

# 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 09 01 2006 through 09 30 2006

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 Tom Butchart

Signature of Treasurer Electronically Filed by Tom Butchart Date 10 20 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Mississippi Republican Party

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		27103.08
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	173174.56									
(c) Total Receipts (from Line 19) .....	46621.05	681966.61								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	219795.61	709069.69								
7. Total Disbursements (from Line 31) .....	47580.23	536854.31								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	172215.38	172215.38								
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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Mississippi Republican Party

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	16955.00	321690.00
(i) Itemized (use Schedule A) .....	21062.50	254877.24
(ii) Unitemized .....	38017.50	576567.24
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	10.00	390.00
(b) Political Party Committees .....	590.76	50475.09
(c) Other Political Committees (such as PACs) .....	38618.26	627432.33
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	10269.00
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	1241.51
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2.79	23.77
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	8000.00	43000.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	8000.00	43000.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	46621.05	681966.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	38621.05	638966.61

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	9820.52	108184.13
(ii) Non-Federal Share.....	9788.33	135728.84
(b) Other Federal Operating Expenditures.....	11280.80	120126.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	30889.65	364039.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	8618.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00
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	200.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	5200.00
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 .....	16690.58	153996.69
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	16690.58	153996.69
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	47580.23	536854.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	37791.90	401125.47

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	38618.26	627432.33
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	38618.26	622232.33
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	21101.32	228310.78
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	1241.51
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	21101.32	227069.27

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 92
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> C. D. Galey		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address P. O. Box 791		Transaction ID: 61018.C177277	
City Hattiesburg	State MS	Zip Code 39403-0791	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer The Galey Agency, Inc.	Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Betty Engle		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 915 Warren Street		Transaction ID: 60914.C176174	
City Pascagoula	State MS	Zip Code 39567-7581	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		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 ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Andrew Martinolich		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 599 Suebe Street		Transaction ID: 60914.C176175	
City Bay Saint Louis	State MS	Zip Code 39520-2426	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Self	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	145.00
<b>TOTAL</b> This Period (last page this line number only) .....	[ ]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
W. Scott Welch, III

Mailing Address 6223 Waterford Drive

City State Zip Code  
Jackson MS 39211-2910

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

Name of Employer Self Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 28 / 2006

Transaction ID: 61018.C177238

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Raymond Davis

Mailing Address 511 Bay Street

City State Zip Code  
Brookhaven MS 39601-4037

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 ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2006

Transaction ID: 60914.C176179

Amount of Each Receipt this Period  
25.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Sally Brown

Mailing Address 3111 W. Lake Drive

City State Zip Code  
Meridian MS 39307-4144

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 ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2006

Transaction ID: 60914.C176180

Amount of Each Receipt this Period  
25.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Quentin Stringer

Mailing Address 1807 Ridgeover Place

City State Zip Code  
Jackson MS 39211-6502

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 ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C177031

Amount of Each Receipt this Period  
200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Roy Moore

Mailing Address 1000 Whispering Valley Cove

City State Zip Code  
Oxford MS 38655

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 ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 13 / 2006

Transaction ID: 60914.C176856

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
William Dripps

Mailing Address 1404 - 32nd Street

City State Zip Code  
Laurel MS 39440-1415

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 ▼ 920.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 13 / 2006

Transaction ID: 60914.C176792

Amount of Each Receipt this Period  
300.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
William Mounger

Mailing Address 200 E. Capitol Street, #1601

City State Zip Code  
Jackson MS 39201

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

Name of Employer Self Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5170.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2006

Transaction ID: 60914.C176184

Amount of Each Receipt this Period  
10.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Murphy Adkins

Mailing Address P. O. Box 700

City State Zip Code  
Brandon MS 39043-0700

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

Name of Employer Rankin County Occupation Chancery Clerk

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2006

Transaction ID: 60914.C176185

Amount of Each Receipt this Period  
20.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Mary Bankston

Mailing Address 2588 Rue Palafox

City State Zip Code  
Biloxi MS 39531

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 ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2006

Transaction ID: 60914.C176194

Amount of Each Receipt this Period  
15.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	45.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Haley Barbour

Mailing Address 648 Dogwood Drive

City State Zip Code  
Yazoo City MS 39194

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

Name of Employer State Of Mississippi Occupation Governor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176195

Amount of Each Receipt this Period  
25.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Fred Beard

Mailing Address PO Box 9594

City State Zip Code  
Columbus MS 39705

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 ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176200

Amount of Each Receipt this Period  
25.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Edwin Brent

Mailing Address PO Box 8

City State Zip Code  
Greenville MS 38702

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 ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176214

Amount of Each Receipt this Period  
25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 75.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Gilbert Carmichael

Mailing Address 2009 - 39th Street

City State Zip Code  
Meridian MS 39305

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

Name of Employer Occupation  
M-K Rail Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176222

Amount of Each Receipt this Period  
30.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Cecil Cartwright

Mailing Address P. O. Box 227

City State Zip Code  
Yazoo City MS 39194-0227

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176224

Amount of Each Receipt this Period  
25.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Richard Clark, Jr.

Mailing Address #3 Cherokee Circle

City State Zip Code  
Hattiesburg MS 39401

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176228

Amount of Each Receipt this Period  
10.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	65.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 92
	<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) Thad Cochran		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006
Mailing Address 326 Russell Senate Office Building		<b>Transaction ID:</b> 60914.C176231
City State Zip Code Washington DC 20510	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer United States Senate	Occupation U. S. Senator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Harry Collins		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006
Mailing Address P. O. Box 215		<b>Transaction ID:</b> 60914.C176232
City State Zip Code Scott MS 38772	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Delta & Pine Land Company	Occupation V.P. Operation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Karl Cornwell		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006
Mailing Address 4644 East Drive		<b>Transaction ID:</b> 60914.C176235
City State Zip Code Belden MS 38826-9516	Amount of Each Receipt this Period 25.00	
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 ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	70.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 92
	<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) Irvin Cronin		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006
Mailing Address 1609 Linda Drive		<b>Transaction ID:</b> 60914.C176237
City State Zip Code Clinton MS 39056	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. <b>C</b>	Receipt	
Name of Employer Self Occupation Physician	Aggregate Year-to-Date ▼ 290.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Henry Damon		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006
Mailing Address 3811 29th Ave.		<b>Transaction ID:</b> 60914.C176238
City State Zip Code Meridian MS 39305	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>	Receipt	
Name of Employer AES Ltd. Engineers Occupation Engr/surveyor	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) Paul Eason		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006
Mailing Address 1505 Rogers Drive		<b>Transaction ID:</b> 60914.C176250
City State Zip Code Tupelo MS 38801-1321	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. <b>C</b>	Receipt	
Name of Employer Tupelo Occupation Alderman A/I	Aggregate Year-to-Date ▼ 140.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	50.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Paul Eason

Mailing Address 1505 Rogers Drive

City State Zip Code  
Tupelo MS 38801-1321

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

Name of Employer Occupation  
Tupelo Alderman A/I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 13 / 2006

Transaction ID: 60914.C176876

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Arthur Edwards

Mailing Address Route 1, Box 612

City State Zip Code  
Sardis MS 38666

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176252

Amount of Each Receipt this Period  
25.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Frank Genzer

Mailing Address 145 Saint Jude Street

City State Zip Code  
Biloxi MS 39530-3602

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

Name of Employer Occupation  
Self Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5225.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176268

Amount of Each Receipt this Period  
25.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
W. W. Gresham

Mailing Address P. O. Box 690

City State Zip Code  
Indianola MS 38751-0690

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

Name of Employer Occupation  
Gresham Petroleum Merchant

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 425.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176277

Amount of Each Receipt this Period  
25.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
G. O. Griffith, Jr.

Mailing Address 625 Oakland Terrace

City State Zip Code  
Alexandria VA 22302

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

Name of Employer Occupation  
Barbour, Griffith & Rogers Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176279

Amount of Each Receipt this Period  
25.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Jerry Gullledge

Mailing Address 104 Dampeer Street

City State Zip Code  
Crystal Springs MS 39059-2561

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

Name of Employer Occupation  
Self Physician

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 360.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176280

Amount of Each Receipt this Period  
40.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 92
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Alben Hopkins		Date of Receipt M M / D D / Y Y Y Y Y 09 / 08 / 2006
Mailing Address 2701 - 24th Avenue		Transaction ID: 60914.C176298
City Gulfport	State MS	Zip Code 39501
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10.00
Name of Employer Self	Occupation Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2140.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Boyce Keating		Date of Receipt M M / D D / Y Y Y Y Y 09 / 08 / 2006
Mailing Address 119 Faith Drive		Transaction ID: 60914.C176303
City Batesville	State MS	Zip Code 38606
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer N/A	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dewey Lane		Date of Receipt M M / D D / Y Y Y Y Y 09 / 08 / 2006
Mailing Address P. O. Box 1245		Transaction ID: 60914.C176311
City Pascagoula	State MS	Zip Code 39568-1245
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer N/A	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	55.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 92
	<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

Full Name (Last, First, Middle Initial) <b>A. Jeanne Luckey</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 200 Bellevue Circle		Transaction ID: 60914.C176317	
City State Zip Code Mobile AL 36608	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer N/A Occupation Homemaker	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Rita Martinson</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 1472 Highway 51		Transaction ID: 60914.C176327	
City State Zip Code Madison MS 39110-9095	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer State Of Miss. Occupation State Rep.	Aggregate Year-to-Date ▼ 200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Harold Melvin</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address P. O. Box 2661		Transaction ID: 60914.C176334	
City State Zip Code Laurel MS 39442-2661	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Self Employed Occupation Attorney	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 92
	<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)  
H. T. Miller, III

Mailing Address 291 W. Park Avenue

City State Zip Code  
Drew MS 38737-3344

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 ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176336

Amount of Each Receipt this Period  
25.00

Receipt

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

Mailing Address P. O. Box 537

City State Zip Code  
Brookhaven MS 39601-0537

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 ▼ 490.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176344

Amount of Each Receipt this Period  
40.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
C. Ray Phillips

Mailing Address 372 Sundial Road

City State Zip Code  
Madison MS 39110-8772

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

Name of Employer Self Occupation Investments

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176356

Amount of Each Receipt this Period  
25.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 92
	<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) Rubel Phillips Mailing Address P. O. Box 823 City State Zip Code Ridgeland MS 39158-0823 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60914.C176358 Amount of Each Receipt this Period 100.00 Receipt
Name of Employer Self Employed Occupation Self Employed Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1900.00		

<b>B.</b> Full Name (Last, First, Middle Initial) J. W. Pressler Mailing Address 807 Hickory Avenue City State Zip Code Mc Comb MS 39648-2213 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60914.C176362 Amount of Each Receipt this Period 30.00 Receipt
Name of Employer Self Occupation Self Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00		

<b>C.</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. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60914.C176365 Amount of Each Receipt this Period 15.00 Receipt
Name of Employer Self Employed Occupation Self Employed Investor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3385.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	145.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Michael Retzer

Mailing Address P. O. Box 4457

City Greenville State MS Zip Code 38704-4457

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

Name of Employer U. S. Government Occupation Ambassador

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5090.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 6

Transaction ID: 60914.C176366

Amount of Each Receipt this Period  
10.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
R. S. Runnels

Mailing Address P. O. Box 605

City Magee State MS Zip Code 39111-0605

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 ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 6

Transaction ID: 60914.C176379

Amount of Each Receipt this Period  
25.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
F. L. Sellers

Mailing Address 1502 Tanglewood Drive

City Clinton State MS Zip Code 39056-3648

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 ▼ 505.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 6

Transaction ID: 60914.C176385

Amount of Each Receipt this Period  
25.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 92
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

Full Name (Last, First, Middle Initial) <b>A.</b> William Van Devender		Date of Receipt M M / D D / Y Y Y Y Y 09 / 08 / 2006	
Mailing Address P. O. Box 5327		Transaction ID: 60914.C176412	
City Jackson	State MS	Zip Code 39296-5327	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Southern Timber Venture	Occupation Owner/manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1520.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Michael Wallace		Date of Receipt M M / D D / Y Y Y Y Y 09 / 08 / 2006	
Mailing Address 318 Hillview Drive		Transaction ID: 60914.C176416	
City Ridgeland	State MS	Zip Code 39157	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Phelps, Dunbar, Etc.	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Eugenia Wheeler		Date of Receipt M M / D D / Y Y Y Y Y 09 / 08 / 2006	
Mailing Address 235 Brae Burn Drive		Transaction ID: 60914.C176426	
City Jackson	State MS	Zip Code 39211-2505	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		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 ▼ 210.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 92
	<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

Full Name (Last, First, Middle Initial) <b>A. Wirt Yerger, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 129 Woodland Circle		<b>Transaction ID: 60914.C176439</b>	
City State Zip Code Jackson MS 39216	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Self Employed Occupation Insurance Agent	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mrs. Robert A. Montgomery</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006	
Mailing Address 2701 River Road Ext.		<b>Transaction ID: 61018.C177263</b>	
City State Zip Code Greenwood MS 38930-4943	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Kent Darsey</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address 1620 N Hills St		<b>Transaction ID: 60919.C177022</b>	
City State Zip Code Meridian MS 39305-1731	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Meridian Medical Assoc. Occupation Physician	Aggregate Year-to-Date ▼ 200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	225.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 92
	<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	

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)  
Gerald Bourgeois

Mailing Address 6309 Shore Drive

City State Zip Code  
Ocean Springs MS 39564-2528

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 ▼ 225.00

Date of Receipt  
09 / 28 / 2006

Transaction ID: 61018.C177237

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Mark Keenum

Mailing Address 3109 Circle Hill Road

City State Zip Code  
Alexandria VA 22305-1607

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

Name of Employer Senator Thad Ccohran Occupation Chief Of Staff

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
09 / 08 / 2006

Transaction ID: 60914.C176446

Amount of Each Receipt this Period  
25.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Terrell Wise

Mailing Address P. O. Box 12424

City State Zip Code  
Jackson MS 39211-6302

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  
09 / 08 / 2006

Transaction ID: 60914.C176449

Amount of Each Receipt this Period  
10.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	85.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Robert West, Sr.

Mailing Address 169 Bob West Drive

City State Zip Code  
Waynesboro MS 39367

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

Name of Employer Occupation  
West & Associates Insurance Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C176963

Amount of Each Receipt this Period  
250.00

Receipt

**B.** 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 Occupation  
Quitman Schools Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
305.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176452

Amount of Each Receipt this Period  
20.00

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 Occupation  
Quitman Schools Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
430.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 60914.C176858

Amount of Each Receipt this Period  
125.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>395.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
William Descher

Mailing Address 5709 Belle Fontaine Dr

City State Zip Code  
Ocean Springs MS 39564

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

Name of Employer Occupation  
McDonalds Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2006

Transaction ID: 60919.C177173

Amount of Each Receipt this Period  
200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Dorothy Turner

Mailing Address 2051 Turner Lane

City State Zip Code  
Crystal Springs MS 39059

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2006

Transaction ID: 60914.C176456

Amount of Each Receipt this Period  
15.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Alfred Price

Mailing Address 113 Swallow Drive

City State Zip Code  
Brandon MS 39042-6426

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2006

Transaction ID: 60914.C176937

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>315.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 92
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Leland Speed		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006	
Mailing Address P. O. Box 22728		Transaction ID: 61018.C177175	
City State Zip Code Jackson MS 39225-2728	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer MDA	Occupation Exec. Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Robert Brumfield		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006	
Mailing Address P. O. Box 886		Transaction ID: 60914.C176755	
City State Zip Code Mc Comb MS 39648-2024	Amount of Each Receipt this Period 100.00		
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 ▼ 200.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mark Garriga		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 121 Golden Pond Drive		Transaction ID: 60914.C176465	
City State Zip Code Madison MS 39110	Amount of Each Receipt this Period 20.00		
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 ▼ 330.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	620.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
R. T. Hardeman

Mailing Address 903 Robert E. Lee Drive

City Greenwood State MS Zip Code 38930-2434

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 ▼ 225.00

Date of Receipt  
09 / 08 / 2006

Transaction ID: 60914.C176468

Amount of Each Receipt this Period  
25.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Mrs. E. D. McLean

Mailing Address 1500 Church Street

City Columbia State MS Zip Code 39429-3208

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 ▼ 400.00

Date of Receipt  
09 / 13 / 2006

Transaction ID: 60914.C176880

Amount of Each Receipt this Period  
400.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Jean Brett

Mailing Address 31 Brett Ridge Road

City Laurel State MS Zip Code 39440-8911

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

Name of Employer Howard Industries Occupation Elec. Engr.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
09 / 19 / 2006

Transaction ID: 60919.C177079

Amount of Each Receipt this Period  
200.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	625.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Tom Flinn

Mailing Address P. O. Box 384

City State Zip Code  
Hernando MS 38632-0384

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

Name of Employer Self Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176475

Amount of Each Receipt this Period  
35.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Woodie Byars

Mailing Address P. O. Box 2584

City State Zip Code  
Columbus MS 39704-2584

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 ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2006

Transaction ID: 61018.C177221

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
J. W. Abernethy

Mailing Address 816 Pine Circle

City State Zip Code  
Starkville MS 39759-3732

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

Name of Employer Self Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2006

Transaction ID: 60914.C176720

Amount of Each Receipt this Period  
300.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	435.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
J. K. Stringer, Jr.  
Mailing Address 104 Boxwood Cove  
City State Zip Code  
Brandon MS 39042  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SkyTel Occupation Project Supervisor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006  
Transaction ID: 60914.C176479  
Amount of Each Receipt this Period  
25.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Frank Cannon  
Mailing Address 528 Mockingbird Drive  
City State Zip Code  
Long Beach MS 39560-3118  
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 ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006  
Transaction ID: 60914.C176480  
Amount of Each Receipt this Period  
10.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Thomas Milam  
Mailing Address P. O. Box 1247  
City State Zip Code  
Madison MS 39130-1247  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 13 / 2006  
Transaction ID: 60914.C176803  
Amount of Each Receipt this Period  
300.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 335.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Nelson Douglass

Mailing Address 411 Eastpoint Cove

City State Zip Code  
Madison MS 39110

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

Name of Employer Occupation  
Cooke Douglass Farr Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 60914.C176809

Amount of Each Receipt this Period  
200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Milton DAquila

Mailing Address P. O. Box 65

City State Zip Code  
Woodville MS 39669-0065

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 60914.C176917

Amount of Each Receipt this Period  
125.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
J. E. Fowler, Sr.

Mailing Address Suite 281, Highland Village  
4500 1-55, North

City State Zip Code  
Jackson MS 39211

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

Name of Employer Occupation  
Fowler Buick Automobile Dealer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2006

Transaction ID: 61018.C177259

Amount of Each Receipt this Period  
500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	825.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<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)  
John Arnold

Mailing Address 102 Raymond Street

City Starkville State MS Zip Code 39759-2851

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

Name of Employer Starkville Bus Tours Occupation Bus Tours

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2006

Transaction ID: 60914.C176483

Amount of Each Receipt this Period  
 15.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Margaret Hall

Mailing Address 109 Glen Eagle Road

City Oxford State MS Zip Code 38655-2611

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

Name of Employer Radiance Technology Occupation Business Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1730.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2006

Transaction ID: 60914.C176489

Amount of Each Receipt this Period  
 20.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Leslie Scales

Mailing Address 2905 W. River Road Ext.

City Greenwood State MS Zip Code 38930-9314

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 ▼ 415.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2006

Transaction ID: 60919.C176969

Amount of Each Receipt this Period  
 250.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	285.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 92
	<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)  
James Broome

Mailing Address 2600 Gates Rd.

City State Zip Code  
Bassfield MS 39421

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

Name of Employer Self Occupation  
Minister

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2006

Transaction ID: 60919.C177170

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
William D. Dennis

Mailing Address P. O. Box 6181

City State Zip Code  
Gulfport MS 39506-6181

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

Name of Employer Specialty Contractors Occupation  
Contractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2006

Transaction ID: 60914.C176497

Amount of Each Receipt this Period  
20.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Henry Tyler

Mailing Address 137 Bridgewater Crossing

City State Zip Code  
Ridgeland MS 39157

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 ▼ 240.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2006

Transaction ID: 60919.C177111

Amount of Each Receipt this Period  
120.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	240.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Danny Covington

Mailing Address 5203 Bradwood

City State Zip Code  
Springfield VA 22151

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

Name of Employer Postal Rate Comm. Occupation Commissioner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2006

Transaction ID: 60914.C176500

Amount of Each Receipt this Period  
10.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Bill Roberson

Mailing Address P. O. Box 362

City State Zip Code  
Hernando MS 38632-0362

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

Name of Employer North MS Utility Co. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2006

Transaction ID: 60914.C176867

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Ann Stanford

Mailing Address 261 Eastbrooke Street

City State Zip Code  
Jackson MS 39216-4716

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 ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
09 / 28 / 2006

Transaction ID: 61018.C177231

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	610.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 92
	<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) Carol Elvin Mailing Address 147 Edgewater Drive City State Zip Code Biloxi MS 39531-4722 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2006 <b>Transaction ID:</b> 60919.C177083 Amount of Each Receipt this Period 100.00 Receipt
Name of Employer Occupation La Boutique Owner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Howard Stringfellow Mailing Address P. O. Box 20334 City State Zip Code Jackson MS 39289 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006 <b>Transaction ID:</b> 60914.C176762 Amount of Each Receipt this Period 500.00 Receipt
Name of Employer Occupation Self Engineer Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		

<b>C.</b> Full Name (Last, First, Middle Initial) James McKee Mailing Address 4405 Paseo Delas Tortugas City State Zip Code Torrance CA 90505 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2006 <b>Transaction ID:</b> 60919.C177169 Amount of Each Receipt this Period 225.00 Receipt
Name of Employer Occupation N/A Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>825.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Bonnie Edwards

Mailing Address 2206 Gregory Boulevard

City State Zip Code  
Gulfport MS 39501

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

Name of Employer Occupation  
Stephen J. Maggio Secretary

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176519

Amount of Each Receipt this Period  
15.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Ellen Jernigan

Mailing Address 1610 Mt. Pleasant Road

City State Zip Code  
Hernando MS 38632

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

Name of Employer Occupation  
Hernando Alderman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176520

Amount of Each Receipt this Period  
20.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
David Hicks, Sr.

Mailing Address P. O. Box 1137

City State Zip Code  
Greenwood MS 38930

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

Name of Employer Occupation  
David Hicks Truckbrok Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C177016

Amount of Each Receipt this Period  
200.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	235.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Karl Hatten

Mailing Address 530 School St.

City State Zip Code  
Clarksdale MS 38614

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 ▼ 280.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176537

Amount of Each Receipt this Period  
20.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
John Taylor

Mailing Address 104 Hidden Heights

City State Zip Code  
Ridgeland MS 39157

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

Name of Employer JOAMCA Chemical Products Occupation Manufacturer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176543

Amount of Each Receipt this Period  
40.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Arthur Johnston

Mailing Address 3155 W. Tidewater Lane

City State Zip Code  
Madison MS 39110-8928

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

Name of Employer Madison County Occupation Chancery Clerk

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176544

Amount of Each Receipt this Period  
15.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<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)  
Eva Harris

Mailing Address 76 Eastbrooke Street

City State Zip Code  
Jackson MS 39216-4714

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 ▼ 1100.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2006

Transaction ID: 60919.C177063

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
William Sones

Mailing Address P.O. Box 889

City State Zip Code  
Brookhaven MS 39602

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

Name of Employer State Bank & Trust Co. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2006

Transaction ID: 60914.C176545

Amount of Each Receipt this Period  
25.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
W. Thad McLaurin

Mailing Address P. O. Box 1677

City State Zip Code  
Ridgeland MS 39158-1677

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

Name of Employer The Orchard Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 11 / 2006

Transaction ID: 60914.C176756

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1125.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Kathryn Arant

Mailing Address 3731 Highway 8

City Ruleville State MS Zip Code 38771

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

Name of Employer Self Occupation Farmer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176554

Amount of Each Receipt this Period  
10.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
J. Paul Janoush

Mailing Address P. O. Box 397

City Rosedale State MS Zip Code 38769-0397

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

Name of Employer Self Occupation Farmer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C177150

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Ike D. Hopper

Mailing Address Route 1, Box 145

City Porterville State MS Zip Code 39352-9739

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 ▼  
405.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176563

Amount of Each Receipt this Period  
25.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	285.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 92
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Joan Guido		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2006
Mailing Address 4702 Oak Forrest Dr		Transaction ID: 60914.C176850
City State Zip Code Hattiesburg MS 39402	Amount of Each Receipt this Period 115.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer N/A	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Noel Coward		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006
Mailing Address 10576 Cambrooke Cv		Transaction ID: 60914.C176575
City State Zip Code Collierville TN 38017-3600	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Cellular South	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Bill Hawks		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 1004 E. Capitol N. E.		Transaction ID: 60919.C177103
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Self	Occupation Farmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	645.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 / 92
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)  
Mrs. J. Dunbar Shields, Jr.  
Mailing Address P. O. Box 886  
City Natchez State MS Zip Code 39121  
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 ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006  
Transaction ID: 60914.C176818  
Amount of Each Receipt this Period  
100.00  
Receipt

**B.** 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 ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2006  
Transaction ID: 61018.C177276  
Amount of Each Receipt this Period  
250.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
James Cahill, Jr.  
Mailing Address P. O. Box 186  
City Senatobia State MS Zip Code 38668-0186  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Rentals  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2006  
Transaction ID: 60919.C177040  
Amount of Each Receipt this Period  
250.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 600.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Wesley Wilson

Mailing Address 14347 Lebanon Pinegrove Road

City State Zip Code  
Terry MS 39170

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  
M M / D D / Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C176964

Amount of Each Receipt this Period  
300.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Virginia Cargill

Mailing Address 1223 Main Street

City State Zip Code  
Hattiesburg MS 39401

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 ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 13 / 2006

Transaction ID: 60914.C176881

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Charles Stanton

Mailing Address 615 Oakleigh Avenue

City State Zip Code  
Gulfport MS 39507-2827

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

Name of Employer Info Requested Occupation Info Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 28 / 2006

Transaction ID: 61018.C177226

Amount of Each Receipt this Period  
120.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	520.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<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)  
Frances Myers

Mailing Address 1215 Delta St.

City State Zip Code  
Tunica MS 38676

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 ▼ 250.00

Date of Receipt  
09 / 19 / 2006

Transaction ID: 60919.C177038

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
James F. Watkins

Mailing Address P. O. Box 1012

City State Zip Code  
Laurel MS 39441

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 ▼ 220.00

Date of Receipt  
09 / 08 / 2006

Transaction ID: 60914.C176581

Amount of Each Receipt this Period  
10.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Joseph E. Stockwell

Mailing Address 1036 San Marcos Drive

City State Zip Code  
Starkville MS 39759-9701

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  
09 / 28 / 2006

Transaction ID: 61018.C177189

Amount of Each Receipt this Period  
150.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	260.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<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)  
Mary Ann McCarty

Mailing Address P. O. Box 547

City Magee State MS Zip Code 39111

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 ▼  
335.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	8	/	2	0	0	6

Transaction ID: 60914.C176586

Amount of Each Receipt this Period  
15.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Mary Ann McCarty

Mailing Address P. O. Box 547

City Magee State MS Zip Code 39111

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 ▼  
435.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	6

Transaction ID: 61018.C177265

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Mark Ledbetter

Mailing Address P. O. Box 833

City Tupelo State MS Zip Code 38801

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

Name of Employer WTVA-TV9 Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	6

Transaction ID: 61018.C177195

Amount of Each Receipt this Period  
200.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	315.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Betty Anderson

Mailing Address 279 Pat Holifield Road

City Soso State MS Zip Code 39480-5020

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 ▼ 290.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 0 8 / 2 0 0 6

Transaction ID: 60914.C176598

Amount of Each Receipt this Period  
 10.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
A. M. Zeidman

Mailing Address P.O. Box 1004

City Calhoun City State MS Zip Code 38916-1004

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

Name of Employer Lincoln Financial Advisors Occupation Registered Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 0 8 / 2 0 0 6

Transaction ID: 60914.C176601

Amount of Each Receipt this Period  
 10.00

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 ▼ 340.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 0 8 / 2 0 0 6

Transaction ID: 60914.C176615

Amount of Each Receipt this Period  
 10.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	30.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Larry Chiz

Mailing Address P.O. Box 677

City State Zip Code  
Shaw MS 38773

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

Name of Employer Self Occupation Business Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C177099

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Geraldine Donavan

Mailing Address 202 Weathersby Road

City State Zip Code  
Hattiesburg MS 39402

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 ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176636

Amount of Each Receipt this Period  
30.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Ashley Skellie

Mailing Address PO Box 38

City State Zip Code  
Long Beach MS 39560

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 ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C177139

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	580.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Shirley Hall

Mailing Address 269 Monterey Road

City State Zip Code  
Jackson MS 39218

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

Name of Employer Self Occupation Semi-Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 60914.C176802

Amount of Each Receipt this Period  
300.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Judy Batson

Mailing Address 106 Sandalwood Drive

City State Zip Code  
Madison MS 39110

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

Name of Employer Remax Realty Occupation Real Estate Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 60914.C176783

Amount of Each Receipt this Period  
120.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Gary Gilmore

Mailing Address 8828 Kipapa Way

City State Zip Code  
Diamondhead MS 39525-4205

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

Name of Employer Self Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176645

Amount of Each Receipt this Period  
10.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	430.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 47 / 92
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)  
Charles Pittman

Mailing Address P.O. Box 211

City State Zip Code  
Raymond MS 39154

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

Name of Employer  
State Of Mississippi

Occupation  
Constituent Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176649

Amount of Each Receipt this Period  
20.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Odie ETurbville

Mailing Address 6450 Hwy 493

City State Zip Code  
Meridian MS 39301

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 ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2006

Transaction ID: 61018.C177206

Amount of Each Receipt this Period  
75.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Marion Mclendon

Mailing Address 163 Burgundy Dr,

City State Zip Code  
Lucedale MS 39452

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 ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2006

Transaction ID: 61018.C177257

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	145.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 92
	<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

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

Mailing Address 112 Fawnwood Dr

City State Zip Code  
Brandon MS 39042

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 ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 60914.C176808

Amount of Each Receipt this Period  
200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Mike Armour

Mailing Address 2508 Savery Drive

City State Zip Code  
Tupelo MS 38801

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

Name of Employer Peoples Bank Occupation Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 590.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176657

Amount of Each Receipt this Period  
10.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Max Phillips

Mailing Address P.O. Box 335

City State Zip Code  
Taylorsville MS 39168

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 ▼ 290.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176658

Amount of Each Receipt this Period  
10.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	220.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Mrs. A.E. May

Mailing Address 1342 Eastover Dr.

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 ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2006

Transaction ID: 60914.C176741

Amount of Each Receipt this Period  
50.00

Receipt

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

Mailing Address 1635 Lelia Drive, Ste. 201

City State Zip Code  
Jackson MS 39216

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 ▼ 1670.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C176994

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Joel Clements

Mailing Address 107 Breckenridge Dr.

City State Zip Code  
Waynesboro MS 39367

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

Name of Employer First State Bank Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2006

Transaction ID: 60914.C176748

Amount of Each Receipt this Period  
150.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<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)  
William Middleton

Mailing Address P.O. Box 31

City State Zip Code  
Winona MS 38967

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 ▼  
200.00

Date of Receipt  
09 / 28 / 2006

Transaction ID: 61018.C177260

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Bob McGuire

Mailing Address 108 Summerwood Dr.

City State Zip Code  
Jackson MS 39208

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  
09 / 11 / 2006

Transaction ID: 60914.C176758

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Gerald Robuck

Mailing Address 761 Hwy 9 West

City State Zip Code  
Paris MS 38949

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  
09 / 19 / 2006

Transaction ID: 60919.C176986

Amount of Each Receipt this Period  
125.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>325.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Quinton Dickerson, III

Mailing Address 112 Lakeview Court

City State Zip Code  
Madison MS 39110

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 ▼ 305.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176671

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address 408 E Nelson Ave

City State Zip Code  
Alexandria VA 22301

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 ▼ 230.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176673

Amount of Each Receipt this Period  
20.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Anita Thompson

Mailing Address Route 1, Box 259

City State Zip Code  
Bailey MS 39320

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 ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176678

Amount of Each Receipt this Period  
10.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **50.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 92
	<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

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

Mailing Address Wilsons Termite  
206 A E. Government St.

City State Zip Code  
Brandon MS 39042

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

Name of Employer Occupation  
Wilsons Termite Pest Control

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
720.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2006

Transaction ID: 60914.C176685

Amount of Each Receipt this Period  
80.00

Receipt

**B.** 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 Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2006

Transaction ID: 60919.C177138

Amount of Each Receipt this Period  
120.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
D.O. Thoms

Mailing Address P.O. Box 528

City State Zip Code  
Richton MS 39476

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2006

Transaction ID: 60919.C177010

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Bill Brooks

Mailing Address 2227 Country Club Dr.

City State Zip Code  
Yazoo City MS 39194

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 ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 60914.C176916

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Don Gaddy

Mailing Address 5009 Kendall Ave.

City State Zip Code  
Gulfport MS 39507

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

Name of Employer Gulfport OB/Gyn Clinic Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2006

Transaction ID: 61018.C177252

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Darlene Lindsey

Mailing Address 228 Sinclair St.

City State Zip Code  
McComb MS 39648

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

Name of Employer Southwest MS Community College Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2006

Transaction ID: 61018.C177209

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Jesse Allen

Mailing Address P.O. Box 8119

City State Zip Code  
Biloxi MS 39535

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

Name of Employer Occupation  
Retired Air Force Retired - Usaf

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C177086

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Hilda Povall

Mailing Address P.O. Box 1199

City State Zip Code  
Cleveland MS 38732

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 360.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176691

Amount of Each Receipt this Period  
40.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Francis Rullan

Mailing Address 1613 Linden Place

City State Zip Code  
Jackson MS 39202

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

Name of Employer Occupation  
Div. of Medicaid Director of Public Relations

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 215.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60914.C176694

Amount of Each Receipt this Period  
20.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	310.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Tom Caldwell

Mailing Address 2 Old Augusta Lane

City State Zip Code  
Hattiesburg MS 39402

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

Name of Employer Retired Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 60914.C176789

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Willet Faulkner

Mailing Address 278 Aileen Drive

City State Zip Code  
Columbus MS 39705

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 ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2006

Transaction ID: 61018.C177223

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
J.W. Hodges

Mailing Address 1303 River Rd.

City State Zip Code  
Greenwood MS 38930

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 ▼ 280.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C177093

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Randle Wright

Mailing Address 176 Hwy 341 S.

City State Zip Code  
Vardaman MS 38878

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  
M M / D D / Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C177136

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
William Davis

Mailing Address 7140 County Road 95

City State Zip Code  
Water Valley MS 38965

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

Name of Employer Info Requested Occupation Info Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C177011

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Philip Dur

Mailing Address 3518 Montgomery Lane

City State Zip Code  
Pascagoula MS 39567-7504

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

Name of Employer Info Requested Occupation Info Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 11 / 2006

Transaction ID: 60914.C176759

Amount of Each Receipt this Period  
300.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 57 / 92
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

Full Name (Last, First, Middle Initial) <b>A. Michael Massengill</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 19 / 2006	
Mailing Address 111 Forest Gate Circle		<b>Transaction ID: 60919.C176991</b>	
City State Zip Code Ripley MS 38663	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) <b>B. William Killebrew</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 19 / 2006	
Mailing Address 1722 James Madison Drive		<b>Transaction ID: 60919.C177123</b>	
City State Zip Code Biloxi MS 39531-3302	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer N/A Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) <b>C. Charles Williams, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 19 / 2006	
Mailing Address 111 Bradford Green		<b>Transaction ID: 60919.C177024</b>	
City State Zip Code Madison MS 39110-9075	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer N/A Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	275.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 92
	<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

**A.** Full Name (Last, First, Middle Initial)  
Betsy Ross Hooper

Mailing Address 5125 Old Canton Rd. 209

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 ▼ 410.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2006

Transaction ID: 60914.C176757

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
David Munn

Mailing Address 9466 Three Rivers Rd.

City State Zip Code  
Gulfport MS 39503-4248

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

Name of Employer Lynn Munn Enterprises Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C177056

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Glade Woods

Mailing Address 101 Twisted Oad Drive

City State Zip Code  
Picayune MS 39466-3124

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

Name of Employer Info Requested Occupation Info Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2006

Transaction ID: 60919.C177076

Amount of Each Receipt this Period  
200.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	950.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	16955.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 / 92						
	(check only one)							
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

Full Name (Last, First, Middle Initial) <b>A.</b> Trent Lott For Mississippi		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 6	
Mailing Address 201 N. Union St. Ste. 250		<b>Transaction ID:</b> 60914.C176784	
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 279.80		
FEC ID number of contributing federal political committee. <b>C</b> C00219220		Receipt	
Name of Employer Occupation N/A N/A	Aggregate Year-to-Date ▼ 855.80		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Trent Lott For Mississippi		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6	
Mailing Address 201 N. Union St. Ste. 250		<b>Transaction ID:</b> 61018.C177201	
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 310.96		
FEC ID number of contributing federal political committee. <b>C</b> C00219220		Receipt	
Name of Employer Occupation N/A N/A	Aggregate Year-to-Date ▼ 1166.76		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	590.76
<b>TOTAL</b> This Period (last page this line number only) .....	590.76

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 60 / 92	
	(check only one)			
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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)  
Friends of Phil Bryant

Mailing Address P. O. Box 5141

City	State	Zip Code
Brandon	MS	39047

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

Name of Employer N/A	Occupation N/A
-------------------------	-------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	6

Transaction ID: 60914.C176576

Amount of Each Receipt this Period  
10.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	10.00

**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)

<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

Full Name (Last, First, Middle Initial) <b>A. Blue Cross &amp; Blue Shield of MS</b>		Transaction ID: 60907.E11761 Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address P. O. Box 23082		Amount of Each Disbursement this Period 1687.12	
City Jackson State MS Zip Code 39225-3082	Purpose of Disbursement -Health Insurance	001 Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

-HEALTH INSURANCE

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		Transaction ID: 60919.E11806 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address P. O. Box 70503		Amount of Each Disbursement this Period 2618.06	
City Charlotte State NC Zip Code 28272-0503	Purpose of Disbursement -Payroll Taxes	001 Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 00		

-PAYROLL TAXES

Full Name (Last, First, Middle Initial) <b>C. Bluebonnet Life Insurance Company</b>		Transaction ID: 61018.E11829 Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address P. O. Box 22867		Amount of Each Disbursement this Period 42.75	
City Jackson State MS Zip Code 39225-2867	Purpose of Disbursement -Insurance	001 Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

-INSURANCE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4347.93
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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

Full Name (Last, First, Middle Initial) <b>A. Mississippi State Tax Commission</b>		Transaction ID: 61018.E11844	
Mailing Address P. O. Box 960		Date of Disbursement	
City Jackson State MS Zip Code 39205-		09 / 29 / 2006	
Purpose of Disbursement -Payroll Taxes		Amount of Each Disbursement this Period	
Candidate Name		370.96	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: MN District: 00		Other (specify) ▼	
		Category/Type: 001	
		-PAYROLL TAXES	

Full Name (Last, First, Middle Initial) <b>B. ADP, Inc.</b>		Transaction ID: 60919.E11798	
Mailing Address 5680 New Northside Drive		Date of Disbursement	
City Atlanta State GA Zip Code 30328-		09 / 15 / 2006	
Purpose of Disbursement -Payroll Processing Fees		Amount of Each Disbursement this Period	
Candidate Name		78.05	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: MN District: 00		Other (specify) ▼	
		Category/Type: 001	
		-PAYROLL PROCESSING FEES	

Full Name (Last, First, Middle Initial) <b>C. Butchart, Ellzey &amp; Assoc., PC</b>		Transaction ID: 60907.E11768	
Mailing Address P. O. Box 629		Date of Disbursement	
City Canton State MS Zip Code 39046-0629		09 / 01 / 2006	
Purpose of Disbursement -Accounting Fees		Amount of Each Disbursement this Period	
Candidate Name		1015.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:		Other (specify) ▼	
		Category/Type: 001	
		-ACCOUNTING FEES	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1464.01
<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 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

Full Name (Last, First, Middle Initial) <b>A. Mamie C. Taylor</b>		Transaction ID: 60907.E11765 Date of Disbursement MM / DD / YYYY 09 / 01 / 2006	
Mailing Address 408 Timber Ridge Way		Amount of Each Disbursement this Period 114.56	
City Brandon	State MS	Zip Code 39047-	REIMBURSEMENT: SEE BELOW
Purpose of Disbursement REIMBURSEMENT: SEE BELOW		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Blue Cross Blue Shield of TN</b>		Transaction ID: 60907.E11766 Date of Disbursement MM / DD / YYYY 09 / 01 / 2006	
Mailing Address 85 N. Danny Thomas Blvd.		Amount of Each Disbursement this Period 114.56	
City Memphis	State TN	Zip Code 38103-2398	[MEMO ITEM] MEMO: -HEALTH INSURANCE
Purpose of Disbursement -Health Insurance		Category/ Type 001	
Candidate Name		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 00			

Full Name (Last, First, Middle Initial) <b>C. ADP, Inc.</b>		Transaction ID: 61018.E11835 Date of Disbursement MM / DD / YYYY 09 / 29 / 2006	
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 78.05	
City Atlanta	State GA	Zip Code 30328-	-PAYROLL PROCESSING FEES
Purpose of Disbursement -Payroll Processing Fees		Category/ Type 001	
Candidate Name		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	192.61
<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 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

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		<b>Transaction ID:</b> 61018.E11843 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address P. O. Box 70503		Amount of Each Disbursement this Period 2623.10
City Charlotte State NC Zip Code 28272-0503	Category/ Type 001 -PAYROLL TAXES	
Purpose of Disbursement -Payroll Taxes Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Blue Cross &amp; Blue Shield of MS</b>		<b>Transaction ID:</b> 61018.E11826 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address P. O. Box 23082		Amount of Each Disbursement this Period 1687.12
City Jackson State MS Zip Code 39225-3082	Category/ Type 001 -HEALTH INSURANCE	
Purpose of Disbursement -Health Insurance 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) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mississippi State Tax Commission</b>		<b>Transaction ID:</b> 60919.E11807 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address P. O. Box 960		Amount of Each Disbursement this Period 370.26
City Jackson State MS Zip Code 39205-	Category/ Type 001 -PAYROLL TAXES	
Purpose of Disbursement -Payroll Taxes Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4680.48
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

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<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

<b>A. Nathan Wells</b> Full Name (Last, First, Middle Initial) Mailing Address 790 Highpoint Drive City Byram State MS Zip Code 39272-		<b>Transaction ID:</b> 60907.E11757 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Purpose of Disbursement REIMBURSEMENT: SEE BELOW Candidate Name		Amount of Each Disbursement this Period 553.02
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>B. Blue Cross &amp; Blue Shield of MS</b> Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 23082 City Jackson State MS Zip Code 39225-3082		<b>Transaction ID:</b> 60907.E11756 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Purpose of Disbursement -Health Insurance Candidate Name		Amount of Each Disbursement this Period 553.02
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: -HEALTH INSURANCE

<b>C. Bluebonnet Life Insurance Company</b> Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 22867 City Jackson State MS Zip Code 39225-2867		<b>Transaction ID:</b> 60907.E11770 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Purpose of Disbursement -Insurance Candidate Name		Amount of Each Disbursement this Period 42.75
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) ▼	-INSURANCE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>595.77</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>11280.80</b>

**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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Edna K. Apostle</b>		Transaction ID: 61018.E11836 Date of Disbursement 09 / 29 / 2006	
Mailing Address 974 Bayridge Drive		Amount of Each Disbursement this Period 1224.33	
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) <b>B. Natalie Cole</b>		Transaction ID: 61018.E11837 Date of Disbursement 09 / 29 / 2006	
Mailing Address 250 Jacks Place		Amount of Each Disbursement this Period 447.78	
City Brandon State MS Zip Code 39047-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) <b>C. T.J. Harvey</b>		Transaction ID: 60919.E11801 Date of Disbursement 09 / 15 / 2006	
Mailing Address 5 Stanford Court		Amount of Each Disbursement this Period 889.98	
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	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) ..... ▶	2562.09
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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 67 / 92

<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

Full Name (Last, First, Middle Initial) <b>A. Edna K. Apostle</b>		Transaction ID: 60919.E11799 Date of Disbursement MM / DD / YYYY 09 / 15 / 2006	
Mailing Address 974 Bayridge Drive		Amount of Each Disbursement this Period 1224.32	
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) <b>B. Nathan Wells</b>		Transaction ID: 60919.E11805 Date of Disbursement MM / DD / YYYY 09 / 15 / 2006	
Mailing Address 790 Highpoint Drive		Amount of Each Disbursement this Period 1193.23	
City Byram State MS Zip Code 39272-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) <b>C. Nathan Wells</b>		Transaction ID: 61018.E11842 Date of Disbursement MM / DD / YYYY 09 / 29 / 2006	
Mailing Address 790 Highpoint Drive		Amount of Each Disbursement this Period 1193.23	
City Byram State MS Zip Code 39272-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	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) ..... ▶	3610.78
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Richard C. Lacey</b>		<b>Transaction ID:</b> 60919.E11803 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 15 / 2006
Mailing Address 120 North Congress St. Apt. 1102		Amount of Each Disbursement this Period 1197.61
City Jackson State MS Zip Code 39201-	FEA SALARY	
Purpose of Disbursement FEA SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Richard C. Lacey</b>		<b>Transaction ID:</b> 61018.E11840 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 29 / 2006
Mailing Address 120 North Congress St. Apt. 1102		Amount of Each Disbursement this Period 1197.61
City Jackson State MS Zip Code 39201-	FEA SALARY	
Purpose of Disbursement FEA SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Arnold S. Hederman</b>		<b>Transaction ID:</b> 61018.E11839 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 29 / 2006
Mailing Address 2240 Bellingrath Rd.		Amount of Each Disbursement this Period 2308.62
City Jackson State MS Zip Code 39211-	FEA SALARY	
Purpose of Disbursement FEA SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4703.84</b>
<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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Arnold S. Hederman</b>		<b>Transaction ID:</b> 60919.E11802 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 2240 Bellingrath Rd.		Amount of Each Disbursement this Period 2308.62
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY

Full Name (Last, First, Middle Initial) <b>B. T.J. Harvey</b>		<b>Transaction ID:</b> 61018.E11838 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 5 Stanford Court		Amount of Each Disbursement this Period 889.98
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY

Full Name (Last, First, Middle Initial) <b>C. Mamie C. Taylor</b>		<b>Transaction ID:</b> 61018.E11841 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 408 Timber Ridge Way		Amount of Each Disbursement this Period 1091.68
City Brandon State MS Zip Code 39047-	Purpose of Disbursement FEA SALARY Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	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) ..... ▶	4290.28
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Mamie C. Taylor</b>		<b>Transaction ID: 60919.E11804</b>	
Mailing Address 408 Timber Ridge Way		Date of Disbursement 09 / 15 / 2006	
City Brandon	State MS	Zip Code 39047-	Amount of Each Disbursement this Period 1091.68
Purpose of Disbursement FEA SALARY		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEA SALARY
State: MN	District: 00		

Full Name (Last, First, Middle Initial) <b>B. Natalie Cole</b>		<b>Transaction ID: 60919.E11800</b>	
Mailing Address 250 Jacks Place		Date of Disbursement 09 / 15 / 2006	
City Brandon	State MS	Zip Code 39047-	Amount of Each Disbursement this Period 431.91
Purpose of Disbursement FEA SALARY		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEA SALARY
State: MN	District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1523.59</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>16690.58</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)**(Seperate 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)
- X  Senate-Only Election Year (21% Federal)
- \_\_\_\_\_ 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 72 / 92

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

**2006 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:  
H2160106.J18

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Mississippi Republican Party

NAME OF ACCOUNT Mississippi Rep P. O. Box 60	DATE OF RECEIPT M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 8000.00
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		8000.00
i) Total Administrative .....		Transaction ID: H360907.C176170
ii) Generic Voter Drive .....		Transaction ID:
iii) Exempt Activities .....		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative) .....	8000.00
TOTAL This Period (Generic Voter Drive) .....	0.00
TOTAL This Period (Exempt Activities) .....	0.00
TOTAL This Period (Direct Fundraising) .....	0.00
TOTAL This Period (Direct Candidate Support) .....	0.00
TOTAL This Period (Public Communications Referring Only to Party) .....	0.00
TOTAL This Period (Total Amount Transferred) .....	8000.00

**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> Nathan Wells			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 790 Highpoint Drive			Allocated Activity or Event Year-To-Date 154070.79	
City Byram	State MS	Zip Code 39272-	Date M M / D D / Y Y Y Y 09 / 01 / 2006	
Purpose of Disbursement: 002-Mileage to Biloxi & Philadelphi			Category/ Type 002	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H460907.E11758	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.66		115.34		146.00

<b>B. Full Name (Last, First, Middle Initial)</b> Cingular Wireless			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 31488			Allocated Activity or Event Year-To-Date 153914.84	
City Tampa	State FL	Zip Code 33631-	Date M M / D D / Y Y Y Y 09 / 01 / 2006	
Purpose of Disbursement: 001-Cell Phone			Category/ Type 001	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H460907.E11759	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.34		69.00		87.34

<b>C. Full Name (Last, First, Middle Initial)</b> Cingular Wireless			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 31488			Allocated Activity or Event Year-To-Date 153827.50	
City Tampa	State FL	Zip Code 33631-	Date M M / D D / Y Y Y Y 09 / 01 / 2006	
Purpose of Disbursement: 001-Cell Phone			Category/ Type 001	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H460907.E11760	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.22		68.56		86.78

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.22		252.90		320.12

**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> Amerimail Direct			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 39			Allocated Activity or Event Year-To-Date 153560.47	
City Jackson	State MS	Zip Code 39205-0039	Category/ Type 001	
Purpose of Disbursement: 001-Office Supplies			Date 09 / 01 / 2006	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H460907.E11762	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.36		46.49		58.85

<b>B. Full Name (Last, First, Middle Initial)</b> Office Products Plus, Inc.			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 13827			Allocated Activity or Event Year-To-Date 153740.72	
City Jackson	State MS	Zip Code 39236-	Category/ Type 001	
Purpose of Disbursement: 001-Office Supplies			Date 09 / 01 / 2006	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H460907.E11763	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.99		90.26		114.25

<b>C. Full Name (Last, First, Middle Initial)</b> Richard C. Lacey			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 120 North Congress St. Apt. 1102			Allocated Activity or Event Year-To-Date 154146.79	
City Jackson	State MS	Zip Code 39201-	Category/ Type 002	
Purpose of Disbursement: 002-Mileage to Hattiesburg			Date 09 / 01 / 2006	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H460907.E11764	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.96		60.04		76.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.31		196.79		249.10

**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	Category/Type
Meadville	MS	39653-0519	001

Purpose of Disbursement:  
001-Cell Phone

Activity or Event Identifier:  
ADMINISTRATION B 3

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  
153626.47

Date  /  /   
**Transaction ID:** H460907.E11769

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.86		52.14		66.00

**B. Full Name (Last, First, Middle Initial)**  
Regina Stuckey

Mailing Address  
6628 Lake Glen

City	State	Zip Code	Category/Type
Jackson	MS	39213-	001

Purpose of Disbursement:  
001-Building Cleaning & Maintenance

Activity or Event Identifier:  
ADMINISTRATION B 3

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  
156055.10

Date  /  /   
**Transaction ID:** H460914.E11779

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

**C. Full Name (Last, First, Middle Initial)**  
Allied Waste Service

Mailing Address  
Jackson 1035 Old Brandon Road

City	State	Zip Code	Category/Type
Flowood	MS	39232-	001

Purpose of Disbursement:  
001-Garbage Pickup

Activity or Event Identifier:  
ADMINISTRATION B 3

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  
154624.69

Date  /  /   
**Transaction ID:** H460914.E11780

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.43		80.64		102.07

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
87.79		330.28		418.07

**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)**  
Beasley Lawn

Mailing Address  
P.O. Box 1775

City	State	Zip Code	001
Brandon	MS	39043-	

Purpose of Disbursement:  
001-Lawn Care

Activity or Event Identifier:  
ADMINISTRATION B 3

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  
154522.62

Date 09 / 08 / 2006  
Transaction ID: H460914.E11781

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

**B. Full Name (Last, First, Middle Initial)**  
Lanier Worldwide, Inc.

Mailing Address  
P.O. Box 105533

City	State	Zip Code	001
Atlanta	GA	30348-5533	

Purpose of Disbursement:  
001-Copier Lease

Activity or Event Identifier:  
ADMINISTRATION B 3

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  
154422.62

Date 09 / 08 / 2006  
Transaction ID: H460914.E11782

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.40		151.97		192.37

**C. Full Name (Last, First, Middle Initial)**  
Pennington & Trim Alarm

Mailing Address  
4374 Mangum Drive Suite C

City	State	Zip Code	001
Jackson	MS	39232-2111	

Purpose of Disbursement:  
001-Building Security System

Activity or Event Identifier:  
ADMINISTRATION B 3

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  
154230.25

Date 09 / 08 / 2006  
Transaction ID: H460914.E11784

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.53		65.93		83.46

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.93		296.90		375.83

**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> Platinum Plus for Business			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 15469			Allocated Activity or Event Year-To-Date 155549.37	
City Wilmington	State DE	Zip Code 19886-5469	Date MM / DD / YYYY 09 / 08 / 2006	
Purpose of Disbursement: Credit Card: See Below			Category/Type 	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H460914.E11785	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
172.55		649.10		821.65

<b>B. Full Name (Last, First, Middle Initial)</b> Best Buy #336			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 County Line Road			Allocated Activity or Event Year-To-Date 38.51	
City Jackson	State MS	Zip Code 39211-	Date MM / DD / YYYY 09 / 08 / 2006	
Purpose of Disbursement: 001-Office Supplies			Category/Type 001	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM] 001-Office Supplies			Transaction ID: H461018.E11854	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.09		30.42		38.51

<b>C. Full Name (Last, First, Middle Initial)</b> Kroger			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 4910 I-55 North			Allocated Activity or Event Year-To-Date 119.78	
City Jackson	State MS	Zip Code 39206-	Date MM / DD / YYYY 09 / 08 / 2006	
Purpose of Disbursement: 001-Meeting Supplies			Category/Type 001	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM] 001-Meeting Supplies			Transaction ID: H461018.E11851	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.15		94.63		119.78

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
172.55		649.10		821.65

**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

**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)**  
Shell Station

Mailing Address  
No. 57525881207 1263 High Street

City	State	Zip Code
Jackson	MS	39211-

001

Purpose of Disbursement:  
001-Meeting Supplies

Category/  
Type

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

5.55

Activity or Event Identifier:  
ADMINISTRATION B 3

**[MEMO ITEM]**001-Meeting Supplies

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	8	/	2	0	0	6

Transaction ID: H461018.E11853

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.17

4.38

5.55

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

Mailing Address  
602 South State Street

City	State	Zip Code
Jackson	MS	39201-

002

Purpose of Disbursement:  
002-Gasoline

Category/  
Type

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

42.00

Activity or Event Identifier:  
ADMINISTRATION B 3

**[MEMO ITEM]**002-Gasoline

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	8	/	2	0	0	6

Transaction ID: H461018.E11852

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.82

33.18

42.00

**C. Full Name (Last, First, Middle Initial)**  
Guitar Center

Mailing Address  
1189 East County Line Road

City	State	Zip Code
Jackson	MS	39211-1836

001

Purpose of Disbursement:  
001-Office and Computer Supplies

Category/  
Type

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

524.25

Activity or Event Identifier:  
ADMINISTRATION B 3

**[MEMO ITEM]**001-Office and Computer Supplies

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	8	/	2	0	0	6

Transaction ID: H461018.E11855

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

110.09

414.16

524.25

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

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**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)**  
Hampton Inn

Mailing Address  
100 Brooks Road

City	State	Zip Code	Category/ Type
Holly Springs	MS	38635-	002

Purpose of Disbursement:  
002-Lodging

Activity or Event Identifier:  
ADMINISTRATION B 3  
**[MEMO ITEM]**002-Lodging

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  
91.56

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	8	/	2	0	0	6

  
**Transaction ID:** H461018.E11856

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.23		72.33		91.56

**B. Full Name (Last, First, Middle Initial)**  
Platinum Plus for Business

Mailing Address  
P.O. Box 15469

City	State	Zip Code	Category/ Type
Wilmington	DE	19886-5469	

Purpose of Disbursement:  
Credit Card: See Below

Activity or Event Identifier:  
ADMINISTRATION B 3

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  
155805.10

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	8	/	2	0	0	6

  
**Transaction ID:** H460914.E11786

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.70		202.03		255.73

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

Mailing Address  
904A East Fortification

City	State	Zip Code	Category/ Type
Jackson	MS	39211-	001

Purpose of Disbursement:  
001-Meeting Supplies

Activity or Event Identifier:  
ADMINISTRATION B 3  
**[MEMO ITEM]**001-Meeting Supplies

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  
60.75

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	8	/	2	0	0	6

  
**Transaction ID:** H461018.E11859

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.76		47.99		60.75

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.70		202.03		255.73

**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

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

Mailing Address  
955 North State Street

City State Zip Code  
Jackson MS 39201-

001

Purpose of Disbursement:  
001-Meeting Supplies

Category/  
Type

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

54.99

Activity or Event Identifier:  
ADMINISTRATION B 3

**[MEMO ITEM]**001-Meeting Supplies

Date  /  /

Transaction ID: H461018.E11860

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.55		43.44		54.99

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

Mailing Address  
403-A Jackson Street

City State Zip Code  
Ridgeland MS 39157-

002

Purpose of Disbursement:  
002-Gasoline

Category/  
Type

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

76.01

Activity or Event Identifier:  
ADMINISTRATION B 3

**[MEMO ITEM]**002-Gasoline

Date  /  /

Transaction ID: H461018.E11858

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.96		60.05		76.01

**C. Full Name (Last, First, Middle Initial)**  
Shell Oil

Mailing Address  
Store # 57528819600

City State Zip Code  
Clarksdale MS 38614-

002

Purpose of Disbursement:  
002-Gasoline

Category/  
Type

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

63.98

Activity or Event Identifier:  
ADMINISTRATION B 3

**[MEMO ITEM]**002-Gasoline

Date  /  /

Transaction ID: H461018.E11857

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.44		50.54		63.98

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**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

<b>A. Full Name (Last, First, Middle Initial)</b> Platinum Plus for Business			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 15469			Allocated Activity or Event Year-To-Date 154727.72		
City Wilmington	State DE	Zip Code 19886-5469	Date <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Credit Card: See Below			Transaction ID: H460914.E11787		
Activity or Event Identifier: ADMINISTRATION B 3			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.64		81.39		103.03

<b>B. Full Name (Last, First, Middle Initial)</b> Shell Station			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 No. 57525881207   1263 High Street			Allocated Activity or Event Year-To-Date 30.01		
City Jackson	State MS	Zip Code 39211-	Date <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: 002-Gasoline			Transaction ID: H461018.E11849		
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]002-Gasoline			Category/Type 002		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.30		23.71		30.01

<b>C. Full Name (Last, First, Middle Initial)</b> Everyday Gourmet			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 1625 E. County Line Rd.			Allocated Activity or Event Year-To-Date 73.02		
City Jackson	State MS	Zip Code 39211-	Date <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: 002-Gifts			Transaction ID: H461018.E11850		
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]002-Gifts			Category/Type 002		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.33		57.69		73.02

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.64		81.39		103.03

**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)**  
Discover Business Services

Mailing Address  
P. O. Box 52145

City	State	Zip Code	001
Phoenix	AZ	85072-	

Purpose of Disbursement:  
001-Merchant Fees

Activity or Event Identifier:  
ADMINISTRATION B 3

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  
153924.79

Date 09 / 01 / 2006  
Transaction ID: H460914.E11788

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.09		7.86		9.95

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

Mailing Address  
7207 Chapman Highway

City	State	Zip Code	001
Knoxville	TN	37920-6609	

Purpose of Disbursement:  
001-Merchant Fees

Activity or Event Identifier:  
ADMINISTRATION B 3

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  
153501.62

Date 09 / 01 / 2006  
Transaction ID: H460914.E11789

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.05		37.83		47.88

**C. Full Name (Last, First, Middle Initial)**  
Community Bank - Brandon

Mailing Address  
P. O. Box 1869

City	State	Zip Code	001
Brandon	MS	39042-	

Purpose of Disbursement:  
001-Bank Charges

Activity or Event Identifier:  
ADMINISTRATION B 3

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  
156064.10

Date 09 / 12 / 2006  
Transaction ID: H460914.E11790

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.89		7.11		9.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.03		52.80		66.83

**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)**  
U. S. Postmaster

Mailing Address  
General Mail Facility

City	State	Zip Code	Category/Type
Jackson	MS	39201-	001

Purpose of Disbursement: 001-Postage Buisness Reply	Category/Type
	001

Activity or Event Identifier:  
ADMINISTRATION B 3

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

157759.13

Date  /  /

Transaction ID: H460919.E11791

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

**B. Full Name (Last, First, Middle Initial)**  
Nathan Wells

Mailing Address  
790 Highpoint Drive

City	State	Zip Code	Category/Type
Byram	MS	39272-	002

Purpose of Disbursement: 002-Milage to Gulfport	Category/Type
	002

Activity or Event Identifier:  
ADMINISTRATION B 3

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

157885.53

Date  /  /

Transaction ID: H460919.E11792

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.54		99.86		126.40

**C. Full Name (Last, First, Middle Initial)**  
Richard C. Lacey

Mailing Address  
120 North Congress St. Apt. 1102

City	State	Zip Code	Category/Type
Jackson	MS	39201-	002

Purpose of Disbursement: 002-Milage to Greenville & Winona	Category/Type
	002

Activity or Event Identifier:  
ADMINISTRATION B 3

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

158069.53

Date  /  /

Transaction ID: H460919.E11793

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.64		145.36		184.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
170.18		640.22		810.40

**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

<b>A. Full Name (Last, First, Middle Initial)</b> Entergy			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 8105			Allocated Activity or Event Year-To-Date 157259.13	
City Baton Rouge	State LA	Zip Code 70891-8105	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 001-Electricity			Transaction ID: H460919.E11794	
Activity or Event Identifier: ADMINISTRATION B 3				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
250.96		944.07		1195.03

<b>B. Full Name (Last, First, Middle Initial)</b> Richard C. Lacey			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 120 North Congress St. Apt. 1102			Allocated Activity or Event Year-To-Date 158246.33	
City Jackson	State MS	Zip Code 39201-	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 002-Mileage to Tupelo			Transaction ID: H461018.E11811	
Activity or Event Identifier: ADMINISTRATION B 3				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.13		139.67		176.80

<b>C. Full Name (Last, First, Middle Initial)</b> StorageMax Downtown			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 304 South State Street			Allocated Activity or Event Year-To-Date 159004.05	
City Jackson	State MS	Zip Code 39201-	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 001-Storage			Transaction ID: H461018.E11814	
Activity or Event Identifier: ADMINISTRATION B 3				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.20		173.80		220.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
334.29		1257.54		1591.83

**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 158323.33	
City Des Moines	State IA	Zip Code 50368-9020	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 001-Office Supplies			Transaction ID: H461018.E11815	
Activity or Event Identifier: ADMINISTRATION B 3				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.17		60.83		77.00

<b>B. Full Name (Last, First, Middle Initial)</b> Nathan Wells			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 790 Highpoint Drive			Allocated Activity or Event Year-To-Date 160304.95	
City Byram	State MS	Zip Code 39272-	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 002-Mileage to Greenwood & Tupelo			Transaction ID: H461018.E11816	
Activity or Event Identifier: ADMINISTRATION B 3				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.38		182.02		230.40

<b>C. Full Name (Last, First, Middle Initial)</b> Regions Commercial Loans			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 Department 2521   P.O. Box 2153			Allocated Activity or Event Year-To-Date 164974.30	
City Birmingham	State AL	Zip Code 35287-	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 001-Building Mortgage			Transaction ID: H461018.E11817	
Activity or Event Identifier: ADMINISTRATION B 3				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
726.67		2733.64		3460.31

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
791.22		2976.49		3767.71

**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> BellSouth			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 105262			Allocated Activity or Event Year-To-Date 165476.73	
City Atlanta	State GA	Zip Code 30348-5262	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 001-Telephone			Transaction ID: H461018.E11818	
Activity or Event Identifier: ADMINISTRATION B 3			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.51		396.92		502.43

<b>B. Full Name (Last, First, Middle Initial)</b> Marlin Leasing Corp.			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 13604			Allocated Activity or Event Year-To-Date 161328.99	
City Philadelphia	State PA	Zip Code 19101-3604	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 001-Postage Meter			Transaction ID: H461018.E11819	
Activity or Event Identifier: ADMINISTRATION B 3			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.55		216.49		274.04

<b>C. Full Name (Last, First, Middle Initial)</b> Beasley Lawn			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 1775			Allocated Activity or Event Year-To-Date 161428.99	
City Brandon	State MS	Zip Code 39043-	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 001-Lawn Care			Transaction ID: H461018.E11820	
Activity or Event Identifier: ADMINISTRATION B 3			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
184.06		692.41		876.47

**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)**  
Southern Coffee Co.

Mailing Address  
P.O. Box 626

City	State	Zip Code	001
Winona	MS	38967-	

Purpose of Disbursement:  
001-Water/Office Supplies

Activity or Event Identifier:  
ADMINISTRATION B 3

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  
165606.41

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	9	/	2	0	0	6

Transaction ID: H461018.E11821

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.23		102.45		129.68

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

Mailing Address  
P. O. Box 519

City	State	Zip Code	001
Meadville	MS	39653-0519	

Purpose of Disbursement:  
001-Cell Phone

Activity or Event Identifier:  
ADMINISTRATION B 3

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  
158716.95

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	9	/	2	0	0	6

Transaction ID: H461018.E11822

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.66		310.96		393.62

**C. Full Name (Last, First, Middle Initial)**  
Cingular Wireless

Mailing Address  
P.O. Box 31488

City	State	Zip Code	001
Tampa	FL	33631-	

Purpose of Disbursement:  
001-Cell Phone

Activity or Event Identifier:  
ADMINISTRATION B 3

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  
159178.72

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	9	/	2	0	0	6

Transaction ID: H461018.E11823

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.46		69.43		87.89

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
128.35		482.84		611.19

**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)**  
Cingular Wireless

Mailing Address  
P.O. Box 31488

City State Zip Code  
Tampa FL 33631-

001

Purpose of Disbursement:  
001-Cell Phone

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 3

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

159090.83

Date 09 / 29 / 2006

Transaction ID: H461018.E11824

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.22		68.56		86.78

**B. Full Name (Last, First, Middle Initial)**  
ITC Deltacom

Mailing Address  
P. O. Box 740597

City State Zip Code  
Atlanta GA 30374-0597

001

Purpose of Disbursement:  
001-Long Distance

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 3

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

160074.55

Date 09 / 29 / 2006

Transaction ID: H461018.E11825

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
188.12		707.71		895.83

**C. 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:  
001-Cell Phone

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 3

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

158784.05

Date 09 / 29 / 2006

Transaction ID: H461018.E11830

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.09		53.01		67.10

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
220.43		829.28		1049.71

**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> Brads Green Machine			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 41			Allocated Activity or Event Year-To-Date 161513.99	
City Star	State MS	Zip Code 39167-	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 001-Lawn Maintenance			Transaction ID: H461018.E11831	
Activity or Event Identifier: ADMINISTRATION B 3			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.85		67.15		85.00

<b>B. Full Name (Last, First, Middle Initial)</b> Frontier Strategies, LLC			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 13292			Allocated Activity or Event Year-To-Date 161054.95	
City Jackson	State MS	Zip Code 39236-3292	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 001-Internet Website			Transaction ID: H461018.E11832	
Activity or Event Identifier: ADMINISTRATION B 3			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.50		592.50		750.00

<b>C. Full Name (Last, First, Middle Initial)</b> Community Bank - Brandon			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 1869			Allocated Activity or Event Year-To-Date 165656.53	
City Brandon	State MS	Zip Code 39042-	Date <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 001-Bank Charges			Transaction ID: H461018.E11896	
Activity or Event Identifier: ADMINISTRATION B 3			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.53		39.59		50.12

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
185.88		699.24		885.12

**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> Steve Brown Direct Mail			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 731 Divot Drive			Allocated Activity or Event Year-To-Date 50796.99	
City State Zip Code Fernley NV 89408-	Category/ Type 003		Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 003- 2006 Sustaining Direct Mail			Transaction ID: H460919.E11795	
Activity or Event Identifier: 2006 SUSTAINING MEMBERSHIP				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1018.28		20.78		1039.06

<b>B. 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 P.O. Box 376			Allocated Activity or Event Year-To-Date 50796.99	
City State Zip Code Topeka KS 66601-0376	Category/ Type 003		Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 003-2006 Sustaining Direct Mail			Transaction ID: H460919.E11796	
Activity or Event Identifier: 2006 SUSTAINING MEMBERSHIP				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6098.74		124.46		6223.20

<b>C. Full Name (Last, First, Middle Initial)</b> FLS-DCI			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 2401 W. Brehrend Drive Suite 7			Allocated Activity or Event Year-To-Date 50796.99	
City State Zip Code Phoenix AZ 85027-	Category/ Type 003		Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 003-Phone Bank Sustaining Membershi			Transaction ID: H461018.E11827	
Activity or Event Identifier: 2006 SUSTAINING MEMBERSHIP				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.87		1.53		76.40

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7191.89		146.77		7338.66

**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)  
FLS-DCI

Mailing Address  
2401 W. Brehrend Drive Suite 7

City	State	Zip Code
Phoenix	AZ	85027-

003

Purpose of Disbursement:  
003-Phone Bank Sustaining Membershi

Category/  
Type

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

50796.99

Activity or Event Identifier:  
2006 SUSTAINING MEMBERSHIP

Date 09 / 29 / 2006

Transaction ID: H461018.E11828

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.05		1.35		67.40

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.05		1.35		67.40

**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
9820.52	9788.33	19608.85