PAGE 1 / 16

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Auti	nonzea Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
REMEMBER MISSISS	SIPPI		
ADDRESS (number and street)	PO BOX 4142		
▼ Check if different			
than previously reported. (ACC)	BILOXI		MS 39535 - -
2. FEC IDENTIFICATION N	UMBER ▼ CIT	YA	STATE ▲ ZIP CODE ▲
C C00641423		S THIS NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb Report Due On:	20 (M2) May 20 (N	(Non-Election Year Only)
(a) Quarterly Reports:	Mar	20 (M3) Jun 20 (M	(Non-Election Year Only)
April 15 Quarterly Report (O1)	20 (M4) Jul 20 (M7	
July 15 Quarterly Report (O2) PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (YE) Electio	n on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d) 30-Day POST-Election Report for the:	X General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)		n on 11 06	in the State of
5. Covering Period 1	0 18 2018	through 11	M / D D / Y Y Y Y Y 2018
I certify that I have examined the	his Report and to the best of BARNETT, TOMMY, , ,	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure	er		
Signature of Treasurer	RNETT, TOMMY, , ,	[Electronically Filed]	Date 12 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, error	neous, or incomplete information	n may subject the person signing	g this Report to the penalties of 52 U.S.C. § 30109
Office Use Only			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name REMEMBER MISSISSIPPI 10 18 2018 11 26 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 852112.67 January 1, 2018 (b) Cash on Hand at 33804.31 Beginning of Reporting Period..... 5500.00 824144.90 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 1676257.57 39304.31 6(a) and 6(c) for Column B)..... 39304.31 1676257.57 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 0.00 0.00 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

REMEMBER MISSISSIPPI

Report Covering the Period: From: 10 18 2018 To: 11 26 20										
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date							
11.	Contributions (other than loans) From:									
	(a) Individuals/Persons Other									
	Than Political Committees (i) Itemized (use Schedule A)	5250.00	818700.00							
	(ii) Unitemized	250.00	5444.90							
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	5500.00	824144.90							
	(b) Political Party Committees	0.00	0.00							
	(c) Other Political Committees (such as PACs)	0.00	0.00							
	(d) Total Contributions (add Lines									
_	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5500.00	824144.90							
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00							
3.	All Loans Received	0.00	0.00							
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00							
	(Refunds, Rebates, etc.)									
ŝ.	(Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00							
	to Federal Candidates and Other									
	Political Committees	0.00	0.00							
.	Other Federal Receipts									
3.	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00							
	(a) Non-Federal Account	2.22								
	(from Schedule H3)	0.00	0.00							
	(b) Levin Funds (from Schedule H5)	0.00	0.00							
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00							

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: —— (a) Allocated Federal/Non-Federal		Caloniaa Tour to Date
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	36469.31	909481.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	36469.31	909481.37
Transfers to Affiliated/Other Party	4 4	
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures (use Schedule E)	2835.00	766776 20
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	2835.00	766776.20
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	4 4	
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
(444 2.1100 25(4), (5), 4.114 (5), 1.111111	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated 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		
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	39304.31	1676257.57
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	39304.31	
	39304.31	1676257.57

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	5500.00	824144.90
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5500.00	824144.90
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	36469.31	909481.37
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	36469.31	909481.37

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

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

F	OR	LINE	NU	MBER	:	PAGE		6	OF		16
(check only one)											
	X	11a		11b		11c		12			
		13		14		15		16			17

	y information copied from such Reports and Sta for commercial purposes, other than using the n		
$\overline{\ }$	NAME OF COMMITTEE (In Full) REMEMBER MISSISSIPPI	,,	
Α.	Full Name of Individual (Last, First, Middle Initial CAMPANERO, ROBERT, F, , Mailing Address 2607 CHESTERFIELD AVE City BALTIMORE FEC ID number of contributing federal political committee. Name of Employer (for Individual) INFORMATION REQUESTED	State Zip Code MD 21213 C Occupation (for Individual) INFORMATION REQUESTED	Date of Receipt 11 05 2018 Transaction ID: SA11AI.4903 Amount of Each Receipt this Period 250.00 Memo Item CONTRIBUTION
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
3.	Full Name of Individual (Last, First, Middle Initia JOYCE, CHARLES, P, , Mailing Address PO BOX 483 City WELLSVILLE FEC ID number of contributing federal political committee. Name of Employer (for Individual) OTIS EASTERN SERVICE LLC Receipt For: Primary General Other (specify) ▼	State Zip Code NY 14895 C Occupation (for Individual) PRESIDENT Aggregate Year-to-Date ▼ 5000,00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
S	Mailing Address City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify)	State Zip Code C Occupation (for Individual) Aggregate Year-to-Date	Amount of Each Receipt this Period Memo Item
SI	UBTOTAL of Receipts This Page (optional)	>	5250.00
T	OTAL This Period (last page this line number or	nly)	5250.00

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 7 OF 1								
ITEMIZED DISBURSEMENTS		parate schedule(s) n category of the	(check on	<i>-</i>	23	26 27					
	Detailed	d Summary Page	28a		28c	29 30b					
Any information copied from such Reports and Stat	I ements may	not be sold or use	ed by any per	son for the pu	rpose of sc	l diciting contribution	 1S				
or for commercial purposes, other than using the na											
NAME OF COMMITTEE (In Full)											
REMEMBER MISSISSIPPI											
Full Name (Last, First, Middle Initial)											
A. ANEDOT				Date of D	isbursemen	it					
Mailing Address FFFF LILLTON AVE STE 406				M M M		2019	1				
Mailing Address 5555 HILTON AVE STE 106				10 23 2018							
City	State	Zip Code		FEC Identification Number							
BATON ROUGE Purpose of Disbursement	LA	70808									
CREDIT CARD MERCHANT FEE				C							
Candidate Name			Category/			SB21B.4921 oursement this Per	riod				
			Type	Amount	Lacii Disc	Autsement this i er	lou				
						9.90	_				
Senate President	Primary	General									
State: District:	Other (sp	ecity) \blacktriangledown		Memo) Item						
Full Name (Last, First, Middle Initial)											
B. ANEDOT				Date of D	isbursemen	ıt					
				M M / D D / Y Y Y Y Y							
Mailing Address 5555 HILTON AVE STE 106				11	23	2018					
City	FFC Iden	tification Nu	ımber								
BATON ROUGE Purpose of Disbursement	LA	70808									
CREDIT CARD MERCHANT FEE				C							
Candidate Name			Category/	Transaction ID : SB21B.4928 Amount of Each Disbursement this Period							
			Type	Amount of Each Disbursement this Feriod							
	ement For:				7	1.30					
Senate President	Primary Other (sp	General									
State: District:	Other (sp	ecity)		Memo	Item						
Full Name (Last, First, Middle Initial)											
C. BAYVIEW CONSULTING INC				Date of D	isbursemen	ıt					
Mailing Address PO BOX 4162				MM	26	2018	1				
maining / learness O BOX 4102											
City	State	Zip Code		FEC Iden	tification Nu	ımber					
BILOXI Purpose of Disbursement	MS	39535									
POLITICAL STRATEGY CONSULTING				C	action ID :	SB21B.4918					
Candidate Name			Category/			oursement this Per	riod				
Office Sought: House Disburs	omost Fam		Type			9342.52	\neg				
Office Sought: House Disburs Senate	ement For: Primary	General			7	3042.02					
President	Other (sp			N4=:	ltom						
State: District:				Memo	, item						
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TEMIZED DISBONSEMENTS		category of the Summary Page	I ` _	×	21b	22		23	26		27		
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NAME OF COMMITTEE (In Full) REMEMBER MISSISSIPPI													
Full Name (Last, First, Middle Initial) A- BILLS, CHERAMIE, , , Mailing Address PO BOX 1636					Date of Disbursement 10 22 2018								
	2												
City FLORENCE Purpose of Disbursement	State MS	Zip Code 39073				FEC Id	lentif	ication	Numb	er	-		
TRAVEL Candidate Name		[Categ	gory	7	Tra Amoun			ID : SB Disburs			Period	d
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General	Тур	ре				,			306.	35	
State: District:	Other (open	√ Villa (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)				Me	emo	Item					
Full Name (Last, First, Middle Initial) BILLS, CHERAMIE, , , Mailing Address PO BOX 1636						Date o	f Dis	burse 02	D /		2018	Y	
FLORENCE Purpose of Disbursement POLITICAL STRATEGY CONSULTING/TRAVEL	State MS	Zip Code 39073		_]	FEC Id			Numb	Ξ	4912		
Office Sought: House Senate President State: Disburser	nent For: Primary Other (spec	General	Categ Typ			Amoun	t of	,	Disburs	emer	nt this 4093.		d
Full Name (Last, First, Middle Initial) BILLS, CHERAMIE, , , Mailing Address PO BOX 1636						Date o	_	burse	D /		ү Т ү 2018	Y	
	State	Zip Code				FEC Id	lontif				2018	_	
FLORENCE Purpose of Disbursement POLITICAL STRATEGY CONSULTING	MS	39073	_	-	7	С				_			
Candidate Name	/				ID : SB Disburs			Period	d				
Office Sought: House Disburser	nent For: Primary Other (spec	General cify) ▼				Me	emo	Item			3500.	00	
SUBTOTAL of Disbursements This Page (optional)					<u> </u>	ļ.	-			-	7899	.38]
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Form/Schedule: SB21B Transaction ID: SB21B.4909

NO ADDITIONAL ITEMIZATION REQUIRED

Form/Schedule: SB21B Transaction ID: SB21B.4912

NO ADDITIONAL ITEMIZATION REQUIRED

SCHEDULE B (FEC Form 3X)			FOR I	LINE I	NUMBER:		P/	AGE 10 O	F 16		
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NAME OF COMMITTEE (In Full)											
REMEMBER MISSISSIPPI											
Full Name (Last, First, Middle Initial)											
A. COMMUNITY BANK						f Disburs		V V	V		
Mailing Address 323 E 3RD ST					10 22 2018						
,	State MS	Zip Code			FEC Identification Number						
FOREST Purpose of Disbursement	IVIO	39074									
BANK FEE			г		C						
Candidate Name			v/			n ID : SB2 n Disburse	21B.4919 ement this P	eriod			
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	ment For:							15.00)		
Senate	Primary	General									
State: District:	Other (spe	еспу) ▼			Me	mo Item					
Full Name (Last, First, Middle Initial)											
B. COMMUNITY BANK					Date of	f Disburs	ement				
				10 25 2018							
Mailing Address 323 E 3RD ST		Zip Code									
City FOREST	State MS		FEC Id	entificati	on Numbe	er					
Purpose of Disbursement	IVIO	39074	_	C							
BANK FEE					Transaction ID : SB21B.4922						
Candidate Name		Category/				Amount of Each Disbursement this Per					
	Туре				45.00						
	ment For:	Conoral				15.00	,				
Senate President	Primary Other (spe	General									
State: District:	Cirior (opt	561.77			Me	mo Item					
Full Name (Last, First, Middle Initial)											
C. COMMUNITY BANK					Date of	f Disburs	ement				
Mailing Address 323 E 3RD ST					M M M		05 /	2018	Y		
Mailing Address 525 L SKD 31					1			2010	_		
City	State	Zip Code			FEC Id	entificati	on Numbe	er			
FOREST Purpose of Diaburgoment	MS	39074									
Purpose of Disbursement BANK FEE					C						
Candidate Name			Categor	v/			n ID : SB2	21B.4925 ement this P	eriod		
			Type	y,	71110411	t or Laoi	Diobaroc	omone uno i	Cilou		
Office Sought: House Disburse	ment For:					- 4		30.00)		
Senate	Primary	General									
State: District:	Other (spe	ecity) 🔻			Me	mo Item					
Giate. District.					_						
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	NAME OF COMMITTEE (In Full)											
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Α.	COMMUNITY BANK					Date of Disbursement						
	Mailing Address 323 E 3RD ST				11 06 / Y Y Y Y Y Y							
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	Purpose of Disbursement BANK FEE				7 I I	C						
	Candidate Name				41.			D : SB21				
	Canada Harro			Category/ Type	/ _	Amount o	ıt ⊨ach [Jisbursem	ent this Pe	eriod		
	Office Sought: House Disburser	ment For:		.,,,,,	\dashv				15.00			
	Senate	Primary	General		"		7			_		
	President	Other (spe	cify) ▼			Mem	o Item					
_	State: District:											
D	Full Name (Last, First, Middle Initial)					Data of F	Nichuroon	mont				
В.	COMMUNITY BANK					Date of Disbursement						
	Mailing Address 323 E 3RD ST					11	08		2018			
			T									
	City STOREST	State MS	Zip Code 39074			FEC Ider	tification	Number				
	Purpose of Disbursement	IVIO	39074	_ 1	C							
	BANK FEE	Category/				Transaction ID : SB21B.4927						
	Candidate Name					Amount of Each Disbursement this P						
	0/7	Туре			_				45.00			
	Office Sought: House Disburser Senate	ment For:	Gonoral				7		15.00			
	President	•	Primary General Other (specify)									
	State: District:	Other (ope	ony)			Mem	o Item					
_	Full Name (Last, First, Middle Initial)											
C.	COMMUNITY BANK					Date of D	Disbursen	nent				
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	City	State	Zip Code		\dashv	FFO !!	4:4: a - 4'	NI b				
	FOREST	MS	39074			FEC Ider	uncation	Number				
	Purpose of Disbursement BANK FEE				7 I	C						
					71.	Tran	saction I	ID : SB21I	B.4930			
	Candidate Name			Category/	/ _	Amount o	f Each [Disbursem	ent this Pe	eriod		
	Office Sought: House Disburser	ment For:		Type	$-\parallel$				15.00			
	Senate	Primary	General				7			_		
	President	Other (spe	cify) ▼			Mem	o Item					
	State: District:					IVICIII	o itom					
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8	SUBTOTAL of Disbursements This Page (optional)				•		7		45.00	J		
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SCHEDULE B (FEC Form 3X)			FOR LII	NE NUMBEF	l:	PAGE 12 OF 16					
ITEMIZED DISBURSEMENTS		parate schedule(s) h category of the	I `	only one)							
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or for commercial purposes, other than using the na											
NAME OF COMMITTEE (In Full)											
REMEMBER MISSISSIPPI											
Full Name (Last, First, Middle Initial)											
A. COMPLIANCE CONSULTING OF	VIRGII	NIA		Date of	of Disburse	ement					
Mailing Address PO BOX 365				11	/ D	8 2018					
City	State	Zip Code		FEC Identification Number							
MCLEAN	VA	22101									
Purpose of Disbursement COMPLIANCE CONSULTING											
Candidate Name			Oata namil			ID: SB21B.4917 Disbursement this Period					
			Category/ Type	Amour	it of Lacif	Disbursement this Fellou					
Office Sought: House Disburs	ement For:			T L.	1 45 1	3850.00					
Senate	Primary	General			,	,					
State: President State:	Other (sp	pecity) \blacktriangledown		M	emo Item						
Full Name (Last, First, Middle Initial)											
B. HERNANDEZ, KRISTINA, , ,				Date of	of Disburse	ement					
				M = N	M = M / D = D / Y = Y = Y						
Mailing Address 332 CRESTHAVEN PL				11 02 2018							
City SIMPSONVILLE	State SC	Zip Code 29681		FEC I	dentificatio	n Number					
Purpose of Disbursement	30	29001		C							
MEDIA CONSULTING				Transaction ID : SB21B.4913 Amount of Each Disbursement this Peri							
Candidate Name			Category/								
Office Sought: House Disburs	omant Fari	Туре			3000.00						
Senate Disputs	ement For: Primary	General			3000.00						
President	Other (sp										
State: District:				IVI	emo Item						
Full Name (Last, First, Middle Initial)											
C. HERNANDEZ, KRISTINA, , ,					of Disburse						
Mailing Address 332 CRESTHAVEN PL				11		7 2018					
City	State	Zip Code		EEC I	dentification	n Number					
SIMPSONVILLE	SC	29681		_	aeriinicatio	II I VUITIDEI					
Purpose of Disbursement MEDIA CONSULTING					ansaction	ID : SB21B.4916					
Candidate Name	Category/										
Office Sought: House Disburs	ement For:		Туре	-		600.00					
Senate	Primary	General			7	4					
President	Other (sp	pecify) ▼		М	Memo Item						
State: District:	_										
SUBTOTAL of Disbursements This Page (optional)						7450.00					
305101AL of Dispulsements This Page (optional)			••••••	-		45 1 1 45 1					
TOTAL This Period (last page this line number only	v)										

SCHEDULE B (FEC Form 3X)			FOR LI	NE NUMBER	R:	PAGE 13 OF 16				
ITEMIZED DISBURSEMENTS		parate schedule(s) h category of the	(orlook	only one)						
		d Summary Page		1b 22 8a 28b	23 28c	26 27 29 30b				
Any information copied from such Reports and Sta	tements may	/ not be sold or us								
or for commercial purposes, other than using the n										
NAME OF COMMITTEE (In Full)										
REMEMBER MISSISSIPPI										
Full Name (Last, First, Middle Initial)										
A. INTUIT				Date	of Disburs	ement				
				M 10		00 / Y I Y I Y I Y				
Mailing Address 2700 COAST AVE				10		22 2018				
City	State	Zip Code		FFC	FEC Identification Number					
MOUNTAIN VIEW Purpose of Disbursement	CA	94043								
SUBSCRIPTION										
Candidate Name			Category/			n ID : SB21B.4920 n Disbursement this Period				
		Type	_							
Office Sought: House Disburs Senate	sement For: Primary	General				24.00				
President	Other (sp				lemo Item					
State: District:				IV	iemo item					
Full Name (Last, First, Middle Initial)		Data of Diahuraamant								
B. INTUIT				Date	Date of Disbursement					
Mailing Address 2700 COAST AVE				11		23 2018				
	City State Zip Code									
City MOUNTAIN VIEW	FEC	dentification	on Number							
Purpose of Disbursement		94043		C	C					
SUBSCRIPTION Candidate Name				Transaction ID : SB21B.4929 Amount of Each Disbursement this Period						
Candidate Name			Category/ Type							
Office Sought: House Disburs	sement For:				35.00					
Senate	Primary	General			7					
President State: District:	Other (sp	ecify)		N	lemo Item					
Full Name (Last, First, Middle Initial)										
C. MCCLUSKEY, RIC, , ,				Date	of Disburs	ement				
Mailing Address PO BOX 453				M 11		06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address PO BOX 455						2010				
City	State	Zip Code		FEC	dentification	on Number				
MCLAIN Purpose of Disbursement	MS	39456		C						
POLITICAL STRATEGY CONSULTING/TRAVEL	CAL STRATEGY CONSULTING/TRAVEL									
Candidate Name			Category/	Amou	nt of Each	n Disbursement this Period				
Office Sought: House Disburs	sement For:		Type	-		4521.45				
Senate	Primary	General			7	4				
President	Other (sp	pecify) ▼		N	lemo Item					
State: District:										
SUBTOTAL of Disbursements This Page (optional)					4580.45				
	,			- 12		4 4				
TOTAL This Period (last page this line number or	ılv)									

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	FOR LINE NUMBER: PAGE 14 OF 16			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 28a	22 23 26 27 28b 28c 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full) REMEMBER MISSISSIPPI						
Full Name (Last, First, Middle Initial) A. HARD ROCK HOTEL	Date of Disbursement 11 06 2018					
Mailing Address 777 BEACH BLVD						
BILOXI	State Zip Code MS 39530		FEC Identification Number			
Purpose of Disbursement TRAVEL Candidate Name	Transaction ID : SB21B.4914.0 Amount of Each Disbursement this Period					
	nent For: Primary General Other (specify) ▼	Type	219.15			
State: District:			X Memo Item			
Full Name (Last, First, Middle Initial) 3. AIRBNB	Date of Disbursement					
Mailing Address 888 BRANNAN ST #400			11 06 2018			
,	State Zip Code CA 94103		FEC Identification Number			
Candidate Name	Transaction ID : SB21B.4914.1 Amount of Each Disbursement this Period					
	nent For: Primary General Other (specify)		269.15			
State: District:	силог (ороспу)		Memo Item			
Full Name (Last, First, Middle Initial) C. ON MESSAGE	Date of Disbursement					
Mailing Address 1025 1ST ST SE UNIT 310			10 25 2018			
WASHINGTON	State Zip Code DC 20003		FEC Identification Number			
Purpose of Disbursement MEDIA CONSULTING Candidate Name	Transaction ID : SB21B.4910					
Office Sought: House Disbursem	nent For:	Category/ Type	Amount of Each Disbursement this Period 3800.00			
	Primary General Other (specify) ▼		Memo Item			
			3800.00			
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).		<u> </u>	300.00			

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 15 OF 16 (check only one) X 21b 22 23 26 27			
			28a	28b 28c		
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full) REMEMBER MISSISSIPPI						
Full Name (Last, First, Middle Initial) SOWELL, GRANT, , ,	Date of Disbursement 11 02 2018					
Mailing Address 213 N THOMAS ST						
TUPELO	I	Zip Code 38801		FEC Identificati	ion Number	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING/TRAVEL		C				
Candidate Name	Transaction ID : SB21B.4911 Amount of Each Disbursement this Period					
Office Sought: House Disbursen Senate President	Type nent For: Primary General Other (specify) ▼			3217.52 Memo Item		
State: District:	-			LI INIGINO ILEM	ı	
Full Name (Last, First, Middle Initial) 3. LOWES	Date of Disbursement					
Mailing Address 1000 LOWES BLVD				11 / D	02 / 2018	
MOORESVILLE	State Z NC	Zip Code 28117		FEC Identificati	on Number	
Purpose of Disbursement SIGN SUPPLIES	C	ID 00017 10111				
Candidate Name		n ID: SB21B.4911.0 h Disbursement this Period				
	Primary General				292.37	
State: President State:	Other (specify)		X Memo Item	1	
Full Name (Last, First, Middle Initial)				Date of Disburs	sement	
Mailing Address	M M / D	D / Y Y Y Y				
City	State Z	Zip Code		FEC Identificati	on Number	
Purpose of Disbursement	C					
Candidate Name	Amount of Eac	h Disbursement this Period				
Office Sought: House Disbursen Senate President	ment For: Primary General Other (specify) ▼			Memo Item		
State: District:					•	
SUBTOTAL of Disbursements This Page (optional)			······	7	3217.52	
TOTAL This Period (last page this line number only)					36406.07	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 16 OF 16 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ REMEMBER MISSISSIPPI C00641423 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee RIGEL STRÁTEGIES 25 2018 Mailing Address 3948 LEGACY DR STE 106-282 Amount State 1417.50 City Zip Code TX 75023 Transaction ID: SE.4893 **PLANO** Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA PRODUCTION 10 26 2018 Type Name of Federal Candidate: 00 **X** Support Office Sought: House District: MCDANIEL, CHRISTOPHER BRIAN, , , MS Oppose President **x** Senate State: Disbursement For: Primary General Calendar Year-To-Date 512386.95 2018 Per Election for Office Sought Special-General Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item RIGEL STRATEGIES 2018 25 10 Mailing Address 3948 LEGACY DR STE 106-282 Amount 1417.50 City State Zip Code **PLANO** Transaction ID: SE.4895 ΤX 75023 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA PRODUCTION 26 2018 10 Type Name of Federal Candidate: 00 Support Office Sought: House District: HYDE-SMITH, CINDY, , , MS Oppose President **x** Senate State: Disbursement For: Primary General Calendar Year-To-Date 513804.45 2018 Per Election for Office Sought Special-General X Other (specify) ▶ 2835.00 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures 2835.00 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. BARNETT, TOMMY, , , [Electronically Filed] 12 06 2018 Date Signature