

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Mississippi Republican Party

ADDRESS (number and street) P. O. Box 60  
 Check if different than previously reported. (ACC)  
Jackson MS 39205

2. **FEC IDENTIFICATION NUMBER** C00084368  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 03 01 2010 through 03 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Arnie Hederman  
Signature of Treasurer Electronically Filed by Arnie Hederman Date 04 20 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Mississippi Republican Party

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		17518.36
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	99422.84									
(c) Total Receipts (from Line 19) .....	36394.49	226193.29								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	135817.33	243711.65								
7. Total Disbursements (from Line 31) .....	28740.62	136634.94								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	107076.71	107076.71								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Mississippi Republican Party

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	18815.00	111815.27
(ii) Unitemized .....	17579.30	93242.30
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	36394.30	205057.57
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	5600.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	36394.30	210657.57
12. Transfers From Affiliated/Other Party Committees .....	0.00	15000.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	535.16
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.19	0.56
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	36394.49	226193.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	36394.49	226193.29

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	2069.85	25642.62
(ii) Non-Federal Share.....	4756.42	41680.23
(b) Other Federal Operating Expenditures.....	8151.60	23688.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	14977.87	91011.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	417.99
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	13762.75	45205.32
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	13762.75	45205.32
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	28740.62	136634.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23984.20	94954.71

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	36394.30	210657.57
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	36394.30	210657.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10221.45	49331.40
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	535.16
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10221.45	48796.24

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Bankston		Date of Receipt
	Mailing Address 2588 Rue Palafox		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Biloxi	MS	39531
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 00316.C215883
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="15.00"/>
		<input type="text" value="45.00"/>	Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Mary Bankston		Date of Receipt
	Mailing Address 2588 Rue Palafox		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Biloxi	MS	39531
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 00316.C216400
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
		<input type="text" value="1045.00"/>	Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) William R. James		Date of Receipt
	Mailing Address 217 W. Capitol Street, Suite 201		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Jackson	MS	39201-2006
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 00316.C216398
Name of Employer Pruett Production		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="6015.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 33  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Rubel Phillips

Mailing Address 258 Braeburn

City State Zip Code  
Jackson MS 39211

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY  
03 / 08 / 2010

Transaction ID: 00316.C216017

Amount of Each Receipt this Period 100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Clarke Reed

Mailing Address 139 Bayou Road

City State Zip Code  
Greenville MS 38701-7702

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1045.00

Date of Receipt MM / DD / YYYY  
03 / 08 / 2010

Transaction ID: 00316.C216023

Amount of Each Receipt this Period 15.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Wirt Yerger, Jr.

Mailing Address 129 Woodland Circle

City State Zip Code  
Jackson MS 39216

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5075.00

Date of Receipt MM / DD / YYYY  
03 / 08 / 2010

Transaction ID: 00316.C216082

Amount of Each Receipt this Period 25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 140.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 33  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Virginia Morris

Mailing Address 1101 Soute 34th Avenue

City State Zip Code  
Hattiesburg MS 39402-3004

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt  
MM / DD / YYYY  
03 / 11 / 2010

Transaction ID: 00419.C217111

Amount of Each Receipt this Period  
150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Virginia Morris

Mailing Address 1101 Soute 34th Avenue

City State Zip Code  
Hattiesburg MS 39402-3004

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 11 / 2010

Transaction ID: 00419.C217116

Amount of Each Receipt this Period  
150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Helen Beeman

Mailing Address 115 Pecan Circle

City State Zip Code  
Quitman MS 39355-2653

FEC ID number of contributing federal political committee. **C**

Name of Employer Quitman Schools Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
03 / 08 / 2010

Transaction ID: 00316.C216092

Amount of Each Receipt this Period  
20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **320.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 33  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.** Full Name (Last, First, Middle Initial)  
James Herring

Mailing Address 232 E. Semmes Street

City State Zip Code  
Canton MS 39046-4530

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Herring Long and Crews Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1030.00

Date of Receipt MM / DD / YYYY  
03 / 08 / 2010

**Transaction ID:** 00316.C216095

Amount of Each Receipt this Period 10.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Ellett Lawrence

Mailing Address 400 E. Cleveland Avenue

City State Zip Code  
Greenwood MS 38930-3112

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Lawrence Printing Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt MM / DD / YYYY  
03 / 08 / 2010

**Transaction ID:** 00316.C216105

Amount of Each Receipt this Period 15.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
James R. Carter

Mailing Address 467 N. First Street

City State Zip Code  
Rolling Fork MS 39159

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 565.00

Date of Receipt MM / DD / YYYY  
03 / 25 / 2010

**Transaction ID:** 00419.C216577

Amount of Each Receipt this Period 565.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 590.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Victor Mavar	Date of Receipt MM / DD / YYYY 03 / 03 / 2010
	Mailing Address 630 Beach Blvd.	<b>Transaction ID:</b> 00316.C215861
	City State Zip Code Biloxi MS 39530-4301	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James P. Hathcock	Date of Receipt MM / DD / YYYY 03 / 24 / 2010
	Mailing Address 2314 E. Manor Drive	<b>Transaction ID:</b> 00419.C216537
	City State Zip Code Jackson MS 39211-6209	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
	Name of Employer Comp. Ins. Svcs. Occupation Insurance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) W. P. Bridges, Jr.	Date of Receipt MM / DD / YYYY 03 / 05 / 2010
	Mailing Address 1904 Lakeland Drive attn: Nancy	<b>Transaction ID:</b> 00316.C216347
	City State Zip Code Jackson MS 39216	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
	Name of Employer Bridges Mortgage Co. Occupation Mortgage Co. Exec. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2725.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 33  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Charles M. Carr, Jr.  
Mailing Address 1451 Highland Park Drive  
City Jackson State MS Zip Code 39211  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 475.00  
Date of Receipt 03 / 11 / 2010  
Transaction ID: 00419.C217113  
Amount of Each Receipt this Period 275.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Charlie Williams  
Mailing Address P. O. Box 946  
City Senatobia State MS Zip Code 38668  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Consultant  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 03 / 08 / 2010  
Transaction ID: 00316.C216203  
Amount of Each Receipt this Period 100.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Peter Wilson  
Mailing Address 453 Carmargue Ln.  
City Biloxi State MS Zip Code 39531  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Bancorp South Occupation Bank Insurance Rep.  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.00  
Date of Receipt 03 / 08 / 2010  
Transaction ID: 00316.C216228  
Amount of Each Receipt this Period 10.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 385.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Alwyn Luckey	Date of Receipt MM / DD / YYYY 03 / 03 / 2010
	Mailing Address 101 Watersedge Lane	<b>Transaction ID:</b> 00316.C215863
	City State Zip Code Ocean Springs MS 39564	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William Kopp	Date of Receipt MM / DD / YYYY 03 / 11 / 2010
	Mailing Address 2 Waterford Place	<b>Transaction ID:</b> 00419.C217109
	City State Zip Code Jackson MS 39211-2945	Amount of Each Receipt this Period 220.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jim Johnson	Date of Receipt MM / DD / YYYY 03 / 11 / 2010
	Mailing Address 1811 Forest Park Drive	<b>Transaction ID:</b> 00419.C217106
	City State Zip Code Tupelo MS 38801	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Johnson Bailey Henderson	Occupation Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5470.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 33  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Donald R. Taylor

Mailing Address 15018 New Zion Road

City State Zip Code  
Crystal Springs MS 39059-8838

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1060.00

Date of Receipt  
MM / DD / YYYY  
03 / 08 / 2010

Transaction ID: 00316.C216261

Amount of Each Receipt this Period  
20.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Henry Barbour

Mailing Address 685 Woodland Drive

City State Zip Code  
Yazoo City MS 39194

FEC ID number of contributing federal political committee. **C**

Name of Employer Capitol Resources, LLC Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt  
MM / DD / YYYY  
03 / 08 / 2010

Transaction ID: 00316.C216270

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
James B. Furrh

Mailing Address 4450 Old Canton Rd. Ste. 205

City State Zip Code  
Jackson MS 39211

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Oil & Gas

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2010

Transaction ID: 00316.C215862

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1070.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 33  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Wayne Weidie

Mailing Address 3908 Cambridge St.

City Jackson State MS Zip Code 39216

FEC ID number of contributing federal political committee. **C**

Name of Employer Adams & Reese, LLP Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 08 / 2010  
Transaction ID: 00316.C216289  
Amount of Each Receipt this Period 20.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Jennie Lavner

Mailing Address P.O. Box 1506

City Oxford State MS Zip Code 38655

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt 03 / 24 / 2010  
Transaction ID: 00419.C216550  
Amount of Each Receipt this Period 385.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
James H. Wilson

Mailing Address Wilsons Termite  
206 A E. Government St.

City Brandon State MS Zip Code 39042

FEC ID number of contributing federal political committee. **C**

Name of Employer Wilsons Termite Occupation Pest Control

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 08 / 2010  
Transaction ID: 00316.C216296  
Amount of Each Receipt this Period 80.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 485.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 33  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Robert Robinson

Mailing Address 29 County Rd. 406

City State Zip Code  
Iuka MS 38852-8533

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 05 / 2010

**Transaction ID:** 00316.C216349

Amount of Each Receipt this Period  
500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Greg Horne

Mailing Address 104 Mission Ridge

City State Zip Code  
Madison MS 39110

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Distributor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 11 / 2010

**Transaction ID:** 00419.C217121

Amount of Each Receipt this Period  
100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Jerry Pickering

Mailing Address 2901 Highway 9 South

City State Zip Code  
Pontotoc MS 38863

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Engineering Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 11 / 2010

**Transaction ID:** 00419.C217108

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **850.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 33  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Joel Bomgar

Mailing Address 5624 Brentwood Dr.

City Jackson State MS Zip Code 39211

FEC ID number of contributing federal political committee. **C**

Name of Employer Bomgar Corporation Occupation Founder & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1075.00

Date of Receipt 03 / 08 / 2010

Transaction ID: 00316.C216322

Amount of Each Receipt this Period 25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Virginia Webb

Mailing Address 4088 Boxwood Circle

City Jackson State MS Zip Code 39211

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 11 / 2010

Transaction ID: 00419.C217114

Amount of Each Receipt this Period 500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Denise Doyle

Mailing Address 6505 Shore Drive

City Ocean Springs State MS Zip Code 39564

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 11 / 2010

Transaction ID: 00419.C217123

Amount of Each Receipt this Period 240.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 765.00

**TOTAL** This Period (last page this line number only) ..... ▶ 18815.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 33

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: 00419.E22446 Date of Disbursement
	Mailing Address P. O. Box 70503	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Charlotte State NC Zip Code 28272-0503	Amount of Each Disbursement this Period
	Purpose of Disbursement -Payroll Taxes	<input type="text" value="1631.78"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	-PAYROLL TAXES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Mississippi Employment Security Comm.	Transaction ID: 00419.E22464 Date of Disbursement
	Mailing Address P O Box 22781	<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City Jackson State MS Zip Code 39225-2781	Amount of Each Disbursement this Period
	Purpose of Disbursement -Payroll Taxes	<input type="text" value="1001.73"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	-PAYROLL TAXES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) ADP, Inc.	Transaction ID: 00419.E22442 Date of Disbursement
	Mailing Address 5680 New Northside Drive	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Atlanta State GA Zip Code 30328-	Amount of Each Disbursement this Period
	Purpose of Disbursement -Payroll Processing Fees	<input type="text" value="78.86"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	-PAYROLL PROCESSING FEES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

A.	Full Name (Last, First, Middle Initial) Mississippi State Tax Commission	Transaction ID: 00419.E22447 Date of Disbursement
	Mailing Address P. O. Box 960	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Jackson State MS Zip Code 39205-	Amount of Each Disbursement this Period
	Purpose of Disbursement -Payroll Taxes	<input type="text" value="212.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) Blue Cross & Blue Shield of MS	Transaction ID: 00419.E22461 Date of Disbursement
	Mailing Address P. O. Box 23082	<input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Jackson State MS Zip Code 39225-3082	Amount of Each Disbursement this Period
	Purpose of Disbursement -Health Insurance	<input type="text" value="520.11"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-HEALTH INSURANCE

C.	Full Name (Last, First, Middle Initial) Mamie C. Taylor	Transaction ID: 00419.E22426 Date of Disbursement
	Mailing Address 408 Timber Ridge Way	<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City Brandon State MS Zip Code 39047-	Amount of Each Disbursement this Period
	Purpose of Disbursement REIMBURSEMENT:SEE BELOW	<input type="text" value="124.88"/>
	Candidate Name	<input type="text" value=""/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT:SEE BELOW

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="856.99"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 19 / 33

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

A.

Full Name (Last, First, Middle Initial)  
Blue Cross Blue Shield of TN

Mailing Address 85 N. Danny Thomas Blvd.

City Memphis State TN Zip Code 38103-2398

Purpose of Disbursement  
-Health Insurance  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 00419.E22427  
Date of Disbursement

03 / 22 / 2010

Amount of Each Disbursement this Period

124.88

[MEMO ITEM]  
MEMO: -HEALTH INSURANCE

B.

Full Name (Last, First, Middle Initial)  
Mississippi State Tax Commission

Mailing Address P. O. Box 960

City Jackson State MS Zip Code 39205-

Purpose of Disbursement  
-Payroll Taxes  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 00222.E22353  
Date of Disbursement

03 / 16 / 2010

Amount of Each Disbursement this Period

462.00

-PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)  
Mississippi Employment Security Comm.

Mailing Address P O Box 22781

City Jackson State MS Zip Code 39225-2781

Purpose of Disbursement  
-Payroll Taxes  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 00419.E22448  
Date of Disbursement

03 / 31 / 2010

Amount of Each Disbursement this Period

57.38

-PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ▶

519.38

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 33

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: 00222.E22352 Date of Disbursement																			
	Mailing Address P. O. Box 70503	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	6		2	0	1	0												
	City Charlotte State NC Zip Code 28272-0503	Amount of Each Disbursement this Period																			
	Purpose of Disbursement -Payroll Taxes	<table border="1"><tr><td>3827.53</td></tr></table>	3827.53																		
3827.53																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		-PAYROLL TAXES																			

B.	Full Name (Last, First, Middle Initial) ADP, Inc.	Transaction ID: 00222.E22348 Date of Disbursement																			
	Mailing Address 5680 New Northside Drive	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	6		2	0	1	0												
	City Atlanta State GA Zip Code 30328-	Amount of Each Disbursement this Period																			
	Purpose of Disbursement -Payroll Processing Fees	<table border="1"><tr><td>78.86</td></tr></table>	78.86																		
78.86																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		-PAYROLL PROCESSING FEES																			

C.	Full Name (Last, First, Middle Initial) Mississippi Employment Security Comm.	Transaction ID: 00222.E22354 Date of Disbursement																			
	Mailing Address P O Box 22781	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	6		2	0	1	0												
	City Jackson State MS Zip Code 39225-2781	Amount of Each Disbursement this Period																			
	Purpose of Disbursement -Payroll Taxes	<table border="1"><tr><td>88.88</td></tr></table>	88.88																		
88.88																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		-PAYROLL TAXES																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>3995.27</td></tr></table>	3995.27
3995.27		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td>8084.01</td></tr></table>	8084.01
8084.01		

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Mamie C. Taylor <hr/> Mailing Address 408 Timber Ridge Way <hr/> City State Zip Code Brandon MS 39047- <hr/> Purpose of Disbursement FEA Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00419.E22444 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1354.49
	Category/ Type FEA SALARY
	FEA SALARY
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas Joe Harvey <hr/> Mailing Address 5 Stanford Court <hr/> City State Zip Code Jackson MS 39211- <hr/> Purpose of Disbursement FEA Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00222.E22349 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 849.58
	Category/ Type FEA SALARY
	FEA SALARY
<b>C.</b> Full Name (Last, First, Middle Initial) Mallory Lambert <hr/> Mailing Address 108 Novara Trail <hr/> City State Zip Code Madison MS 39110- <hr/> Purpose of Disbursement FEA Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00319.E22423 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 264.00
	Category/ Type FEA SALARY
	FEA SALARY

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2468.07

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 33

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas Joe Harvey <hr/> Mailing Address 5 Stanford Court <hr/> City Jackson State MS Zip Code 39211- <hr/> Purpose of Disbursement FEA Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00419.E22443 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2010 <hr/> Amount of Each Disbursement this Period 849.57 <hr/> FEA SALARY
<b>B.</b>	Full Name (Last, First, Middle Initial) Mallory Lambert <hr/> Mailing Address 108 Novara Trail <hr/> City Madison State MS Zip Code 39110- <hr/> Purpose of Disbursement FEA Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00316.E22338 Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2010 <hr/> Amount of Each Disbursement this Period 256.00 <hr/> FEA SALARY
<b>C.</b>	Full Name (Last, First, Middle Initial) Brad White <hr/> Mailing Address 1547 Jupiter Rd. <hr/> City Braxton State MS Zip Code 39044- <hr/> Purpose of Disbursement FEA Salary/Bonus Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00222.E22351 Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2010 <hr/> Amount of Each Disbursement this Period 5069.51 <hr/> FEA SALARY/BONUS

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

6175.08

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

A.	Full Name (Last, First, Middle Initial) Amanda Wells  Mailing Address 802 Vintage Pointe  City State Zip Code Brandon MS 39042-  Purpose of Disbursement FEA Salary  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00316.E22339 Date of Disbursement 03 / 16 / 2010  Amount of Each Disbursement this Period 500.00  FEA SALARY
B.	Full Name (Last, First, Middle Initial) Mallory Lambert  Mailing Address 108 Novara Trail  City State Zip Code Madison MS 39110-  Purpose of Disbursement FEA Salary  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00316.E22335 Date of Disbursement 03 / 05 / 2010  Amount of Each Disbursement this Period 248.00  FEA SALARY
C.	Full Name (Last, First, Middle Initial) Mamie C. Taylor  Mailing Address 408 Timber Ridge Way  City State Zip Code Brandon MS 39047-  Purpose of Disbursement FEA Salary  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00222.E22350 Date of Disbursement 03 / 16 / 2010  Amount of Each Disbursement this Period 1354.49  FEA SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2102.49
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

A.	Full Name (Last, First, Middle Initial) Brad White	Transaction ID: 00419.E22445 Date of Disbursement 03 / 31 / 2010
	Mailing Address 1547 Jupiter Rd.	Amount of Each Disbursement this Period 2128.11
	City Braxton State MS Zip Code 39044-	
	Purpose of Disbursement FEA Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA SALARY

B.	Full Name (Last, First, Middle Initial) Amanda Wells	Transaction ID: 00316.E22340 Date of Disbursement 03 / 16 / 2010
	Mailing Address 802 Vintage Pointe	Amount of Each Disbursement this Period 585.00
	City Brandon State MS Zip Code 39042-	
	Purpose of Disbursement FEA Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA SALARY

C.	Full Name (Last, First, Middle Initial) Mallory Lambert	Transaction ID: 00419.E22430 Date of Disbursement 03 / 26 / 2010
	Mailing Address 108 Novara Trail	Amount of Each Disbursement this Period 304.00
	City Madison State MS Zip Code 39110-	
	Purpose of Disbursement FEA Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3017.11</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>13762.75</b>

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
 Mississippi Republican Party

USE ONLY ONE SECTION, A or B

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X  Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

- Administrative  Generic Voter Drive  Public Communications Referencing Party Only

## SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE 26 / 33

NAME OF COMMITTEE (In Full)

**Mississippi Republican Party**

### RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

**2010 SUSTAINING MEMBERSHIP**

ACTIVITY IS:

 Fundraising       Direct Candidate Support

CHECK IF THE RATIO IS:

 New       Revised       Same as Previously Reported

FEDERAL %

98.00 %

NONFEDERAL %

2.00 %

Transaction ID:  
H2100215.J46

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Wilbur Stuckey			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6628 Lake Glen Dr.			Allocated Activity or Event Year-To-Date 43185.02	
City Jackson	State MS	Zip Code 39213-	Category/ Type 001	
Purpose of Disbursement: -Building Cleaning & Maintenance			Date MM / DD / YYYY 03 / 01 / 2010	
Activity or Event Identifier: ADMINISTRATION B 41			Transaction ID: H400316.E22332	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.50		212.50		250.00

<b>B. Full Name (Last, First, Middle Initial)</b> Peters Real Estate			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2906 N. State Ste. 201			Allocated Activity or Event Year-To-Date 44285.02	
City Jackson	State MS	Zip Code 39216-	Category/ Type 001	
Purpose of Disbursement: -Building Lease			Date MM / DD / YYYY 03 / 03 / 2010	
Activity or Event Identifier: ADMINISTRATION B 41			Transaction ID: H400316.E22333	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.00		935.00		1100.00

<b>C. Full Name (Last, First, Middle Initial)</b> U. S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address General Mail Facility			Allocated Activity or Event Year-To-Date 44785.02	
City Jackson	State MS	Zip Code 39201-	Category/ Type 001	
Purpose of Disbursement: -Postage			Date MM / DD / YYYY 03 / 08 / 2010	
Activity or Event Identifier: ADMINISTRATION B 41			Transaction ID: H400316.E22336	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.50		1572.50		1850.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Cellular South

Mailing Address  
P. O. Box 519

City	State	Zip Code
Meadville	MS	39653-0519

001

Purpose of Disbursement:  
-Cell Phone

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

46834.20

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	1	0

Transaction ID: H400319.E22407

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.50		93.51		110.01

**B. Full Name (Last, First, Middle Initial)**  
AT&T

Mailing Address  
P.O. Box 105262

City	State	Zip Code
Atlanta	GA	30348-5262

001

Purpose of Disbursement:  
-Telephone

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

48177.11

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	1	0

Transaction ID: H400319.E22408

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.37		387.41		455.78

**C. Full Name (Last, First, Middle Initial)**  
Exell Companies

Mailing Address  
P.O. Box 5393

City	State	Zip Code
Jackson	MS	39296-

001

Purpose of Disbursement:  
-Water/Office Supplies

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

47035.18

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	1	0

Transaction ID: H400319.E22410

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.99		33.95		39.94

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.86		514.87		605.73

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Office Depot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address Dept. 56-4600055510   P.O. Box 689020			Allocated Activity or Event Year-To-Date 46724.19																						
City Des Moines	State IA	Zip Code 50368-9020	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td>03</td><td></td><td></td><td>17</td><td></td><td>20</td><td>10</td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y		03			17		20	10		
M	M	/	D	D	/	Y	Y	Y	Y																
	03			17		20	10																		
Purpose of Disbursement: -Office Supplies			Category/ Type 001																						
Activity or Event Identifier: ADMINISTRATION B 41			Transaction ID: H400319.E22414																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.10		329.26		387.36

<b>B. Full Name (Last, First, Middle Initial)</b> Atmos Energy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 9001949			Allocated Activity or Event Year-To-Date 47539.73																						
City Louisville	State KY	Zip Code 40290-1949	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td>03</td><td></td><td></td><td>17</td><td></td><td>20</td><td>10</td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y		03			17		20	10		
M	M	/	D	D	/	Y	Y	Y	Y																
	03			17		20	10																		
Purpose of Disbursement: -Utilities			Category/ Type 001																						
Activity or Event Identifier: ADMINISTRATION B 41			Transaction ID: H400319.E22415																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.68		428.87		504.55

<b>C. Full Name (Last, First, Middle Initial)</b> Pennington & Trim Alarm			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 4374 Mangum Drive Suite C			Allocated Activity or Event Year-To-Date 46883.42																						
City Jackson	State MS	Zip Code 39232-2111	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td>03</td><td></td><td></td><td>17</td><td></td><td>20</td><td>10</td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y		03			17		20	10		
M	M	/	D	D	/	Y	Y	Y	Y																
	03			17		20	10																		
Purpose of Disbursement: -Building Security System			Category/ Type 001																						
Activity or Event Identifier: ADMINISTRATION B 41			Transaction ID: H400319.E22416																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.38		41.84		49.22

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
141.16		799.97		941.13

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
FP Mailing Solutions

Mailing Address  
P.O. Box 4510

City	State	Zip Code	001
Carol Stream	IL	60197-4510	

Purpose of Disbursement:  
-Postage Machine Reset Fees

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
47721.33

Date  /  /

Transaction ID: H400319.E22417

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.71		49.34		58.05

**B. Full Name (Last, First, Middle Initial)**  
A Complete Flag Source

Mailing Address  
4153 Northview Drive

City	State	Zip Code	001
Jackson	MS	39206-	

Purpose of Disbursement:  
-Office Supplies/Flags

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
46941.74

Date  /  /

Transaction ID: H400319.E22418

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.75		49.57		58.32

**C. Full Name (Last, First, Middle Initial)**  
All Metro Pest Services

Mailing Address  
108 Office Park Dr., Ste. A

City	State	Zip Code	001
Brandon	MS	39042-	

Purpose of Disbursement:  
-Pest Control

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
46995.24

Date  /  /

Transaction ID: H400319.E22419

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.03		45.47		53.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.49		144.38		169.87

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Beagle Bagel Cafe			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 898 Avery Boulevard			Allocated Activity or Event Year-To-Date 48501.15	
City Ridgeland	State MS	Zip Code 39157-	Date <input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: -Luncheon			Transaction ID: H400419.E22428	
Activity or Event Identifier: ADMINISTRATION B 41			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.61		275.43		324.04

<b>B. Full Name (Last, First, Middle Initial)</b> FP Mailing Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 4510			Allocated Activity or Event Year-To-Date 45285.02	
City Carol Stream	State IL	Zip Code 60197-4510	Date <input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: -Postage			Transaction ID: H400419.E22463	
Activity or Event Identifier: ADMINISTRATION B 41			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

<b>C. Full Name (Last, First, Middle Initial)</b> Southwest Publishing			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2600 NW Topeka Blvd.			Allocated Activity or Event Year-To-Date 13041.40	
City Topeka	State KS	Zip Code 66617-	Date <input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: -Postage			Transaction ID: H400419.E22429	
Activity or Event Identifier: 2010 SUSTAINING MEMBERSHIP			Category/Type 003	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1150.87		23.49		1174.36

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1274.48		723.92		1998.40

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)  
Key Merchant Services LLC

Mailing Address  
7207 Chapman Highway

City State Zip Code  
Knoxville TN 37920-6609

003  
Category/  
Type

Purpose of Disbursement:  
-Merchant Fees

Activity or Event Identifier:  
2010 SUSTAINING MEMBERSHIP

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
13041.40

Date 03 / 03 / 2010

Transaction ID: H400419.E22462

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.06		1.72		85.78

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.06		1.72		85.78

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
2069.85	4756.42	6826.27