 Graham Slakie	08/24/2023	\$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 James Lynch	08/24/2023	\$50.00
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 Helen Boone	09/25/2023	\$100.00
Mailing Address 3726 Crane Blvd		
City, State, Zip Code Jackson, MS 39216-3605		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	08/05/2023	\$25.00
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 Rathii Iyer	08/16/2023	\$25.00
Mailing Address 130 Whippoorwill Rd		
City, State, Zip Code Brandon, MS 39047-6429		
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 Edson Griswold	09/16/2023	\$15.00
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 Claude J. Gunter	08/17/2023	\$100.00
Mailing Address 1315 Pierce Ave		
City, State, Zip Code Oxford, MS 38655-4433		
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 Ted B. Atkinson	08/27/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Judy M. Guice	09/18/2023	\$500.00
Mailing Address 125 Holcomb Blvd		
City, State, Zip Code Ocean Springs, MS 39564-5028		
Name of Employer (Required) Not Employed		
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	08/08/2023	\$5.00
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 Richard Ballard	08/18/2023	\$33.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/28/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Arthur Segel	09/08/2023	\$500.00
Mailing Address 118 Dean Rd		
City, State, Zip Code Brookline, MA 02445-4212		
Name of Employer (Required) Harvard Business School		
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 Michael Collins	09/19/2023	\$100.00
Mailing Address 1826 Ray St		
City, State, Zip Code Ocean Springs, MS 39564-2930		
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 Lise Pearlman	09/29/2023	\$50.00
Mailing Address 1147 Clarendon Cres		
City, State, Zip Code Oakland, CA 94610-1807		
Name of Employer (Required) Self Employed		
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	09/29/2023	\$25.00
Mailing Address 1301 Sandlewood Dr		
City, State, Zip Code Hattiesburg, MS 39402-3042		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name John Jopling	09/29/2023	\$500.00
Mailing Address 276 Santini St		
City, State, Zip Code Biloxi, MS 39530-2946		
Name of Employer (Required) MS Center for Justice		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Gayle Massey	08/09/2023	\$100.00
Mailing Address 186 Parke Dr		
City, State, Zip Code Ridgeland, MS 39157-9402		
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 Donna Shalala	09/09/2023	\$100.00
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 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	09/01/2023	\$25.00
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 Susan Adams	09/11/2023	\$50.00
Mailing Address 3203 Melinda Ln		
City, State, Zip Code Corinth, MS 38834-2219		
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 Michael Cullin	09/12/2023	\$250.00
Mailing Address 2727 Oakview Dr		
City, State, Zip Code Tupelo, MS 38804-1624		
Name of Employer (Required) Sims-Lohman Inc.		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Kathaleen Miller	08/04/2023	\$10.00
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 Susan Dowdy	08/24/2023	\$1,500.00
Mailing Address 301 Cherokee Dr		
City, State, Zip Code Mccomb, MS 39648-6013		
Name of Employer (Required) Southwest Broadcast		
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 Michael O'Neal	08/24/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Joli Nichols	09/25/2023	\$250.00
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	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	08/05/2023	\$100.00
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	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	08/05/2023	\$100.00
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 Eleanor Haimsohn	08/15/2023	\$25.00
Mailing Address 4700 Treadway Rd		
City, State, Zip Code Hernando, MS 38632-9149		
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 William Denman	08/25/2023	\$50.00
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 Martin Crump	08/16/2023	\$2,500.00
Mailing Address 7020 Rollinggreen Dr		
City, State, Zip Code Pass Christian, MS 39571-8149		
Name of Employer (Required) Davis Crump, PC		
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	09/08/2023	\$5,000.00
Mailing Address 37 Town Creek Rd		
City, State, Zip Code West Point, MS 39773-5705		
Name of Employer (Required) Southern Ionics, Inc.		
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	09/29/2023	\$25.00
Mailing Address 1881 N Parc Cir		
City, State, Zip Code Tupelo, MS 38804-9774		
Name of Employer (Required) Not Employed		
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	09/30/2023	\$50.00
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 Charles Penson	09/30/2023	\$25.00
Mailing Address 377 Huntington Pl		
City, State, Zip Code Tupelo, MS 38801-7965		
Name of Employer (Required) CME Church		
Occupation (Required) Pastor	Aggregate year-to-date	\$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	07/30/2023	\$50.00
Mailing Address 913 Southgate Dr		
City, State, Zip Code Starkville, MS 39759-9434		
Name of Employer (Required) Self Employed		
Occupation (Required) Engineer	Aggregate year-to-date	\$1,671.00
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	08/30/2023	\$1,000.00
Mailing Address 18 Cedarwood Ln		
City, State, Zip Code Gulfport, MS 39503-6222		
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 Diane Irvin	09/21/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/21/2023	\$1,000.00
Mailing Address 3630 Kings Hwy		
City, State, Zip Code Jackson, MS 39216-3321		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	09/01/2023	\$100.00
Mailing Address 1286 John Amacker Rd		
City, State, Zip Code Poplarville, MS 39470-6396		
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 Frances M. Coleman	09/03/2023	\$25.00
Mailing Address 108 Royal Garden Ter		
City, State, Zip Code Madison, MS 39110-7637		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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 William N. Graham	09/13/2023	\$50.00
Mailing Address 1301 Sandlewood Dr		
City, State, Zip Code Hattiesburg, MS 39402-3042		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Clyde Muse	08/24/2023	\$100.00
Mailing Address 228 Trace Cir		
City, State, Zip Code Raymond, MS 39154-9518		
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 Nancy Loftus	09/04/2023	\$300.00
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	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	09/14/2023	\$50.00
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 Lynell James	09/15/2023	\$250.00
Mailing Address PO Box 671		
City, State, Zip Code Summit, MS 39666-0671		
Name of Employer (Required) Georgia-Pacific Professional		
Occupation (Required) Reliability Coordinator	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	08/05/2023	\$25.00
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	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

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 Karla Jurvetson Mailing Address 350 2nd St City, State, Zip Code Los Altos, CA 94022-3602 Name of Employer (Required) Self Employed	08/17/2023	\$5,000.00
Occupation (Required) Physician	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	08/17/2023	\$200.00
Occupation (Required) Historian	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	08/27/2023	\$10.00
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) _____	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	09/07/2023	\$10.00
Occupation (Required) Not Employed	Aggregate year-to-date	\$225.00

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 Angelos Vamvakas <hr/> Mailing Address 3161 Wayne Dr <hr/> City, State, Zip Code Diberville, MS 39540-8554 <hr/> Name of Employer (Required) Self Employed <hr/> Occupation (Required) Psychiatrist	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 Carol Hopkins <hr/> Mailing Address 711 Long Meadow Dr <hr/> City, State, Zip Code Oxford, MS 38655-9742 <hr/> Name of Employer (Required) University of Mississippi <hr/> Occupation (Required) Administrative Assistant	08/18/2023	\$33.00
	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 PLLC <hr/> Mailing Address 1603 University Ave <hr/> City, State, Zip Code Oxford, MS 38655-4127 <hr/> Name of Employer (Required) <hr/> Occupation (Required)	08/18/2023	\$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 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 <hr/> Occupation (Required) Chief Investigator	08/28/2023	\$25.00
	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 Popps Ferry Rd City, State, Zip Code Biloxi, MS 39532-2024 Name of Employer (Required) Not Employed	09/19/2023	\$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) _____	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.	09/19/2023	\$100.00
Occupation (Required) Attorney	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	09/29/2023	\$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 Laura Hamilton Mailing Address 707 Randolph Ave SE City, State, Zip Code Huntsville, AL 35801-3606 Name of Employer (Required) Not Employed	09/20/2023	\$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 Martha VanLandingham	09/20/2023	\$50.00
Mailing Address 4830 Old West Point Rd		
City, State, Zip Code Starkville, MS 39759-8190		
Name of Employer (Required) Not Employed		
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 Elizabeth West	09/30/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Tor Kwembe	09/30/2023	\$25.00
Mailing Address 4100 Poplar Ave		
City, State, Zip Code Richton Park, IL 60471-1236		
Name of Employer (Required) Jackson State University		
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 Nancy Neilsen	09/30/2023	\$1,000.00
Mailing Address 3412 PEMBERTON Blvd		
City, State, Zip Code Vicksburg, MS 39180		
Name of Employer (Required) Not Employed		
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	07/30/2023	\$1,500.00
Mailing Address 8002 Lanes End		
City, State, Zip Code Baton Rouge, LA 70810-2255		
Name of Employer (Required) Southern Strategy Group		
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	08/30/2023	\$250.00
Mailing Address 315 THREATT		
City, State, Zip Code Olive Branch, MS 38654		
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 A. La'Verne Edney	08/21/2023	\$500.00
Mailing Address 16 Arlington Park		
City, State, Zip Code Jackson, MS 39211-2952		
Name of Employer (Required) Butler Snow LLP		
Occupation (Required) Attorney	Aggregate year-to-date	\$500.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Mary Vi Risser	09/03/2023	\$250.00
Mailing Address 377 County Road 653B		
City, State, Zip Code Saltillo, MS 38866-5716		
Name of Employer (Required) Not Employed		
Occupation (Required) 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	09/14/2023	\$1,000.00
Mailing Address 100 Princess St		
City, State, Zip Code Alexandria, VA 22314-2325		
Name of Employer (Required) White House Gift Center		
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 William Himel	08/15/2023	\$30.00
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 Emerson B. Robinson Jr	08/25/2023	\$1,000.00
Mailing Address 49 Eastbrooke St		
City, State, Zip Code Jackson, MS 39216-4714		
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 Lele W. Gillespie	09/05/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/26/2023	\$500.00
Mailing Address 1423 Ortega Ave		
City, State, Zip Code Coral Gables, FL 33134-2251		
Name of Employer (Required) Self Employed		
Occupation (Required) Artist	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	08/06/2023	\$25.00
Mailing Address 37 County Road 317		
City, State, Zip Code Heidelberg, MS 39439-3679		
Name of Employer (Required) Jasper		
Occupation (Required) County Supervisor	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	09/27/2023	\$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 Arweeda Coker	08/07/2023	\$250.00
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

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 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	09/30/2023	\$10,000.00
Mailing Address 2515 South Rd		
City, State, Zip Code Poughkeepsie, NY 12601-5473		
Name of Employer (Required) Patterson Planning & Services Inc.		
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	08/30/2023	\$50.00
Mailing Address PO Box 631145		
City, State, Zip Code Houston, TX 77263-1145		
Name of Employer (Required) Not Employed		
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	08/30/2023	\$5,000.00
Mailing Address PO Box 3949		
City, State, Zip Code Jackson, MS 39207-3949		
Name of Employer (Required) Schwartz & Associates		
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	08/02/2023	\$10.00
Mailing Address 2109 Sunset Dr		
City, State, Zip Code Hattiesburg, MS 39402-2843		
Name of Employer (Required) Not Employed		
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

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 Bert Ehrhardt	09/03/2023	\$15.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/14/2023	\$50.00
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	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	08/24/2023	\$5,000.00
Mailing Address PO Box 230		
City, State, Zip Code Glendora, MS 38928-0230		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	09/14/2023	\$100.00
Mailing Address 102 N Sunflower Ave		
City, State, Zip Code Indianola, MS 38751-2552		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	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	08/26/2023	\$250.00
Mailing Address 403 Tyler Ave		
City, State, Zip Code Oxford, MS 38655-3821		
Name of Employer (Required) University of Mississippi		
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	09/16/2023	\$50.00
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 Nan Tarlton	09/27/2023	\$50.00
Mailing Address 210 Meadowlane Dr		
City, State, Zip Code Madison, MS 39110-9611		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	08/07/2023	\$1,000.00
Mailing Address PO Box 2811		
City, State, Zip Code Columbus, MS 39704-2811		
Name of Employer (Required) Not Employed		
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	08/09/2023	\$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 Betsy Dickson Mailing Address 807 S 19th Ave City, State, Zip Code Hattiesburg, MS 39401-7464 Name of Employer (Required) Not Employed	08/29/2023	\$250.00
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) _____	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	09/20/2023	\$30.00
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 Roger Byrd Mailing Address 701 N Fulton St City, State, Zip Code Iuka, MS 38852-2411 Name of Employer (Required) Not Employed	08/30/2023	\$10.00
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 Dennis Truax	08/21/2023	\$100.00
Mailing Address 913 Southgate Dr		
City, State, Zip Code Starkville, MS 39759-9434		
Name of Employer (Required) Self Employed		
Occupation (Required) Engineer	Aggregate year-to-date	\$1,671.00
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	09/01/2023	\$1,000.00
Mailing Address PO Box 10		
City, State, Zip Code Decatur, MS 39327-0010		
Name of Employer (Required) Newton HealthCare Managment		
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	09/22/2023	\$100.00
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 Lori Karny	09/23/2023	\$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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/03/2023	\$50.00
Mailing Address 22450 Rue La Terre		
City, State, Zip Code Kiln, MS 39556-6655		
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 Ellen Lake	08/13/2023	\$250.00
Mailing Address 4230 Lakeshore Ave		
City, State, Zip Code Oakland, CA 94610-1136		
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 Fred Banks Jr.	08/23/2023	\$750.00
Mailing Address 25 Saint Andrews Dr		
City, State, Zip Code Jackson, MS 39211-2438		
Name of Employer (Required) Self Employed		
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 Jean Fenwick	09/13/2023	\$250.00
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

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 Belinda Watkins	08/14/2023	\$50.00
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	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	08/24/2023	\$33.00
Mailing Address 1704 Poplar Blvd		
City, State, Zip Code Jackson, MS 39202-2119		
Name of Employer (Required) Not Employed		
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	08/25/2023	\$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 Edgar James	09/15/2023	\$500.00
Mailing Address 2726 Quebec St NW		
City, State, Zip Code Washington, DC 20008-1223		
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 Linda Foshee	08/06/2023	\$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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/16/2023	\$34.00
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 Gail Stratton	09/06/2023	\$250.00
Mailing Address 956 Highway 7 N		
City, State, Zip Code Abbeville, MS 38601-9620		
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 Lana Richardson	09/27/2023	\$50.00
Mailing Address 10611 County Road 500		
City, State, Zip Code Ripley, MS 38663-9199		
Name of Employer (Required) Not Employed		
Occupation (Required) Retired	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	08/17/2023	\$250.00
Mailing Address 107 A Egret Landing Ct		
City, State, Zip Code Surf City, NC 28445-9410		
Name of Employer (Required) Cleveland International Fund		
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	09/07/2023	\$25.00
Mailing Address 4100 Poplar Ave		
City, State, Zip Code Richton Park, IL 60471-1236		
Name of Employer (Required) Jackson State University		
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	09/18/2023	\$500.00
Mailing Address 1401 K St NW		
City, State, Zip Code Washington, DC 20005-3464		
Name of Employer (Required) The Smith-Free Group		
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	08/08/2023	\$25.00
Mailing Address 1201 Cowden Dr		
City, State, Zip Code Amory, MS 38821-1306		
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 Jonathan Compretta	08/08/2023	\$1,000.00
Mailing Address 4254 Berlin Dr		
City, State, Zip Code Jackson, MS 39211-6017		
Name of Employer (Required) Bernstein Litowitz Berger & Grossmann LLP		
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	09/09/2023	\$50.00
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 Greta Presley	09/30/2023	\$100.00
Mailing Address 182 Verona Ave		
City, State, Zip Code Nettleton, MS 38858-6004		
Name of Employer (Required) HCA Healthcare		
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	08/31/2023	\$25.00
Mailing Address 7069 Tudor Ln		
City, State, Zip Code Horn Lake, MS 38637-1259		
Name of Employer (Required) Young Williams		
Occupation (Required) Attorney	Aggregate year-to-date	\$216.00

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 Susan Weatherholt	08/31/2023	\$100.00
Mailing Address 207 Greenfield Pl		
City, State, Zip Code Brandon, MS 39047-9007		
Name of Employer (Required) Not Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name James Hutto	08/22/2023	\$30.00
Mailing Address 62 Redfern Trl		
City, State, Zip Code Petal, MS 39465-9415		
Name of Employer (Required) Self Employed		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Paul Carpenter	08/03/2023	\$1,000.00
Mailing Address PO Box 1101		
City, State, Zip Code Grenada, MS 38902-1101		
Name of Employer (Required) Carpenter Management		
Occupation (Required) Business Owner	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	09/25/2023	\$1,000.00
Mailing Address 208 Centre St		
City, State, Zip Code Danvers, MA 01923-1341		
Name of Employer (Required) Dewey Square Group		
Occupation (Required) 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 Elise Gillespie	08/25/2023	\$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 Peter Buttross Jr	09/16/2023	\$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 Alan Arendale	08/16/2023	\$5.00
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 Carl Cottingham	09/06/2023	\$250.00
Mailing Address 140 Lela Ln		
City, State, Zip Code Greenville, MS 38701-7760		
Name of Employer (Required) Not Employed		
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	09/06/2023	\$501.00
Mailing Address 1554 W Peace St		
City, State, Zip Code Canton, MS 39046-5325		
Name of Employer (Required) Self Employed		
Occupation (Required) Hospitality	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	08/17/2023	\$25.00
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
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	09/18/2023	\$14.96
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 Graham Slakie	09/18/2023	\$61.40
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/28/2023	\$500.00
Mailing Address 4170 Tanager Ct		
City, State, Zip Code West Point, VA 23181-9366		
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 Keith Johnson	09/29/2023	\$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 Reuben V. Anderson	09/29/2023	\$1,000.00
Mailing Address PO Box 290		
City, State, Zip Code Jackson, MS 39205-0290		
Name of Employer (Required) Phelps Dunbar		
Occupation (Required) Attorney	Aggregate year-to-date	\$5,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Billy R. Wiseman	09/19/2023	\$300.00
Mailing Address PO Box 769		
City, State, Zip Code New Albany, MS 38652-0769		
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 Darrylinn Todd	09/20/2023	\$100.00
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	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	09/30/2023	\$500.00
Mailing Address 425 Riverside Dr		
City, State, Zip Code New York, NY 10025-7775		
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 Suzanne Walsh	09/30/2023	\$25.00
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 William Stevenson	08/30/2023	\$1,000.00
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	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	09/10/2023	\$35.00
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 Cindy Brown	08/11/2023	\$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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Nan Tarlton	08/21/2023	\$25.00
Mailing Address 210 Meadowlane Dr		
City, State, Zip Code Madison, MS 39110-9611		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$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	08/31/2023	\$25.00
Mailing Address 5540 Gibson Rd		
City, State, Zip Code Vicksburg, MS 39180-6318		
Name of Employer (Required) Self Employed		
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	08/31/2023	\$50.00
Mailing Address 3965 Council Cir		
City, State, Zip Code Jackson, MS 39206-5812		
Name of Employer (Required) Self Employed		
Occupation (Required) Journalist	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	09/11/2023	\$500.00
Mailing Address PO Box 369		
City, State, Zip Code West Memphis, AR 72303-0369		
Name of Employer (Required) Self Employed		
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 Bonnie Allen	09/12/2023	\$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 Karen Smith	09/23/2023	\$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 Christopher Neyland	08/03/2023	\$250.00
Mailing Address 120 Shoreline Dr		
City, State, Zip Code Madison, MS 39110-6828		
Name of Employer (Required) Morgan & Morgan		
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 Angela Thomas	08/23/2023	\$2,500.00
Mailing Address 1060 E County Line Rd		
City, State, Zip Code Ridgeland, MS 39157-1900		
Name of Employer (Required) Self Employed		
Occupation (Required) Author	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	08/23/2023	\$200.00
Mailing Address 2239 Greenbriar Dr		
City, State, Zip Code Jackson, MS 39211-6735		
Name of Employer (Required) Self Employed		
Occupation (Required) Educational Consultant	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	09/13/2023	\$25.00
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

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="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	08/05/2023	\$500.00
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 Claiborne Barksdale	08/15/2023	\$500.00
Mailing Address 917 Old Taylor Rd		
City, State, Zip Code Oxford, MS 38655-4637		
Name of Employer (Required) Not Employed		
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	08/25/2023	\$100.00
Mailing Address 913 Southgate Dr		
City, State, Zip Code Starkville, MS 39759-9434		
Name of Employer (Required) Self Employed		
Occupation (Required) Engineer	Aggregate year-to-date	\$1,671.00
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	08/25/2023	\$25.00
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	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	09/05/2023	\$100.00
Mailing Address 799 Pine Cir		
City, State, Zip Code Starkville, MS 39759-3729		
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 Robert G. Mcinnis	09/16/2023	\$1,000.00
Mailing Address 2730 Clinton Tinnin Rd		
City, State, Zip Code Clinton, MS 39056-9524		
Name of Employer (Required) McInnis Electric		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Pin Ni	09/06/2023	\$10,000.00
Mailing Address 9 S Meadow Ct		
City, State, Zip Code South Barrington, IL 60010-9554		
Name of Employer (Required) Wanxiang America Corporation		
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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Theresa Steinberger	08/07/2023	\$100.00
Mailing Address 4713 Forrest St		
City, State, Zip Code Moss Point, MS 39563-2413		
Name of Employer (Required) Not Employed		
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	09/07/2023	\$25.00
Mailing Address PO Box 85		
City, State, Zip Code Taylor, MS 38673-0085		
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 Tomie Green	09/18/2023	\$25.00
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 Christopher Melin	08/28/2023	\$2,500.00
Mailing Address 14 The Battery		
City, State, Zip Code Orange Beach, AL 36561-3073		
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 Lora Travnicek	09/29/2023	\$100.00
Mailing Address 2668 Beach Blvd		
City, State, Zip Code Biloxi, MS 39531-4521		
Name of Employer (Required) Not Employed		
Occupation (Required) Not Employed	Aggregate year-to-date	\$500.00

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

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ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name 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	

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	09/01/2023	\$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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stripe	09/11/2023	\$31.31
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hal & Mal's	09/21/2023	\$1,017.50
Mailing Address 200 Commerce St		
City, State, Zip Code Jackson, MS 39201-4420		
Purpose of Disbursement (Optional) Catering	Aggregate year-to-date	\$1,584.88
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Old Town Media	08/25/2023	\$309,818.00
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart	09/27/2023	\$141.69
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
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)	Aggregate year-to-date	\$5,467.36
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$29,206.03
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$9,930.73
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$4,705.36
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Bumperactive		
Mailing Address		
5907 Burnet Rd	09/22/2023	\$15,683.00
City, State, Zip Code		
Austin, TX 78757-3224		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$26,627.24
Store Overhead		

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)	Aggregate year-to-date	\$266.64
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Payroll Data Processing		
Mailing Address		
3501 E Frontage Rd	09/01/2023	\$160.48
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
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)	Aggregate year-to-date	\$38,021.67
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$70,108.46
Fundraising Consulting		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$14,778.18
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
Sam's Club	09/06/2023	\$65.62
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stefon Ward	09/27/2023	\$279.01
Mailing Address 138 Brookwood Ln		
City, State, Zip Code Hattiesburg, MS 39401-5763		
Purpose of Disbursement (Optional) Reimbursement - Travel	Aggregate year-to-date	\$5,149.27
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	09/11/2023	\$45.84
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Battleaxe Digital	08/15/2023	\$13,504.88
Mailing Address 1405 Florida Ave NW		
City, State, Zip Code Washington, DC 20009-5801		
Purpose of Disbursement (Optional) Digital Consulting	Aggregate year-to-date	\$180,667.40
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Nicholas Eden	08/15/2023	\$1,363.71
Mailing Address 1106 Woodward Ave		
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)	Aggregate year-to-date	\$1,936.43
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$253.98
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$38,021.67
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$4,353.41
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Isaac Lampner		
Mailing Address		
945 Mitchell St	08/15/2023	\$364.20
City, State, Zip Code		
Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$50,137.78
Reimbursement - 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 Shawn Patterson	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1160 1st St NE	08/15/2023	\$2,974.48
City, State, Zip Code Washington, DC 20002-4799		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$36,264.54
Full Name Walker Lake	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1850 Highland Ter	09/15/2023	\$712.03
City, State, Zip Code Jackson, MS 39211-5718		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,224.57
Full Name Walmart	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 702 SW 8th St	09/29/2023	\$43.19
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Full Name DeVon Gray	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 125 Clarence Dr	08/01/2023	\$401.72
City, State, Zip Code Gulfport, MS 39503-3229		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$401.72
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	09/21/2023	\$38.01
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	08/15/2023	\$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
Ron Owens	09/15/2023	\$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	Date (Mo., Day, Year)	Amount of each disbursement this period
Amalgamated Bank	09/27/2023	\$347.20
Mailing Address 275 7th Ave		
City, State, Zip Code New York, NY 10001-6708		
Purpose of Disbursement (Optional) Bank Fee	Aggregate year-to-date	\$1,086.95
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	08/18/2023	\$45.44
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	Date (Mo., Day, Year)	Amount of each disbursement this period
Shawn Patterson	08/01/2023	\$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

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)	Aggregate year-to-date	\$26,627.24
Store Overhead		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$426.49
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$7,655.82
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$5,467.36
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$26,266.88
Printing of Campaign Materials		

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)	Aggregate year-to-date	\$5,216.10
Office Supplies		
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)	Aggregate year-to-date	\$1,389.36
Salary		
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)	Aggregate year-to-date	\$755.93
Travel		
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)	Aggregate year-to-date	\$16,256.05
Database Services		
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)	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
Chick-Fil-A		
Mailing Address		
5200 Buffington Rd	08/18/2023	\$34.14
City, State, Zip Code		
Atlanta, GA 30349-2945		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$253.98
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shyanne Davis		
Mailing Address		
1020 Morris Davis Rd	09/01/2023	\$1,816.09
City, State, Zip Code		
Mccomb, MS 39648-2679		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,974.02
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Declaration Media Group		
Mailing Address		
1152 15th St NW	09/11/2023	\$70,287.47
City, State, Zip Code		
Washington, DC 20005-1723		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$222,861.48
Video Production		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Bradley Palmer		
Mailing Address		
PO Box 925	08/04/2023	\$851.84
City, State, Zip Code		
New Albany, MS 38652-0925		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,933.64
Reimbursement - Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Dollar General		
Mailing Address		
100 Mission Rdg	08/15/2023	\$17.01
City, State, Zip Code		
Goodlettsville, TN 37072-2171		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$213.62
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
Shell Oil Co	09/27/2023	\$16.85
Mailing Address		
PO Box 2463		
City, State, Zip Code	08/21/2023	\$873.50
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
ActBlue Technical Services	08/21/2023	\$873.50
Mailing Address		
PO Box 382110		
City, State, Zip Code	09/01/2023	\$2,974.48
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)		
Credit Card Processing	Aggregate year-to-date	\$29,206.03
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jake Laves	09/01/2023	\$2,974.48
Mailing Address		
699 Nation Hills Dr		
City, State, Zip Code	08/14/2023	\$1,006.04
Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional)		
Salary	Aggregate year-to-date	\$37,974.03
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero	08/14/2023	\$1,006.04
Mailing Address		
200 Spectrum Center Dr		
City, State, Zip Code	09/27/2023	\$82.15
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)		
Credit Card Processing	Aggregate year-to-date	\$61,062.31
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart	09/27/2023	\$82.15
Mailing Address		
702 SW 8th St		
City, State, Zip Code	09/27/2023	\$5,216.10
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)	Aggregate year-to-date	\$5,467.36
Travel		
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)	Aggregate year-to-date	\$5,933.64
Reimbursement - Travel		
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)	Aggregate year-to-date	\$1,348.99
Travel		
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)	Aggregate year-to-date	\$266.64
Staff Meals		
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)	Aggregate year-to-date	\$16,544.64
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
Bumperactive		
Mailing Address		
5907 Burnet Rd	09/22/2023	\$1,309.12
City, State, Zip Code		
Austin, TX 78757-3224		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$26,627.24
Store Overhead		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Holiday Inn		
Mailing Address		
3 Ravinia Dr	08/25/2023	\$169.40
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
Old Town Media		
Mailing Address		
114 Quay St	09/08/2023	\$362,732.00
City, State, Zip Code		
Alexandria, VA 22314-2609		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,808,344.00
Advertising		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Kitchen 107		
Mailing Address		
107 Pecan Ave	08/14/2023	\$2,587.50
City, State, Zip Code		
Nettleton, MS 38858-5930		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,137.50
Catering		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Andrew Buehrer		
Mailing Address		
3249 Pepper Ridge Dr	08/15/2023	\$1,812.30
City, State, Zip Code		
Maumee, OH 43537-9697		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$11,386.47
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
Adam Beyer	09/15/2023	\$2,974.48
Mailing Address 4288 N Gloster St		
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	09/25/2023	\$175,000.00
Mailing Address 2093 Philadelphia Pike		
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	08/29/2023	\$62.40
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	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	09/11/2023	\$32.52
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	Date (Mo., Day, Year)	Amount of each disbursement this period
KEP Strategies, LLC	09/05/2023	\$7,500.00
Mailing Address PO Box 450268		
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$16,256.05
Database Services		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$261,579.77
Payroll Fees		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$61,062.31
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$3,259.89
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$5,467.36
Travel Refund		

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	Date (Mo., Day, Year)	Amount of each disbursement this period
Greta Presley	08/01/2023	\$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	Date (Mo., Day, Year)	Amount of each disbursement this period
Woodmont Public Strategies, LLC	08/03/2023	\$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	Date (Mo., Day, Year)	Amount of each disbursement this period
Daniel Trimble	09/15/2023	\$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	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com	09/27/2023	\$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)	Aggregate year-to-date	\$965.68
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Candlewood Suites		
Mailing Address		
3 Ravinia Dr	08/07/2023	\$103.45
City, State, Zip Code		
Atlanta, GA 30346-2121		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$206.90
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services		
Mailing Address		
PO Box 382110	08/09/2023	\$991.21
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
Walmart		
Mailing Address		
702 SW 8th St	09/20/2023	\$348.76
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
Andrew Buehrer		
Mailing Address		
3249 Pepper Ridge Dr	09/01/2023	\$1,812.30
City, State, Zip Code		
Maumee, OH 43537-9697		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$11,386.47
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
Walmart		
Mailing Address		
702 SW 8th St	08/15/2023	\$10.67
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
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)	Aggregate year-to-date	\$755.93
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero		
Mailing Address		
200 Spectrum Center Dr	09/25/2023	\$41.98
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
Stripe		
Mailing Address		
3180 18th St	09/25/2023	\$18.61
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
Entergy		
Mailing Address		
PO Box 8105	09/07/2023	\$41.38
City, State, Zip Code		
Baton Rouge, LA 70891-8105		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$395.20
Utilities		

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)	Aggregate year-to-date	\$278.84
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Aaron Facio-Cortes		
Mailing Address		
27006 Fordham Dr	09/01/2023	\$1,994.23
City, State, Zip Code		
Wesley Chapel, FL 33544-8730		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$16,614.63
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ethan Cox		
Mailing Address		
3614 N Fremont St	09/13/2023	\$3,513.45
City, State, Zip Code		
Chicago, IL 60613-4372		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$31,666.54
Reimbursement - Travel, Rallies, Phones		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Will Palmer		
Mailing Address		
PO Box 925	08/04/2023	\$145.00
City, State, Zip Code		
New Albany, MS 38652-0925		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$841.00
Reimbursement - Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Dollar General		
Mailing Address		
100 Mission Rdg	08/15/2023	\$13.91
City, State, Zip Code		
Goodlettsville, TN 37072-2171		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$213.62
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 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 Timmanisha Macon	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name Hampton Inn	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name Will Palmer	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name Google	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name ActBlue Technical Services	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$5,216.10
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero		
Mailing Address		
200 Spectrum Center Dr	08/01/2023	\$39.95
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
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)	Aggregate year-to-date	\$24,030.14
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$56,545.16
Health Insurance		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Holiday Inn		
Mailing Address		
3 Ravinia Dr	08/25/2023	\$175.90
City, State, Zip Code		
Atlanta, GA 30346-2118		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$965.68
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
Shell Oil Co	08/30/2023	\$77.18
Mailing Address		
PO Box 2463		
City, State, Zip Code	08/30/2023	\$77.18
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
Duncan Cady	08/15/2023	\$1,582.62
Mailing Address		
325 Frederick St		
City, State, Zip Code	08/15/2023	\$1,582.62
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
Noah Britt	09/15/2023	\$714.03
Mailing Address		
1537 S 11th St		
City, State, Zip Code	09/15/2023	\$714.03
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
The Kroger Co.	08/16/2023	\$54.13
Mailing Address		
1014 Vine St		
City, State, Zip Code	08/16/2023	\$54.13
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
Shell Oil Co	09/11/2023	\$57.16
Mailing Address		
PO Box 2463		
City, State, Zip Code	09/11/2023	\$57.16
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.		
Mailing Address		
195 Binney St	08/15/2023	\$4,833.56
City, State, Zip Code		
Cambridge, MA 02142-1095		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$41,293.85
Digital Fundraising		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Benjamin Hunt		
Mailing Address		
510 S Broadway St	08/15/2023	\$2,167.10
City, State, Zip Code		
Tupelo, MS 38804-4832		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$25,439.20
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ethan Cox		
Mailing Address		
3614 N Fremont St	09/15/2023	\$1,994.23
City, State, Zip Code		
Chicago, IL 60613-4372		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$31,666.54
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Office Depot		
Mailing Address		
6600 N Military Trl	08/17/2023	\$14.99
City, State, Zip Code		
Boca Raton, FL 33496-2434		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$286.39
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Duncan Cady		
Mailing Address		
325 Frederick St	08/01/2023	\$592.99
City, State, Zip Code		
San Francisco, CA 94117-3913		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,975.18
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
Shell Oil Co	09/14/2023	\$66.02
Mailing Address		
PO Box 2463		
City, State, Zip Code	08/15/2023	\$231.60
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
Nicholas Cosmo	08/15/2023	\$231.60
Mailing Address		
202 Milford St		
City, State, Zip Code	08/15/2023	\$231.60
Tupelo, MS 38801-4687		
Purpose of Disbursement (Optional)		
Reimbursement - Travel	Aggregate year-to-date	\$11,836.50
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mark Rennie	08/15/2023	\$1,582.62
Mailing Address		
3203 Nuttree Woods Dr		
City, State, Zip Code	08/15/2023	\$1,582.62
Midlothian, VA 23112-4503		
Purpose of Disbursement (Optional)		
Salary	Aggregate year-to-date	\$9,930.73
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jake Laves	09/15/2023	\$2,974.48
Mailing Address		
699 Nation Hills Dr		
City, State, Zip Code	09/15/2023	\$2,974.48
Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional)		
Salary	Aggregate year-to-date	\$37,974.03
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero	07/30/2023	\$746.47
Mailing Address		
200 Spectrum Center Dr		
City, State, Zip Code	07/30/2023	\$746.47
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)	Aggregate year-to-date	\$1,000.00
Catering		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jordan Kelley		
Mailing Address		
8364 Barton Dr	08/01/2023	\$2,320.98
City, State, Zip Code		
Strongsville, OH 44149-1017		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$21,497.90
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	07/31/2023	\$49.55
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,353.41
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ActBlue Technical Services		
Mailing Address		
PO Box 382110	09/11/2023	\$836.84
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
Payroll Data Processing		
Mailing Address		
3501 E Frontage Rd	08/15/2023	\$26,161.90
City, State, Zip Code		
Tampa, FL 33607-1723		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$261,579.77
Payroll Taxes		

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)	Aggregate year-to-date	\$36,264.54
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$5,467.36
Travel Refund		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$16,544.64
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$2,376.24
Postage		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$70,460.00
Compliance Services		

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)	Aggregate year-to-date	\$250.00
Event Space Rental		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Michael Waller		
Mailing Address		
103 Redbud Dr	09/15/2023	\$2,099.58
City, State, Zip Code		
Hendersonville, TN 37075-3982		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$16,293.91
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ExxonMobil		
Mailing Address		
5959 Las Colinas Blvd	09/25/2023	\$86.65
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
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
Battleaxe Digital		
Mailing Address		
1405 Florida Ave NW	09/18/2023	\$52,614.08
City, State, Zip Code		
Washington, DC 20009-5801		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$180,667.40
Digital Consulting		

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	09/12/2023	\$14,457.92
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)		
Credit Card Processing	Aggregate year-to-date	\$29,206.03
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Battleaxe Digital	09/12/2023	\$14,457.92
Mailing Address		
1405 Florida Ave NW		
City, State, Zip Code	09/05/2023	\$160.22
Washington, DC 20009-5801		
Purpose of Disbursement (Optional)		
Digital Consulting	Aggregate year-to-date	\$180,667.40
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart	09/05/2023	\$160.22
Mailing Address		
702 SW 8th St		
City, State, Zip Code	09/26/2023	\$157.71
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
Holiday Inn	09/26/2023	\$157.71
Mailing Address		
3 Ravinia Dr		
City, State, Zip Code	08/07/2023	\$103.45
Atlanta, GA 30346-2118		
Purpose of Disbursement (Optional)		
Travel	Aggregate year-to-date	\$965.68
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Candlewood Suites	08/07/2023	\$103.45
Mailing Address		
3 Ravinia Dr		
City, State, Zip Code	08/07/2023	\$103.45
Atlanta, GA 30346-2121		
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)	Aggregate year-to-date	\$120,000.00
Field Consulting		
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)	Aggregate year-to-date	\$5,975.18
Salary		
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)	Aggregate year-to-date	\$5,216.10
Office Supplies		
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)	Aggregate year-to-date	\$5,216.10
Office Supplies		
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)	Aggregate year-to-date	\$14,778.18
Reimbursement - Travel, Printing, Event 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
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)	Aggregate year-to-date	\$278.84
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Rashard Farlin		
Mailing Address		
105 Doleac Dr	09/01/2023	\$526.40
City, State, Zip Code		
Hattiesburg, MS 39401-3121		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$526.40
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Subway		
Mailing Address		
325 Sub Way	09/22/2023	\$194.14
City, State, Zip Code		
Milford, CT 06461-3081		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$242.19
Event Catering		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
London and Stetelman Inc		
Mailing Address		
3906 Hardy St	09/05/2023	\$1,198.00
City, State, Zip Code		
Hattiesburg, MS 39402-1684		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,219.00
Rent		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Phillip Baulch		
Mailing Address		
425 Highway 6	08/19/2023	\$350.00
City, State, Zip Code		
Nettleton, MS 38858-9561		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$350.00
Event Space Rental		

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

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)	Aggregate year-to-date	\$29,206.03
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart	09/28/2023	\$39.32
Mailing Address		
702 SW 8th St		
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
Numero	09/28/2023	\$641.64
Mailing Address		
200 Spectrum Center Dr		
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
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)	Aggregate year-to-date	\$7,454.58
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$294.80
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 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	08/07/2023	\$432.00
Mailing Address 222 North St		
City, State, Zip Code Jackson, MS 39201-1808		
Purpose of Disbursement (Optional) Event Catering	Aggregate year-to-date	\$432.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Kroger Co.	08/28/2023	\$48.76
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
Shell Oil Co	09/11/2023	\$51.65
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	Date (Mo., Day, Year)	Amount of each disbursement this period
Scale to Win	08/15/2023	\$4,192.62
Mailing Address 13742 Harper St		
City, State, Zip Code Santa Ana, CA 92703-1419		
Purpose of Disbursement (Optional) Digital Consulting	Aggregate year-to-date	\$9,873.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jordan Kelley	08/15/2023	\$2,445.29
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

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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$25,439.20
Reimbursement - Postage, Communication Tools		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$16,544.64
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$3,597.45
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero		
Mailing Address		
200 Spectrum Center Dr	07/31/2023	\$632.43
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
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)	Aggregate year-to-date	\$18,551.73
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
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	08/01/2023	\$2,320.98
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)		
Credit Card Processing	Aggregate year-to-date	\$29,206.03
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shinitra Russell	08/01/2023	\$2,320.98
Mailing Address		
1185 Collier Rd NW		
City, State, Zip Code	08/01/2023	\$2,320.98
Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional)		
Salary	Aggregate year-to-date	\$24,030.14
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Silly Sisters, LLC	08/01/2023	\$900.00
Mailing Address		
310 County Road 640		
City, State, Zip Code	08/01/2023	\$900.00
Baldwyn, MS 38824-8680		
Purpose of Disbursement (Optional)		
Rent	Aggregate year-to-date	\$7,200.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
United States Postal Service	09/12/2023	\$28.75
Mailing Address		
475 Lenfant Plz SW		
City, State, Zip Code	09/12/2023	\$28.75
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
Fastlane Gas Stations	09/22/2023	\$30.74
Mailing Address		
320 W Government St		
City, State, Zip Code	09/22/2023	\$30.74
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)	Aggregate year-to-date	\$5,149.27
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$38,021.67
Reimbursement - Travel, Office Supplies, Subs		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$4,135.09
Printing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$70,774.44
Fundraising Consulting		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$610.94
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
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)	Aggregate year-to-date	\$2,376.24
Postage		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$1,028.09
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	09/05/2023	\$193.83
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	09/26/2023	\$157.71
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
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)	Aggregate year-to-date	\$3,071.61
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
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$5,467.36
Travel		
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	\$20.00
City, State, Zip Code		
Tupelo, MS 38804		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$616.84
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$271.01
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$3,756.58
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$4,705.36
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
Dollar General		
Mailing Address		
100 Mission Rdg	08/16/2023	-\$17.01
City, State, Zip Code		
Goodlettsville, TN 37072-2171		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$213.62
Office Supplies Refund		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$56,545.16
Health Insurance		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$11,386.47
Reimbursement - Travel, Event Catering		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$1,348.99
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Paul Carter		
Mailing Address		
2615 Blackfoot Rd	09/18/2023	\$50.00
City, State, Zip Code		
Vanceleave, MS 39565-8447		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$225.00
Contribution Refund		

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
Jacob Smith		
Mailing Address		
4100 N Gloster St	09/01/2023	\$2,811.60
City, State, Zip Code		
Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$25,419.43
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$1,095.15
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	09/01/2023	\$36.90
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,353.41
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Alexis Carraway		
Mailing Address		
106 Roberts Cv	08/15/2023	\$1,455.37
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
Duncan Cady		
Mailing Address		
325 Frederick St	09/15/2023	\$1,600.50
City, State, Zip Code		
San Francisco, CA 94117-3913		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,975.18
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
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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	08/08/2023	\$135.70
Mailing Address		
263 Shuman Blvd		
City, State, Zip Code	08/01/2023	\$415.58
Naperville, IL 60563-7700		
Purpose of Disbursement (Optional)		
Office Supplies	Aggregate year-to-date	\$413.82
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero	09/19/2023	\$2,599.24
Mailing Address		
200 Spectrum Center Dr		
City, State, Zip Code	08/02/2023	\$250.00
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)		
Credit Card Processing	Aggregate year-to-date	\$61,062.31
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Samuel Case	08/01/2023	\$415.58
Mailing Address		
4104 Fieldstone Loop		
City, State, Zip Code	08/02/2023	\$250.00
Oxford, MS 38655-3463		
Purpose of Disbursement (Optional)		
Salary	Aggregate year-to-date	\$4,098.56
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
James K. Child Jr	08/02/2023	\$250.00
Mailing Address		
1935 E Bourne Pl		
City, State, Zip Code	08/15/2023	\$216.00
Jackson, MS 39211-6714		
Purpose of Disbursement (Optional)		
Contribution Refund	Aggregate year-to-date	\$250.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Abby O'Keefe	08/15/2023	\$216.00
Mailing Address		
1404 Highland Valley Cir		
City, State, Zip Code	08/15/2023	\$216.00
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 Shinitra Russell	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1185 Collier Rd NW	08/15/2023	\$130.00
City, State, Zip Code Atlanta, GA 30318-8272		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$24,030.14
Full Name Thomas Mayfield	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1412 Wisteria Dr	09/15/2023	\$300.59
City, State, Zip Code Vicksburg, MS 39180-4757		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$300.59
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	08/28/2023	\$40.42
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	09/18/2023	\$60.00
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Isaac Lampner	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 945 Mitchell St	08/01/2023	\$2,798.60
City, State, Zip Code Tupelo, MS 38801-6773		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$50,137.78

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	08/04/2023	\$251,230.00
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Greta Presley	09/15/2023	\$1,623.42
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	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	08/16/2023	\$70.64
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
State Farm Insurance	09/07/2023	\$110.74
Mailing Address 1 State Farm Plz		
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
Dollar General	09/27/2023	\$7.97
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
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)	Aggregate year-to-date	\$1,584.88
Event Space Rental		
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)	Aggregate year-to-date	\$25,419.43
Salary		
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)	Aggregate year-to-date	\$5,216.10
Office Supplies		
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)	Aggregate year-to-date	\$1,232.80
Salary		
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)	Aggregate year-to-date	\$426.49
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
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)	Aggregate year-to-date	\$836.60
Insurance		
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)	Aggregate year-to-date	\$1,028.09
Travel		
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)	Aggregate year-to-date	\$41,293.85
Digital Fundraising		
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)	Aggregate year-to-date	\$2,376.24
Postage		
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)	Aggregate year-to-date	\$1,028.09
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 Hilton Hotels	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 7930 Jones Branch Dr	09/25/2023	\$191.59
City, State, Zip Code McLean, VA 22102-3388		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,705.36
Full Name Walmart	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 702 SW 8th St	09/08/2023	\$44.50
City, State, Zip Code Bentonville, AR 72716-6209		
Purpose of Disbursement (Optional) Office Supplies	Aggregate year-to-date	\$5,216.10
Full Name Alexis Carraway	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 106 Roberts Cv	09/01/2023	\$1,302.40
City, State, Zip Code Starkville, MS 39759-6628		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$8,502.42
Full Name Jake Laves	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 699 Nation Hills Dr	09/12/2023	\$334.28
City, State, Zip Code Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional) Reimbursement - Travel, Subscriptions	Aggregate year-to-date	\$37,974.03
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	09/22/2023	\$24.00
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
Walmart		
Mailing Address		
702 SW 8th St	08/03/2023	\$358.46
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
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)	Aggregate year-to-date	\$29,206.03
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$510.61
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$2,189.73
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$2,000.00
Rent		

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)	Aggregate year-to-date	\$5,467.36
Travel		
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)	Aggregate year-to-date	\$616.84
Travel		
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)	Aggregate year-to-date	\$34,921.55
Salary		
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)	Aggregate year-to-date	\$1,348.99
Travel		
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)	Aggregate year-to-date	\$14,778.18
Reimbursement - Travel, Printing, Event Supplies		

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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
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)	Aggregate year-to-date	\$7,655.82
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$3,808,344.00
Advertising		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$1,095.15
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$61,062.31
Credit Card Processing		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$4,000.00
Rent		

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		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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

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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
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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

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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
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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

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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
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)	Aggregate year-to-date	\$9,930.73
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$70,774.44
Fundraising Consulting		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stripe		
Mailing Address		
3180 18th St	08/29/2023	\$19.62
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
Michael Steele		
Mailing Address		
191 Wides Rd	08/01/2023	\$2,013.23
City, State, Zip Code		
Nason, IL 62866		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,013.23
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$1,117.87
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	08/31/2023	\$11.47
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
The Sun-Sentinel		
Mailing Address		
149 COURT Sq	08/28/2023	\$485.00
City, State, Zip Code		
Charleston, MS 38921		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$535.00
Subscription		
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)	Aggregate year-to-date	\$252.50
Phones		
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)	Aggregate year-to-date	\$253.98
Staff Meals		
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)	Aggregate year-to-date	\$1,028.09
Travel		

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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
Walmart		
Mailing Address		
702 SW 8th St	09/11/2023	\$62.51
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
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)	Aggregate year-to-date	\$9,873.00
Digital Consulting		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$266.64
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$2,376.24
Postage		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$510.61
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
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)	Aggregate year-to-date	\$4,098.56
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$25,439.20
Reimbursement - Travel, Postage, Software		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	08/02/2023	\$159.00
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
Jackie Courson		
Mailing Address		
63 Hidden Crk	08/14/2023	\$25.00
City, State, Zip Code		
Pontotoc, MS 38863-7514		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$275.00
Contribution Refund		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	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 Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	09/26/2023	\$128.40
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Full Name ActBlue Technical Services	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 382110	08/20/2023	\$210.09
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$29,206.03
Full Name MBA Consulting Group	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 611 Pennsylvania Ave SE	09/01/2023	\$10,120.00
City, State, Zip Code Washington, DC 20003-4303		
Purpose of Disbursement (Optional) Compliance Services	Aggregate year-to-date	\$70,460.00
Full Name Khalilah Karriem	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1326 15th St N	09/01/2023	\$96.97
City, State, Zip Code Columbus, MS 39701-3610		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$827.35
Full Name Expedia.com	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1111 Expedia Group Way W	09/06/2023	\$388.65
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
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)	Aggregate year-to-date	\$65,296.21
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hampton Inn		
Mailing Address		
7930 Jones Branch Dr	08/21/2023	\$121.61
City, State, Zip Code		
McLean, VA 22102-3388		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,348.99
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Bumperactive		
Mailing Address		
5907 Burnet Rd	08/17/2023	\$1,792.77
City, State, Zip Code		
Austin, TX 78757-3224		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$26,627.24
Store Overhead		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Daniel Trimble		
Mailing Address		
8 Iris Ln	09/01/2023	\$2,199.07
City, State, Zip Code		
Redding, CT 06896-2112		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$7,439.89
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
IP Casino Resort & Spa		
Mailing Address		
850 Bayview Ave	08/14/2023	\$59.92
City, State, Zip Code		
Biloxi, MS 39530-1701		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,095.15
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 London and Stetelman Inc	Date (Mo., Day, Year)	Amount of each disbursement this period
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

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	08/21/2023	\$108.77
City, State, Zip Code		
Naperville, IL 60563-7700		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$413.82
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$4,353.41
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$37,974.03
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$827.35
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Uber		
Mailing Address		
1515 3rd St	09/29/2023	\$24.67
City, State, Zip Code		
San Francisco, CA 94158-2211		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$210.09
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 Nicholas Cosmo	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 202 Milford St	08/01/2023	\$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 Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	09/22/2023	\$610.20
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Full Name Jacob Smith	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4100 N Gloster St	08/15/2023	\$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 Julie McDermott	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1119 Bratton Rd	09/15/2023	\$2,073.82
City, State, Zip Code New Albany, MS 38652-9328		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$12,898.83
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	08/28/2023	\$23.85
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	\$76.85
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Julie McDermott	08/01/2023	\$1,909.95
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Allmond Printing Co	08/02/2023	\$1,377.09
Mailing Address 603 W Commerce St		
City, State, Zip Code Aberdeen, MS 39730-2405		
Purpose of Disbursement (Optional) Printing	Aggregate year-to-date	\$4,135.09
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	08/04/2023	\$89.04
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	Date (Mo., Day, Year)	Amount of each disbursement this period
Angelo Ruiz	09/15/2023	\$2,263.57
Mailing Address 127 S Roach St		
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	09/05/2023	\$50.00
Mailing Address 149 COURT Sq		
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
Battleaxe Digital	08/07/2023	\$4,786.80
Mailing Address 1405 Florida Ave NW		
City, State, Zip Code Washington, DC 20009-5801		
Purpose of Disbursement (Optional) Digital Consulting	Aggregate year-to-date	\$180,667.40
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Trey Till	08/01/2023	\$1,812.30
Mailing Address 105 Morning Glory Dr		
City, State, Zip Code Madison, MS 39110-7898		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$7,655.82
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Best Western Hotel	07/31/2023	\$171.71
Mailing Address 6201 N 24th Pkwy		
City, State, Zip Code Phoenix, AZ 85016-2023		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,117.87
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart	08/31/2023	\$94.50
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
Take 5 Oil Change	08/14/2023	\$143.33
Mailing Address		
201 S GLOSTER St		
City, State, Zip Code	08/14/2023	\$143.33
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
Chick-Fil-A	09/11/2023	\$16.69
Mailing Address		
5200 Buffington Rd		
City, State, Zip Code	09/11/2023	\$16.69
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
Lexis Nexis	09/12/2023	\$335.00
Mailing Address		
230 Park Ave		
City, State, Zip Code	09/12/2023	\$335.00
New York, NY 10169-0935		
Purpose of Disbursement (Optional)		
Software Subscription	Aggregate year-to-date	\$1,804.68
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
United States Postal Service	08/03/2023	\$462.00
Mailing Address		
475 Lenfant Plz SW		
City, State, Zip Code	08/03/2023	\$462.00
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
Walmart	09/15/2023	\$93.83
Mailing Address		
702 SW 8th St		
City, State, Zip Code	09/15/2023	\$93.83
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
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)	Aggregate year-to-date	\$1,028.09
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Louise Cole		
Mailing Address		
518 N Church St	09/01/2023	\$1,879.61
City, State, Zip Code		
Okolona, MS 38860-1017		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$9,012.67
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Trey Till		
Mailing Address		
105 Morning Glory Dr	09/12/2023	\$128.52
City, State, Zip Code		
Madison, MS 39110-7898		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$7,655.82
Reimbursement - Travel, Research		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Dodge's Store		
Mailing Address		
2290 W Main St	09/14/2023	\$20.97
City, State, Zip Code		
Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$510.61
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	09/25/2023	\$39.17
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
Dunkin Donuts	08/10/2023	\$80.92
Mailing Address		
130 Royall St		
City, State, Zip Code		
Canton, MA 02021-1010		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$334.01
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$3,808,344.00
Advertising		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$2,103.05
Internet		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$21,497.90
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$5,467.36
Travel		

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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
Amanda Pagoaga	09/01/2023	\$1,642.51
Mailing Address 5341 Melville Cv		
City, State, Zip Code Olive Branch, MS 38654-8363		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$3,259.89
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Hilton Hotels	07/31/2023	\$4.84
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Kroger Co.	09/14/2023	\$54.48
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
Empower Innovations Group	08/17/2023	\$400.00
Mailing Address 2800 Royal Ave		
City, State, Zip Code Monona, WI 53713-1595		
Purpose of Disbursement (Optional) Organizing Software	Aggregate year-to-date	\$400.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Michael Waller	09/01/2023	\$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

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ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated

☐ Prior to January 1, 2018 or☒ On or After January 1, 2018

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
Full Name ActBlue Technical Services	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 382110	09/25/2023	\$2,214.99
City, State, Zip Code Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$29,206.03
Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	09/12/2023	\$2,253.23
City, State, Zip Code Irvine, CA 92618-5004		
Purpose of Disbursement (Optional) Credit Card Processing	Aggregate year-to-date	\$61,062.31
Full Name Nicholas Cosmo	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 202 Milford St	08/15/2023	\$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 Samuel Case	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4104 Fieldstone Loop	09/15/2023	\$712.03
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)	Aggregate year-to-date	\$150.00
Event Space Rental Refund		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	09/07/2023	\$80.41
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,353.41
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Lowe's		
Mailing Address		
3354 N Gloster St	08/28/2023	\$453.62
City, State, Zip Code		
Tupelo, MS 38804-9704		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$2,130.85
Office Supplies		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Payroll Data Processing		
Mailing Address		
3501 E Frontage Rd	08/01/2023	\$23,409.84
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
Shell Oil Co		
Mailing Address		
PO Box 2463	09/12/2023	\$60.12
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 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)	Aggregate year-to-date	\$210.09
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ethan Cox		
Mailing Address		
3614 N Fremont St	08/01/2023	\$1,623.42
City, State, Zip Code		
Chicago, IL 60613-4372		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$31,666.54
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Adam Beyer		
Mailing Address		
4288 N Gloster St	08/15/2023	\$111.76
City, State, Zip Code		
Tupelo, MS 38804-7249		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$38,021.67
Reimbursement - Subscriptions		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Trey Till		
Mailing Address		
105 Morning Glory Dr	08/15/2023	\$1,812.30
City, State, Zip Code		
Madison, MS 39110-7898		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$7,655.82
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
John J. Miller		
Mailing Address		
30 Rock Hill Rd	09/15/2023	\$1,994.23
City, State, Zip Code		
Sumrall, MS 39482-9537		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,756.58
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 Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	08/28/2023	\$27.01
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	09/19/2023	\$51.63
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Kalie McGuire	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2121 Edwards St	08/01/2023	\$360.16
City, State, Zip Code Houston, TX 77007-4786		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$360.16
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	07/31/2023	\$76.09
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Amalgamated Bank	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 275 7th Ave	08/25/2023	\$270.50
City, State, Zip Code New York, NY 10001-6708		
Purpose of Disbursement (Optional) Bank Fee	Aggregate year-to-date	\$1,086.95

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	09/15/2023	\$2,499.80
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com	09/25/2023	\$261.34
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
London and Stetelman Inc	08/07/2023	\$2,021.00
Mailing Address 3906 Hardy St		
City, State, Zip Code Hattiesburg, MS 39402-1684		
Purpose of Disbursement (Optional) Rent	Aggregate year-to-date	\$5,219.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Daniel Trimble	08/01/2023	\$1,679.68
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	Date (Mo., Day, Year)	Amount of each disbursement this period
Best Western Hotel	07/31/2023	\$171.71
Mailing Address 6201 N 24th Pkwy		
City, State, Zip Code Phoenix, AZ 85016-2023		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$1,117.87

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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
Walmart		
Mailing Address		
702 SW 8th St	08/31/2023	\$11.47
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
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)	Aggregate year-to-date	\$1,584.88
Event Catering		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$11,103.01
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$211.91
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$1,550.00
Utilities		

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)	Aggregate year-to-date	\$1,028.09
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	09/15/2023	\$22.92
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
Chipotle		
Mailing Address		
610 Newport Center Dr	09/06/2023	\$590.77
City, State, Zip Code		
Newport Beach, CA 92660-6460		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$907.37
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Nicholas Cosmo		
Mailing Address		
202 Milford St	09/01/2023	\$2,320.98
City, State, Zip Code		
Tupelo, MS 38801-4687		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$11,836.50
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shawn Patterson		
Mailing Address		
1160 1st St NE	09/12/2023	\$47.12
City, State, Zip Code		
Washington, DC 20002-4799		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$36,264.54
Reimbursement - Subscriptions		

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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
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)	Aggregate year-to-date	\$271.01
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$245,900.00
Research Consultant		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$4,353.41
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stripe		
Mailing Address		
3180 18th St	09/18/2023	\$20.92
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
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)	Aggregate year-to-date	\$2,103.05
Internet		

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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
Paul Carter		
Mailing Address		
2615 Blackfoot Rd	08/21/2023	\$25.00
City, State, Zip Code		
Vancleave, MS 39565-8447		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$225.00
Contribution Refund		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$18,551.73
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Dunkin Donuts		
Mailing Address		
130 Royall St	08/21/2023	\$95.32
City, State, Zip Code		
Canton, MA 02021-1010		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$334.01
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$16,544.69
Reimbursement - Travel, Basic Events, TV Shoots		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ExxonMobil		
Mailing Address		
5959 Las Colinas Blvd	09/15/2023	\$64.70
City, State, Zip Code		
Irving, TX 75039-4202		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$466.89
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 United States Postal Service	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name Shawn Patterson	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name Hilton Hotels	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name Jefferson Stevens, LLC	Date (Mo., Day, Year)	Amount of each disbursement this period
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	09/18/2023	\$56.73
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.	09/01/2023	\$1,623.42
Mailing Address		
1014 Vine St		
City, State, Zip Code	08/01/2023	\$7,500.00
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	09/22/2023	\$10,000.00
Mailing Address		
138 Brookwood Ln		
City, State, Zip Code	08/01/2023	\$7,500.00
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	08/01/2023	\$7,500.00
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	08/01/2023	\$7,500.00
Washington, DC 20003-4303		
Purpose of Disbursement (Optional)		
Compliance Services	Aggregate year-to-date	\$70,460.00

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ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated

☐ Prior to January 1, 2018 or☒ On or After January 1, 2018

Full Name Reservations.com	Date (Mo., Day, Year)	Amount of each disbursement this period
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

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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
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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

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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
Stripe		
Mailing Address		
3180 18th St	08/14/2023	\$14.74
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
Faye Moss		
Mailing Address		
802 Beazer Ln	09/04/2023	\$250.00
City, State, Zip Code		
Antioch, TN 37013-2336		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$250.00
Contribution Refund		
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)	Aggregate year-to-date	\$18,551.73
Reimbursement - Travel, Placards		
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)	Aggregate year-to-date	\$34,921.55
Salary		
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)	Aggregate year-to-date	\$18,551.73
Salary		

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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
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)	Aggregate year-to-date	\$165,250.00
Political Contribution		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$2,376.24
Postage		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$12,119.25
Insurance		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$5,330.82
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$26,227.80
Research Consulting		

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	Date (Mo., Day, Year)	Amount of each disbursement this period
Daniel Trimble	08/15/2023	\$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	Date (Mo., Day, Year)	Amount of each disbursement this period
Benjamin Nordstrom	09/15/2023	\$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	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co	09/19/2023	\$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	Date (Mo., Day, Year)	Amount of each disbursement this period
Abby O'Keefe	08/01/2023	\$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

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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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	Date (Mo., Day, Year)	Amount of each disbursement this period
Michael Waller	08/01/2023	\$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	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart	08/31/2023	\$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	Date (Mo., Day, Year)	Amount of each disbursement this period
American Airlines	09/25/2023	\$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	Date (Mo., Day, Year)	Amount of each disbursement this period
Texaco, Inc.	08/17/2023	\$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	Date (Mo., Day, Year)	Amount of each disbursement this period
Booking.com	08/28/2023	\$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)	Aggregate year-to-date	\$250.00
Event Sponsorship		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Chevron Stations		
Mailing Address		
6001 Bollinger Canyon Rd	08/10/2023	\$54.06
City, State, Zip Code		
San Ramon, CA 94583-2324		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$1,028.09
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Morgan Benjamin		
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)	Aggregate year-to-date	\$14,778.18
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Comfort Inn		
Mailing Address		
10750 Columbia Pike	09/05/2023	\$2.00
City, State, Zip Code		
Silver Spring, MD 20901-4402		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$755.93
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart		
Mailing Address		
702 SW 8th St	09/15/2023	\$264.42
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
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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		
Mailing Address		
9346 Telge Rd	09/05/2023	\$11,868.65
City, State, Zip Code		
Houston, TX 77095-5107		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$38,300.84
Direct Mail Production, Printing, and Postage		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Shell Oil Co		
Mailing Address		
PO Box 2463	09/26/2023	\$64.74
City, State, Zip Code		
Houston, TX 77252-2463		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$4,353.41
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Domino's Pizza		
Mailing Address		
30 Frank Lloyd Wright Dr	09/07/2023	\$100.26
City, State, Zip Code		
Ann Arbor, MI 48105-9757		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$271.01
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Paul Carter		
Mailing Address		
2615 Blackfoot Rd	08/21/2023	\$50.00
City, State, Zip Code		
Vancleave, MS 39565-8447		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$225.00
Contribution Refund		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Angelique LaCour		
Mailing Address		
PO Box 2585	09/01/2023	\$1,642.51
City, State, Zip Code		
Bay St Louis, MS 39521-2585		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$3,243.01
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
Google		
Mailing Address		
1600 Amphitheatre Pkwy	09/05/2023	\$383.61
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	09/25/2023	\$10.51
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
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)	Aggregate year-to-date	\$16,544.69
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$4,705.36
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$245,900.00
Research Consultant		

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)	Aggregate year-to-date	\$270.90
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$3,808,344.00
Advertising		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$261,579.77
Payroll Taxes		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$45,003.89
Reimbursement - Travel, Printing of Campaign Mater		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$345.87
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 Morgan Benjamin	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4212 28th St	08/15/2023	\$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
Full Name Jada Barnes	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 395 Lampton Hilltop Rd	09/15/2023	\$1,675.00
City, State, Zip Code Columbia, MS 39429-9189		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$11,103.01
Full Name David Miotke	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1626 Francisco St	09/25/2023	\$500.00
City, State, Zip Code Berkeley, CA 94703-1255		
Purpose of Disbursement (Optional) Contribution Refund	Aggregate year-to-date	\$500.00
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	09/11/2023	\$50.22
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Numero	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Spectrum Center Dr	08/02/2023	\$904.09
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
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)	Aggregate year-to-date	\$253.98
Staff Meals		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$3,974.02
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$9,012.67
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	Aggregate year-to-date	\$14,778.18
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
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)	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	09/04/2023	\$744.38
Mailing Address		
PO Box 382110		
City, State, Zip Code	08/15/2023	\$580.74
Cambridge, MA 02238-2110		
Purpose of Disbursement (Optional)		
Credit Card Processing	Aggregate year-to-date	\$29,206.03
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jake Laves	08/15/2023	\$580.74
Mailing Address		
699 Nation Hills Dr		
City, State, Zip Code	08/15/2023	\$580.74
Tupelo, MS 38804-6063		
Purpose of Disbursement (Optional)		
Reimbursement - Travel, Communication Tools	Aggregate year-to-date	\$37,974.03
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ron Owens	08/15/2023	\$3,935.75
Mailing Address		
3545 Mitchell Rd		
City, State, Zip Code	08/15/2023	\$3,935.75
Tupelo, MS 38801-9616		
Purpose of Disbursement (Optional)		
Salary	Aggregate year-to-date	\$65,296.21
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Angelique LaCour	09/15/2023	\$1,600.50
Mailing Address		
PO Box 2585		
City, State, Zip Code	09/15/2023	\$1,600.50
Bay St Louis, MS 39521-2585		
Purpose of Disbursement (Optional)		
Salary	Aggregate year-to-date	\$3,243.01
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jeffrey Hulum	08/07/2023	\$250.00
Mailing Address		
3601 Oak Ave		
City, State, Zip Code	08/07/2023	\$250.00
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)	Aggregate year-to-date	\$5,216.10
Office Supplies		
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)	Aggregate year-to-date	\$16,614.63
Salary		
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)	Aggregate year-to-date	\$4,353.41
Travel		
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)	Aggregate year-to-date	\$4,353.41
Travel		
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)	Aggregate year-to-date	\$16,293.91
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
Abby O'Keefe		
Mailing Address		
1404 Highland Valley Cir	09/15/2023	\$2,974.48
City, State, Zip Code		
Wildwood, MO 63005-4259		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$34,921.55
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ron Owens		
Mailing Address		
3545 Mitchell Rd	08/01/2023	\$3,935.75
City, State, Zip Code		
Tupelo, MS 38801-9616		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$65,296.21
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jacob Smith		
Mailing Address		
4100 N Gloster St	09/15/2023	\$2,811.60
City, State, Zip Code		
Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$25,419.43
Salary		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Expedia.com		
Mailing Address		
1111 Expedia Group Way W	09/25/2023	\$291.16
City, State, Zip Code		
Seattle, WA 98119-1111		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$5,467.36
Travel		
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jacob Smith		
Mailing Address		
4100 N Gloster St	08/07/2023	\$394.47
City, State, Zip Code		
Tupelo, MS 38804-7228		
Purpose of Disbursement (Optional)	Aggregate year-to-date	\$25,419.43
Reimbursement - Event Catering		

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	08/28/2023	\$699.63
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
Amazon, Inc.	08/28/2023	\$699.63
Mailing Address		
410 Terry Ave N		
City, State, Zip Code	08/22/2023	\$88.96
Seattle, WA 98109-5210		
Purpose of Disbursement (Optional)		
Office Supplies	Aggregate year-to-date	\$2,195.37
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
ExxonMobil	08/22/2023	\$88.96
Mailing Address		
5959 Las Colinas Blvd		
City, State, Zip Code	08/03/2023	\$344.07
Irving, TX 75039-4202		
Purpose of Disbursement (Optional)		
Travel	Aggregate year-to-date	\$466.89
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Numero	08/03/2023	\$344.07
Mailing Address		
200 Spectrum Center Dr		
City, State, Zip Code	09/05/2023	\$301.65
Irvine, CA 92618-5004		
Purpose of Disbursement (Optional)		
Credit Card Processing	Aggregate year-to-date	\$61,062.31
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Walmart	09/05/2023	\$301.65
Mailing Address		
702 SW 8th St		
City, State, Zip Code	09/05/2023	\$301.65
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 American Airlines	Date (Mo., Day, Year)	Amount of each disbursement this period
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 Jones Mandel	Date (Mo., Day, Year)	Amount of each disbursement this period
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 Jefferson Stevens, LLC	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5907 Baxter Dr	09/05/2023	\$7,500.00
City, State, Zip Code Jackson, MS 39211-3319		
Purpose of Disbursement (Optional) Political Strategy Consultant	Aggregate year-to-date	\$45,003.89
Full Name Shell Oil Co	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 2463	09/27/2023	\$38.15
City, State, Zip Code Houston, TX 77252-2463		
Purpose of Disbursement (Optional) Travel	Aggregate year-to-date	\$4,353.41
Full Name Dodge's Store	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2290 W Main St	08/09/2023	\$47.62
City, State, Zip Code Tupelo, MS 38801-3144		
Purpose of Disbursement (Optional) Staff Meals	Aggregate year-to-date	\$510.61
Full Name Paul Carter	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2615 Blackfoot Rd	08/21/2023	\$100.00
City, State, Zip Code Vanceleave, MS 39565-8447		
Purpose of Disbursement (Optional) Contribution Refund	Aggregate year-to-date	\$225.00
Full Name Walker Lake	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1850 Highland Ter	09/01/2023	\$512.54
City, State, Zip Code Jackson, MS 39211-5718		
Purpose of Disbursement (Optional) Salary	Aggregate year-to-date	\$1,224.57

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	08/04/2023	\$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		