

# 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 11 01 2007 through 11 30 2007

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 12 20 2007

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
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		54997.14
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	296563.67									
(c) Total Receipts (from Line 19) .....	7687.54	891806.97								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	304251.21	946804.11								
7. Total Disbursements (from Line 31) .....	156241.80	798794.70								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	148009.41	148009.41								
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
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	3197.00	211949.00
(i) Itemized (use Schedule A) .....	4488.50	270999.46
(ii) Unitemized .....	7685.50	482948.46
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	20.00
(b) Political Party Committees .....	0.00	25025.00
(c) Other Political Committees (such as PACs) .....	7685.50	507993.46
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	300000.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
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	783.60
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2.04	29.91
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	83000.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	83000.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	7687.54	891806.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	7687.54	808806.97

**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.....	14081.19	150021.24
(ii) Non-Federal Share.....	25033.22	151255.55
(b) Other Federal Operating Expenditures.....	44668.03	181569.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	83782.44	482846.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	72459.36	315948.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	72459.36	315948.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	156241.80	798794.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	131208.58	647539.15

**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) .....	7685.50	507993.46
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7685.50	507993.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	58749.22	331591.15
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	783.60
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	58749.22	330807.55

# 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 / 85
	<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 Perry

Mailing Address 1218 Rosehill Circle

City State Zip Code  
Jackson MS 39202-2123

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

Name of Employer Self Occupation  
Manufacturer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190102

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address 599 Suebe Street

City State Zip Code  
Bay Saint Louis MS 39520-2426

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 ▼  
220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190103

Amount of Each Receipt this Period  
20.00

Receipt

**C.** 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 ▼  
275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190107

Amount of Each Receipt this Period  
25.00

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 7 / 85
	<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)  
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 ▼  
275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190108

Amount of Each Receipt this Period  
25.00

Receipt

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

Mailing Address Route 2, Box 187

City State Zip Code  
Holcomb MS 38940-9410

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 ▼  
202.50

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190110

Amount of Each Receipt this Period  
10.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
James M. Cooper

Mailing Address 2152 S. Cla-Wood Place

City State Zip Code  
Tupelo MS 38801-7261

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

Name of Employer Tupelo Anesthesia Group Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190111

Amount of Each Receipt this Period  
20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **55.00**

**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 8 / 85
	<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. William Mounger</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 200 E. Capitol Street, #1601		Transaction ID: 71115.C190112	
City State Zip Code Jackson MS 39201	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Self Occupation Investor	Aggregate Year-to-Date ▼ 5110.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Murphy Adkins</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P. O. Box 700		Transaction ID: 71115.C190113	
City State Zip Code Brandon MS 39043-0700	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Rankin County Occupation Chancery Clerk	Aggregate Year-to-Date ▼ 420.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Haley Barbour</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 648 Dogwood Drive		Transaction ID: 71115.C190123	
City State Zip Code Yazoo City MS 39194	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer State Of Mississippi Occupation Governor	Aggregate Year-to-Date ▼ 275.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<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 9 / 85
	<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) Fred Beard		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address PO Box 9594		<b>Transaction ID:</b> 71115.C190128	
City State Zip Code Columbus MS 39705		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 ▼ 275.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Edwin Brent		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address PO Box 8		<b>Transaction ID:</b> 71115.C190142	
City State Zip Code Greenville MS 38702		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 ▼ 275.00	

<b>C.</b> Full Name (Last, First, Middle Initial) S. F. Carlisle		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 100 Summer Place		<b>Transaction ID:</b> 71115.C190147	
City State Zip Code Hattiesburg MS 39402		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer State Farm Ins. Occupation Agency Mgr.			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

<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 10 / 85
	<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> Gilbert Carmichael		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 2009 - 39th Street		Transaction ID: 71115.C190148	
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 M-K Rail	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Cecil Cartwright		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P. O. Box 227		Transaction ID: 71115.C190150	
City State Zip Code Yazoo City MS 39194-0227	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 ▼ 275.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Richard Clark, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address #3 Cherokee Circle		Transaction ID: 71115.C190154	
City State Zip Code Hattiesburg MS 39401	Amount of Each Receipt this Period 10.00		
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 ▼ 310.00		

<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 11 / 85
	<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)  
Thad Cochran

Mailing Address 113 Dirkson Senate Office

City Washington State DC Zip Code 20510

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

Name of Employer United States Senate Occupation U. S. Senator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190157

Amount of Each Receipt this Period  
 25.00

Receipt

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

Mailing Address P. O. Box 215

City Scott State MS Zip Code 38772

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

Name of Employer Delta & Pine Land Company Occupation V.P. Operation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190158

Amount of Each Receipt this Period  
 20.00

Receipt

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

Mailing Address 1140 Greenway Street

City Greenville State MS Zip Code 38701-6437

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 ▼ 227.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190159

Amount of Each Receipt this Period  
 17.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	62.00
<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 / 85
	<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> Sandra Cooper		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 20 Cla Wood Place		Transaction ID: 71115.C190160	
City State Zip Code Tupelo MS 38801-7209	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Dist 4 Lee Co.	Occupation Election Comm.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Karl Cornwell		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 4644 East Drive		Transaction ID: 71115.C190161	
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 ▼ 275.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Henry Damon		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 3811 29th Ave.		Transaction ID: 71115.C190164	
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		
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) ..... ▶	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 13 / 85
	<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)  
Leslie Davis

Mailing Address P. O. Box 335

City State Zip Code  
Bentonia MS 39040-0335

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

Name of Employer Self Occupation Farmer/merchant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190166

Amount of Each Receipt this Period  
10.00

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 N/A Occupation 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  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190177

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 Self Occupation Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190192

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: (check only one)	PAGE 14 / 85
	<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. Joe Gregory</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P. O. Box 588		<b>Transaction ID: 71115.C190199</b>	
City State Zip Code Pontotoc MS 38863-0588	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Occupation Pontotoc Ins. Agency Insurance Agent	Aggregate Year-to-Date ▼ 220.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. W. W. Gresham</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P. O. Box 690		<b>Transaction ID: 71115.C190201</b>	
City State Zip Code Indianola MS 38751-0690	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Occupation Gresham Petroleum Merchant	Aggregate Year-to-Date ▼ 275.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. G. O. Griffith, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 625 Oakland Terrace		<b>Transaction ID: 71115.C190203</b>	
City State Zip Code Alexandria VA 22302	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Occupation Barbour, Griffith & Rogers Attorney	Aggregate Year-to-Date ▼ 275.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<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 15 / 85
	<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> Jerry Gullede		Date of Receipt MM / DD / YYYY 11 / 06 / 2007
Mailing Address 104 Dampeer Street		Transaction ID: 71115.C190204
City Crystal Springs	State MS	Zip Code 39059-2561
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 40.00	
Name of Employer Self	Occupation Physician	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Boyce Keating		Date of Receipt MM / DD / YYYY 11 / 06 / 2007
Mailing Address 119 Faith Drive		Transaction ID: 71115.C190225
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 ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dewey Lane		Date of Receipt MM / DD / YYYY 11 / 06 / 2007
Mailing Address P. O. Box 1245		Transaction ID: 71115.C190233
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 ▼ 275.00	

<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 16 / 85
	<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> Jeanne Luckey		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 200 Bellevue Circle		Transaction ID: 71115.C190239	
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			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Falton Mason, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P. O. Box 1491		Transaction ID: 71115.C190249	
City State Zip Code Oxford MS 38655-1491		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Oxford Occupation Municipal Chair			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Harold Melvin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P. O. Box 2661		Transaction ID: 71115.C190255	
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			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

<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 17 / 85
	<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 ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2007

Transaction ID: 71115.C190257

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 ▼ 640.00

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2007

Transaction ID: 71115.C190265

Amount of Each Receipt this Period  
40.00

Receipt

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

Mailing Address 17 Glenwood Drive

City State Zip Code  
Laurel MS 39440

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  
MM / DD / YYYY  
11 / 06 / 2007

Transaction ID: 71115.C190267

Amount of Each Receipt this Period  
20.00

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 18 / 85		
	<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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) C. Ray Phillips Mailing Address 372 Sundial Road City Madison State MS Zip Code 39110-8772 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 71115.C190277 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Receipt	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	6	/	2	0	0	7	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	6	/	2	0	0	7														
25.00																							
Name of Employer Self Occupation Investments Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>275.00</td> </tr> </table>	275.00																				
275.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Rubel Phillips Mailing Address P. O. Box 823 City Ridgeland State MS Zip Code 39158-0823 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 71115.C190279 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Receipt	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	6	/	2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	6	/	2	0	0	7														
100.00																							
Name of Employer Self Employed Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>1100.00</td> </tr> </table>	1100.00																				
1100.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) J. W. Pressler Mailing Address 807 Hickory Avenue City Mc Comb State MS Zip Code 39648-2213 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 71115.C190282 Amount of Each Receipt this Period <table border="1"> <tr> <td>30.00</td> </tr> </table> Receipt	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	6	/	2	0	0	7	30.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	6	/	2	0	0	7														
30.00																							
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 ▼ <table border="1"> <tr> <td>330.00</td> </tr> </table>	330.00																				
330.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<table border="1"> <tr> <td>155.00</td> </tr> </table>	155.00
155.00		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td> </td> </tr> </table>	

# 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 / 85
	<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. Clarke Reed</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 139 Bayou Road		Transaction ID: 71115.C190285	
City State Zip Code Greenville MS 38701-7702		Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Self Employed	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1165.00		

Full Name (Last, First, Middle Initial) <b>B. Michael Retzer</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P. O. Box 4457		Transaction ID: 71115.C190286	
City State Zip Code Greenville MS 38704-4457		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer U. S. Government	Occupation Ambassador		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5110.00		

Full Name (Last, First, Middle Initial) <b>C. R. S. Runnels</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P. O. Box 605		Transaction ID: 71115.C190299	
City State Zip Code Magee MS 39111-0605		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 275.00		

<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 20 / 85
	<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> J. H. Sasser, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P. O. Box 437		Transaction ID: 71115.C190302	
City State Zip Code Carthage MS 39051-0437		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation The Heritage Bank Chairman Of The Bd.			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B.</b> F. L. Sellers		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 1502 Tanglewood Drive		Transaction ID: 71115.C190305	
City State Zip Code Clinton MS 39056-3648		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation N/A Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> William Van Devender		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P. O. Box 5327		Transaction ID: 71115.C190332	
City State Zip Code Jackson MS 39296-5327		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation Southern Timber Venture Owner/manager			
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) ..... ▶	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 21 / 85
	<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> Michael Wallace		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 318 Hillview Drive		Transaction ID: 71115.C190336	
City State Zip Code Ridgeland MS 39157		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation Wise, Carter Etc. Attorney		Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> B. L. Williamson		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 7676 Highway 50 E		Transaction ID: 71115.C190353	
City State Zip Code Columbus MS 39702-9585		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation N/A Retired		Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Wirt Yerger, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 129 Woodland Circle		Transaction ID: 71115.C190355	
City State Zip Code Jackson MS 39216		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation Self Employed Insurance Agent		Aggregate Year-to-Date ▼ 275.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<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 22 / 85
	<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> Jimmy Heidel		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 1425 Wisteria Drive		Transaction ID: 71115.C190360	
City State Zip Code Vicksburg MS 39180-4756		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation MS Dept/Economic Devel. Exec. Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Del Stover		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 3900 Highway 178 W.		Transaction ID: 71115.C190361	
City State Zip Code Holly Springs MS 38635		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation N/A Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mark Keenum		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 3109 Circle Hill Road		Transaction ID: 71115.C190362	
City State Zip Code Alexandria VA 22305-1607		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation Senator Thad Cochran Chief Of Staff			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

<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 23 / 85
	<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. Terrell Wise</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P. O. Box 12424		<b>Transaction ID: 71115.C190365</b>	
City State Zip Code Jackson MS 39211-6302		Amount of Each Receipt this Period 10.00	
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 ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>B. Billy Hewes, III</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P. O. Box 2387		<b>Transaction ID: 71115.C190367</b>	
City State Zip Code Gulfport MS 39505-2387		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 Insurance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>C. Helen Beeman</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 115 Pecan Circle		<b>Transaction ID: 71115.C190368</b>	
City State Zip Code Quitman MS 39355-2653		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Quitman Schools	Occupation Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	40.00
<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 / 85
	<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. Dorothy Turner</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 2051 Turner Lane		Transaction ID: 71115.C190372	
City State Zip Code Crystal Springs MS 39059	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 235.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mark Garriga</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 121 Golden Pond Drive		Transaction ID: 71115.C190382	
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	Aggregate Year-to-Date ▼ 220.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. R. T. Hardeman</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 903 Robert E. Lee Drive		Transaction ID: 71115.C190385	
City State Zip Code Greenwood MS 38930-2434	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	Aggregate Year-to-Date ▼ 275.00		
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 25 / 85
	<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)  
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 ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190391

Amount of Each Receipt this Period  
35.00

Receipt

**B.** 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 ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190394

Amount of Each Receipt this Period  
25.00

Receipt

**C.** 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 ▼ 710.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190395

Amount of Each Receipt this Period  
10.00

Receipt

<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 26 / 85
	<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> John Arnold		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 7
Mailing Address 102 Raymond Street		Transaction ID: 71115.C190398
City State Zip Code Starkville MS 39759-2851	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Occupation Starkville Bus Tours Bus Tours	Aggregate Year-to-Date ▼ 265.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Margaret Hall		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 7
Mailing Address 109 Glen Eagle Road		Transaction ID: 71115.C190403
City State Zip Code Oxford MS 38655-2611	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Occupation Radiance Technology Business Development	Aggregate Year-to-Date ▼ 470.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> William D. Dennis		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 7
Mailing Address P. O. Box 6181		Transaction ID: 71115.C190411
City State Zip Code Gulfport MS 39506-6181	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Occupation Specialty Contractors Contractor	Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<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 27 / 85
	<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)  
B. Keith Heard

Mailing Address 1300 Connecticut Avenue, NW, #600

City Washington State DC Zip Code 20036

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

Name of Employer Griffin, Johnson, Dover Occupation Public Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190415

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address 404 Cherokee Drive

City Booneville State MS Zip Code 38829

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

Name of Employer Wbip Radio Station Occupation Broadcaster

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190422

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address 253 Ridge Drive

City Jackson State MS Zip Code 39216

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

Name of Employer Self Employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190431

Amount of Each Receipt this Period  
20.00

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: (check only one)	PAGE 28 / 85
	<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)  
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 ▼  
270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190433

Amount of Each Receipt this Period  
20.00

Receipt

**B.** 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 Occupation  
N/A 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  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190449

Amount of Each Receipt this Period  
20.00

Receipt

**C.** 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 Occupation  
JOAMCA Chemical Products Manufacturer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190455

Amount of Each Receipt this Period  
40.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	80.00
<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 / 85
	<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 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 ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190457

Amount of Each Receipt this Period  
25.00

Receipt

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

Mailing Address 2853 Myrtlewood Drive

City State Zip Code  
Meridian MS 39307-4557

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

Name of Employer Dist 3 Lauderdale County Occupation Election Comm

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190466

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address 9604 Firetower Rd.

City State Zip Code  
Porterville MS 39352

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 ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190473

Amount of Each Receipt this Period  
25.00

Receipt

<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 30 / 85
	<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)  
Noel Coward

Mailing Address 10576 Cambrooke Cv

City State Zip Code  
Collierville TN 38017-3600

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

Name of Employer Cellular South Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190483

Amount of Each Receipt this Period  
30.00

Receipt

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

Mailing Address P. O. Box 2020

City State Zip Code  
Oxford MS 38655

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

Name of Employer JPB Pathology, Inc. Occupation Medical Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5110.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190487

Amount of Each Receipt this Period  
10.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Thomas D. Kirschten

Mailing Address P. O. Box 167

City State Zip Code  
Carrollton MS 38917

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

Name of Employer Self Occupation Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190488

Amount of Each Receipt this Period  
20.00

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: (check only one)	PAGE 31 / 85
	<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. Jim Perry</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7
Mailing Address 844 Belhaven Street		Transaction ID: 71115.C190493
City State Zip Code Jackson MS 39202	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer State Of Mississippi Occupation Policy Director	Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mary Ann McCarty</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7
Mailing Address P. O. Box 547		Transaction ID: 71115.C190494
City State Zip Code Magee MS 39111	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer N/A Occupation Homemaker	Aggregate Year-to-Date ▼ 365.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Kay S. Patterson</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7
Mailing Address 201 Mayson Avenue		Transaction ID: 71115.C190497
City State Zip Code Columbia MS 39429	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Fred Buhner Real Estate Occupation Real Estate	Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<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 32 / 85
	<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. Tony Geiger</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 1776 Plantation		<b>Transaction ID: 71115.C190500</b>	
City State Zip Code Jackson MS 39211		Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer FMS Lighting Mgt. Occupation Sales		Aggregate Year-to-Date ▼ 265.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. A. M. Zeidman</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P.O. Box 1004		<b>Transaction ID: 71115.C190507</b>	
City State Zip Code Calhoun City MS 38916-1004		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Lincoln Financial Advisors Occupation Registered Representative		Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Peter Wilson</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 453 Carmargue Ln.		<b>Transaction ID: 71115.C190520</b>	
City State Zip Code Biloxi MS 39531		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Bancorp South Occupation Bank Insurance Rep.		Aggregate Year-to-Date ▼ 875.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	35.00
<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 / 85
	<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) Nan B. Lott		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 103 Eastwood Drive		<b>Transaction ID:</b> 71115.C190521	
City State Zip Code Columbus MS 39702		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer N/A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Scott Carmichael		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 369 Crittenden		<b>Transaction ID:</b> 71115.C190525	
City State Zip Code Greenville MS 38701		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Planters Bank	Occupation Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Spencer Garrett, IV		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P. O. Box 1792		<b>Transaction ID:</b> 71115.C190526	
City State Zip Code Gautier MS 39553		Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Univ. Of So. Mississippi	Occupation College Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00		

<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 34 / 85
	<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> Alice T. Cox		Date of Receipt MM / DD / YYYY 11 / 06 / 2007
Mailing Address 3519 Ling Drive		Transaction ID: 71115.C190539
City State Zip Code Gautier MS 39553	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00
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>B.</b> Geraldine Donavan		Date of Receipt MM / DD / YYYY 11 / 06 / 2007
Mailing Address 202 Weathersby Road		Transaction ID: 71115.C190540
City State Zip Code Hattiesburg MS 39402	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Charles Pittman		Date of Receipt MM / DD / YYYY 11 / 06 / 2007
Mailing Address P.O. Box 211		Transaction ID: 71115.C190551
City State Zip Code Raymond MS 39154	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
Name of Employer State Of Mississippi	Occupation Constituent Services	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

<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:	PAGE 35 / 85
	(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> Sally W. Birdsall		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 6145 Lake Trace Circle		Transaction ID: 71115.C190562	
City State Zip Code Jackson MS 39211	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer N/A Occupation Housewife	Aggregate Year-to-Date ▼ 220.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Arnold S. Hederman		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 2240 Bellingrath Rd.		Transaction ID: 71115.C190563	
City State Zip Code Jackson MS 39211	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Miss, Rep. Party Occupation Exec. Director	Aggregate Year-to-Date ▼ 220.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Frank Rogers		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P.O. Box 219		Transaction ID: 71115.C190567	
City State Zip Code Harrisville MS 39082	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 220.00		
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:	PAGE 36 / 85
	(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)  
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 ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190571

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 ▼ 320.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190573

Amount of Each Receipt this Period  
20.00

Receipt

**C.** 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 Wilsons Termite Occupation Pest Control

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 880.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71115.C190583

Amount of Each Receipt this Period  
80.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<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 / 85
	<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> Wilbur Colom		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 406 3rd Ave. N.		Transaction ID: 71115.C190588	
City State Zip Code Columbus MS 39703		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation Colom Law Firm, LLC Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Hilda Povall		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address P.O. Box 1199		Transaction ID: 71115.C190589	
City State Zip Code Cleveland MS 38732		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation N/A Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Francis Rullan		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 1613 Linden Place		Transaction ID: 71115.C190591	
City State Zip Code Jackson MS 39202		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation Div. of Medicaid Director of Public Relations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 255.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	80.00
<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 38 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

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

Mailing Address 2901 Highway 9 South

City State Zip Code  
Pontotoc MS 38863

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

Name of Employer Self Employed  
Occupation Engineering Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 9 / 2 0 0 7

Transaction ID: 71217.C191337

Amount of Each Receipt this Period  
250.00

Receipt

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

Mailing Address 410 Green Street

City State Zip Code  
Starkville MS 39759

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

Name of Employer Dallas Investments, LLC  
Occupation Managing Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 9 / 2 0 0 7

Transaction ID: 71217.C191339

Amount of Each Receipt this Period  
750.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	3197.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 85

<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> 71217.E17395 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address P. O. Box 70503		Amount of Each Disbursement this Period 4436.27
City Charlotte State NC Zip Code 28272-0503	-PAYROLL TAXES	
Purpose of Disbursement -Payroll Taxes Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Whitney Warrington</b>		<b>Transaction ID:</b> 71217.E17380 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 1701 N. State St. P.O. Box 151519		Amount of Each Disbursement this Period 281.20
City Jackson State MS Zip Code 39210-	-CONTRACT LABOR	
Purpose of Disbursement -Contract Labor Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Mississippi Employment Security Comm.</b>		<b>Transaction ID:</b> 71217.E17412 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 7
Mailing Address P O Box 22781		Amount of Each Disbursement this Period 118.80
City Jackson State MS Zip Code 39225-2781	-PAYROLL TAXES	
Purpose of Disbursement -Payroll Taxes Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4836.27
<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)

PAGE 40 / 85

<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> 71115.E17218 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address P. O. Box 70503		Amount of Each Disbursement this Period 4450.27
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 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 &amp; Blue Shield of MS</b>		<b>Transaction ID:</b> 71115.E17171 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7
Mailing Address P. O. Box 23082		Amount of Each Disbursement this Period 1875.47
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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>C. Internal Revenue Service</b>		<b>Transaction ID:</b> 71217.E17410 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 7
Mailing Address P. O. Box 70503		Amount of Each Disbursement this Period 26427.06
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 type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>32752.80</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)

PAGE 41 / 85

<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. Bluebonnet Life Insurance Company</b>		Transaction ID: 71115.E17168 Date of Disbursement 11 / 05 / 2007	
Mailing Address P. O. Box 22867		Amount of Each Disbursement this Period 41.61	
City Jackson State MS Zip Code 39225-2867	Purpose of Disbursement -Insurance Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

-INSURANCE

Full Name (Last, First, Middle Initial) <b>B. Mississippi State Tax Commission</b>		Transaction ID: 71115.E17219 Date of Disbursement 11 / 15 / 2007	
Mailing Address P. O. Box 960		Amount of Each Disbursement this Period 477.00	
City Jackson State MS Zip Code 39205-	Purpose of Disbursement -Payroll Taxes Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

-PAYROLL TAXES

Full Name (Last, First, Middle Initial) <b>C. Mamie C. Taylor</b>		Transaction ID: 71115.E17193 Date of Disbursement 11 / 08 / 2007	
Mailing Address 408 Timber Ridge Way		Amount of Each Disbursement this Period 124.88	
City Brandon State MS Zip Code 39047-	Purpose of Disbursement REIMBURSEMENT: SEE BELOW Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

REIMBURSEMENT: SEE BELOW

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	643.49
<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

Full Name (Last, First, Middle Initial) <b>A. Blue Cross Blue Shield of TN</b>		<b>Transaction ID:</b> 71115.E17194 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 7
Mailing Address 85 N. Danny Thomas Blvd.		Amount of Each Disbursement this Period 124.88
City Memphis State TN Zip Code 38103-2398	[MEMO ITEM] MEMO: -HEALTH INSURANCE	
Purpose of Disbursement -Health Insurance Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Blue Cross &amp; Blue Shield of MS</b>		<b>Transaction ID:</b> 71217.E17335 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 7
Mailing Address P. O. Box 23082		Amount of Each Disbursement this Period 1875.47
City Jackson State MS Zip Code 39225-3082	-HEALTH INSURANCE	
Purpose of Disbursement -Health Insurance Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Mississippi Employment Security Comm.</b>		<b>Transaction ID:</b> 71115.E17220 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address P O Box 22781		Amount of Each Disbursement this Period 63.00
City Jackson State MS Zip Code 39225-2781	-PAYROLL TAXES	
Purpose of Disbursement -Payroll Taxes Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1938.47
<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. Mississippi State Tax Commission</b>		<b>Transaction ID:</b> 71217.E17396	
Mailing Address P. O. Box 960		Date of Disbursement 11 / 30 / 2007	
City Jackson	State MS	Zip Code 39205-	Amount of Each Disbursement this Period 477.00
Purpose of Disbursement -Payroll Taxes	001 Category/ Type		
Candidate Name	-PAYROLL TAXES		
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. Mississippi State Tax Commission</b>		<b>Transaction ID:</b> 71217.E17411	
Mailing Address P. O. Box 960		Date of Disbursement 11 / 21 / 2007	
City Jackson	State MS	Zip Code 39205-	Amount of Each Disbursement this Period 3099.00
Purpose of Disbursement -Payroll Taxes	001 Category/ Type		
Candidate Name	-PAYROLL TAXES		
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>C. Bluebonnet Life Insurance Company</b>		<b>Transaction ID:</b> 71217.E17345	
Mailing Address P. O. Box 22867		Date of Disbursement 11 / 28 / 2007	
City Jackson	State MS	Zip Code 39225-2867	Amount of Each Disbursement this Period 41.61
Purpose of Disbursement -Insurance	001 Category/ Type		
Candidate Name	-INSURANCE		
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3617.61</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)

<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. ADP, Inc.</b>		Transaction ID: 71217.E17628 Date of Disbursement 11 / 30 / 2007	
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 292.19	
City Atlanta State GA Zip Code 30328-	Purpose of Disbursement -Payroll Processing Fees Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

-PAYROLL PROCESSING FEES

Full Name (Last, First, Middle Initial) <b>B. Whitney Warrington</b>		Transaction ID: 71115.E17223 Date of Disbursement 11 / 15 / 2007	
Mailing Address 1701 N. State St. P.O. Box 151519		Amount of Each Disbursement this Period 587.20	
City Jackson State MS Zip Code 39210-	Purpose of Disbursement -Contract Labor Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

-CONTRACT LABOR

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

879.39

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

44668.03

**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. David Young</b>		Transaction ID: 71217.E17394 Date of Disbursement 11 / 30 / 2007	
Mailing Address 4414 Hwy. 178 West		Amount of Each Disbursement this Period 861.00	
City Red Banks State MS Zip Code 38661-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) <b>B. Richard C. Lacey</b>		Transaction ID: 71217.E17403 Date of Disbursement 11 / 21 / 2007	
Mailing Address 120 North Congress St. Apt. 1102		Amount of Each Disbursement this Period 9731.12	
City Jackson State MS Zip Code 39201-	Purpose of Disbursement FEA SALARY BONUS	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY BONUS	

Full Name (Last, First, Middle Initial) <b>C. Arnold S. Hederman</b>		Transaction ID: 71217.E17388 Date of Disbursement 11 / 30 / 2007	
Mailing Address 2240 Bellingrath Rd.		Amount of Each Disbursement this Period 2338.98	
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12931.10
<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

<b>A. David Young</b> Full Name (Last, First, Middle Initial) Mailing Address 4414 Hwy. 178 West City Red Banks State MS Zip Code 38661-		<b>Transaction ID: 71115.E17217</b> Date of Disbursement 11 / 15 / 2007
Purpose of Disbursement FEA SALARY Candidate Name		Amount of Each Disbursement this Period 861.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEA SALARY

<b>B. Thomas Blake</b> Full Name (Last, First, Middle Initial) Mailing Address 705 N 5th Ave. City Laurel State MS Zip Code 39440-		<b>Transaction ID: 71115.E17207</b> Date of Disbursement 11 / 15 / 2007
Purpose of Disbursement FEA SALARY Candidate Name		Amount of Each Disbursement this Period 778.62
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEA SALARY

<b>C. Brad White</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 104 City DLo State MS Zip Code 39062-0104		<b>Transaction ID: 71115.E17216</b> Date of Disbursement 11 / 15 / 2007
Purpose of Disbursement FEA SALARY Candidate Name		Amount of Each Disbursement this Period 1529.34
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEA SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3168.96</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)

<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: 71115.E17215</b> Date of Disbursement 11 / 15 / 2007
Mailing Address 408 Timber Ridge Way		Amount of Each Disbursement this Period 1177.99
City Brandon State MS Zip Code 39047-	Purpose of Disbursement FEA SALARY	
Candidate Name		Category/ Type FEA SALARY
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>B. Steven Carter</b>		<b>Transaction ID: 71115.E17208</b> Date of Disbursement 11 / 15 / 2007
Mailing Address 6675 Old Canton Rd. # 2011		Amount of Each Disbursement this Period 778.62
City Ridgeland State MS Zip Code 39157-	Purpose of Disbursement FEA SALARY	
Candidate Name		Category/ Type FEA SALARY
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. Richard C. Lacey</b>		<b>Transaction ID: 71115.E17212</b> Date of Disbursement 11 / 15 / 2007
Mailing Address 120 North Congress St. Apt. 1102		Amount of Each Disbursement this Period 1320.17
City Jackson State MS Zip Code 39201-	Purpose of Disbursement FEA SALARY	
Candidate Name		Category/ Type FEA SALARY
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3276.78
<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. Edna K. Apostle</b>		Transaction ID: 71217.E17383 Date of Disbursement 11 / 30 / 2007	
Mailing Address 974 Bayridge Drive		Amount of Each Disbursement this Period 1230.62	
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

FEA SALARY

Full Name (Last, First, Middle Initial) <b>B. Brad White</b>		Transaction ID: 71217.E17408 Date of Disbursement 11 / 21 / 2007	
Mailing Address P.O. Box 104		Amount of Each Disbursement this Period 6112.05	
City DLo State MS Zip Code 39062-0104	Purpose of Disbursement FEA SALARY BONUS Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

FEA SALARY BONUS

Full Name (Last, First, Middle Initial) <b>C. Adam Nikas</b>		Transaction ID: 71217.E17406 Date of Disbursement 11 / 21 / 2007	
Mailing Address 9001 Dogwood Rd.		Amount of Each Disbursement this Period 1788.96	
City Germantown State TN Zip Code 38139-	Purpose of Disbursement FEA SALARY BONUS Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

FEA SALARY BONUS

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9131.63
<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. David Young</b>		<b>Transaction ID:</b> 71217.E17409 Date of Disbursement 11 / 21 / 2007
Mailing Address 4414 Hwy. 178 West		Amount of Each Disbursement this Period 1952.98
City Red Banks State MS Zip Code 38661-	Purpose of Disbursement FEA SALARY BONUS 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) ▼	FEA SALARY BONUS

Full Name (Last, First, Middle Initial) <b>B. Steven Carter</b>		<b>Transaction ID:</b> 71217.E17385 Date of Disbursement 11 / 30 / 2007
Mailing Address 6675 Old Canton Rd. # 2011		Amount of Each Disbursement this Period 778.62
City Ridgeland State MS Zip Code 39157-	Purpose of Disbursement FEA SALARY Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY

Full Name (Last, First, Middle Initial) <b>C. Thomas Blake</b>		<b>Transaction ID:</b> 71217.E17384 Date of Disbursement 11 / 30 / 2007
Mailing Address 705 N 5th Ave.		Amount of Each Disbursement this Period 778.62
City Laurel State MS Zip Code 39440-	Purpose of Disbursement FEA SALARY Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3510.22
<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. Meredith Drake</b>		<b>Transaction ID: 71217.E17402</b> Date of Disbursement 11 / 21 / 2007	
Mailing Address 1615 Hazel St.		Amount of Each Disbursement this Period 2704.80	
City Jackson State MS Zip Code 39202-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) <b>B. Meredith Drake</b>		<b>Transaction ID: 71115.E17210</b> Date of Disbursement 11 / 15 / 2007	
Mailing Address 1615 Hazel St.		Amount of Each Disbursement this Period 727.52	
City Jackson State MS Zip Code 39202-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) <b>C. Gordon McAdams</b>		<b>Transaction ID: 71115.E17213</b> Date of Disbursement 11 / 15 / 2007	
Mailing Address 3070 Scott Place Ct.		Amount of Each Disbursement this Period 877.17	
City Mobile State AL Zip Code 36695-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4309.49
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

Full Name (Last, First, Middle Initial) <b>A. Meredith Drake</b>		<b>Transaction ID: 71217.E17387</b> Date of Disbursement 11 / 30 / 2007	
Mailing Address 1615 Hazel St.		Amount of Each Disbursement this Period 727.52	
City Jackson State MS Zip Code 39202-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) <b>B. Cory Adair</b>		<b>Transaction ID: 71115.E17205</b> Date of Disbursement 11 / 15 / 2007	
Mailing Address 326 Weldon Rd.		Amount of Each Disbursement this Period 981.24	
City Tallassee State AL Zip Code 36078-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) <b>C. Edna K. Apostle</b>		<b>Transaction ID: 71217.E17398</b> Date of Disbursement 11 / 21 / 2007	
Mailing Address 974 Bayridge Drive		Amount of Each Disbursement this Period 5568.55	
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7277.31
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

Full Name (Last, First, Middle Initial) <b>A. Thomas Blake</b>		Transaction ID: 71217.E17399 Date of Disbursement 11 / 21 / 2007	
Mailing Address 705 N 5th Ave.		Amount of Each Disbursement this Period 1753.54	
City Laurel State MS Zip Code 39440-	Purpose of Disbursement FEA SALARY BONUS	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY BONUS	

Full Name (Last, First, Middle Initial) <b>B. Natalie Cole</b>		Transaction ID: 71115.E17209 Date of Disbursement 11 / 15 / 2007	
Mailing Address 147 Links Drive #38J		Amount of Each Disbursement this Period 619.49	
City Canton State MS Zip Code 39046-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) <b>C. Mamie C. Taylor</b>		Transaction ID: 71217.E17407 Date of Disbursement 11 / 21 / 2007	
Mailing Address 408 Timber Ridge Way		Amount of Each Disbursement this Period 3535.06	
City Brandon State MS Zip Code 39047-	Purpose of Disbursement FEA SALARY BONUS	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY BONUS	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5908.09
<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 53 / 85

<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. Natalie Cole</b>		<b>Transaction ID: 71217.E17401</b> Date of Disbursement 11 / 21 / 2007	
Mailing Address 147 Links Drive #38J		Amount of Each Disbursement this Period 1788.96	
City Canton State MS Zip Code 39046-	Purpose of Disbursement FEA SALARY BONUS	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY BONUS	

Full Name (Last, First, Middle Initial) <b>B. Arnold S. Hederman</b>		<b>Transaction ID: 71115.E17211</b> Date of Disbursement 11 / 15 / 2007	
Mailing Address 2240 Bellingrath Rd.		Amount of Each Disbursement this Period 2338.98	
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) <b>C. Adam Nikas</b>		<b>Transaction ID: 71217.E17391</b> Date of Disbursement 11 / 30 / 2007	
Mailing Address 9001 Dogwood Rd.		Amount of Each Disbursement this Period 619.49	
City Germantown State TN Zip Code 38139-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4747.43
<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)

PAGE 54 / 85

<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>		<b>Transaction ID: 71115.E17206</b> Date of Disbursement 11 / 15 / 2007	
Mailing Address 974 Bayridge Drive		Amount of Each Disbursement this Period 1230.62	
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) <b>B. Gordon McAdams</b>		<b>Transaction ID: 71217.E17404</b> Date of Disbursement 11 / 21 / 2007	
Mailing Address 3070 Scott Place Ct.		Amount of Each Disbursement this Period 1977.23	
City Mobile State AL Zip Code 36695-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) <b>C. Cory Adair</b>		<b>Transaction ID: 71217.E17397</b> Date of Disbursement 11 / 21 / 2007	
Mailing Address 326 Weldon Rd.		Amount of Each Disbursement this Period 6112.05	
City Tallassee State AL Zip Code 36078-	Purpose of Disbursement FEA SALARY BONUS	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY BONUS	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>9319.90</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. Natalie Cole</b>		<b>Transaction ID: 71217.E17386</b> Date of Disbursement 11 / 30 / 2007
Mailing Address 147 Links Drive #38J		Amount of Each Disbursement this Period 619.50
City Canton State MS Zip Code 39046-	Purpose of Disbursement FEA SALARY Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY

Full Name (Last, First, Middle Initial) <b>B. Steven Carter</b>		<b>Transaction ID: 71217.E17400</b> Date of Disbursement 11 / 21 / 2007
Mailing Address 6675 Old Canton Rd. # 2011		Amount of Each Disbursement this Period 1753.54
City Ridgeland State MS Zip Code 39157-	Purpose of Disbursement FEA SALARY BONUS 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) ▼	FEA SALARY BONUS

Full Name (Last, First, Middle Initial) <b>C. Richard C. Lacey</b>		<b>Transaction ID: 71217.E17389</b> Date of Disbursement 11 / 30 / 2007
Mailing Address 120 North Congress St. Apt. 1102		Amount of Each Disbursement this Period 1320.16
City Jackson State MS Zip Code 39201-	Purpose of Disbursement FEA SALARY Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3693.20</b>
<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 56 / 85

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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A. Cory Adair</b> Full Name (Last, First, Middle Initial) Mailing Address 326 Weldon Rd. City Tallassee State AL Zip Code 36078-		<b>Transaction ID: 71217.E17382</b> Date of Disbursement 11 / 30 / 2007
Purpose of Disbursement FEA SALARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 981.25 FEA SALARY
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B. Mamie C. Taylor</b> Full Name (Last, First, Middle Initial) Mailing Address 408 Timber Ridge Way City Brandon State MS Zip Code 39047-		<b>Transaction ID: 71217.E17392</b> Date of Disbursement 11 / 30 / 2007
Purpose of Disbursement FEA SALARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 1178.00 FEA SALARY
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C. Brad White</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 104 City DLo State MS Zip Code 39062-0104		<b>Transaction ID: 71217.E17393</b> Date of Disbursement 11 / 30 / 2007
Purpose of Disbursement FEA SALARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 1529.33 FEA SALARY
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3688.58</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)

PAGE 57 / 85

<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. Gordon McAdams</b>		Transaction ID: 71217.E17390	
Mailing Address 3070 Scott Place Ct.		Date of Disbursement 11 / 30 / 2007	
City Mobile	State AL	Zip Code 36695-	Amount of Each Disbursement this Period 877.17
Purpose of Disbursement FEA SALARY	Candidate Name		Category/ Type
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:			FEA SALARY

Full Name (Last, First, Middle Initial) <b>B. Adam Nikas</b>		Transaction ID: 71115.E17214	
Mailing Address 9001 Dogwood Rd.		Date of Disbursement 11 / 15 / 2007	
City Germantown	State TN	Zip Code 38139-	Amount of Each Disbursement this Period 619.50
Purpose of Disbursement FEA SALARY	Candidate Name		Category/ Type
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:			FEA SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1496.67
<b>TOTAL</b> This Period (last page this line number only) .....	▶	72459.36

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)
- X  Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ 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 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> FIA Card Services			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 15710			Allocated Activity or Event Year-To-Date 200422.44		
City Wilmington	State DE	Zip Code 19886-5710	Date MM / DD / YYYY 11 / 05 / 2007		
Purpose of Disbursement: Credit Card: See Below			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471115.E17159		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
348.66		619.85		968.51

<b>B. Full Name (Last, First, Middle Initial)</b> Delta Airlines			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 Jackson Airport			Allocated Activity or Event Year-To-Date 595.80		
City Pearl	State MS	Zip Code 39208-	Date MM / DD / YYYY 11 / 05 / 2007		
Purpose of Disbursement: 002-Airline Tickets			Category/ Type 002		
Activity or Event Identifier: ADMINISTRATION B 2 <b>[MEMO ITEM]</b> 002-Airline Tickets			Transaction ID: H471217.E17664		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
214.49		381.31		595.80

<b>C. Full Name (Last, First, Middle Initial)</b> Travelocity			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 100 First Street Ste. 100			Allocated Activity or Event Year-To-Date 22.95		
City San Francisco	State CA	Zip Code 94105-	Date MM / DD / YYYY 11 / 05 / 2007		
Purpose of Disbursement: 002-Hotel Processing Fee			Category/ Type 002		
Activity or Event Identifier: ADMINISTRATION B 2 <b>[MEMO ITEM]</b> 002-Hotel Processing Fee			Transaction ID: H471217.E17661		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.26		14.69		22.95

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
348.66		619.85		968.51

**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)**  
Hotels.com

Mailing Address  
3150 139th Ave. SE

City State Zip Code  
Bellevue WA 98005-

002

Purpose of Disbursement:  
002-Lodging

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

349.76

Activity or Event Identifier:  
ADMINISTRATION B 2

**[MEMO ITEM]**002-Lodging

Date 11 / 05 / 2007

Transaction ID: H471217.E17665

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

125.91

223.85

349.76

**B. Full Name (Last, First, Middle Initial)**  
FIA Card Services

Mailing Address  
P.O. Box 15710

City State Zip Code  
Wilmington DE 19886-5710

Category/  
Type

Purpose of Disbursement:  
Credit Card: See Below

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

201554.64

Activity or Event Identifier:  
ADMINISTRATION B 2

Date 11 / 05 / 2007

Transaction ID: H471115.E17160

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

407.59

724.61

1132.20

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

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

63.11

Activity or Event Identifier:  
ADMINISTRATION B 2

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

Date 11 / 05 / 2007

Transaction ID: H471217.E17677

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

22.72

40.39

63.11

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

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

407.59

724.61

1132.20

**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> Two Sisters Restaurant			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 707 N. Congress			Allocated Activity or Event Year-To-Date 39.05	
City                      State                      Zip Code Jackson                      MS                      39202-	Category/ Type 001		Date                      M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7	
Purpose of Disbursement: 001-Luncheon			Transaction ID: H471217.E17678	
Activity or Event Identifier: ADMINISTRATION B 2 [MEMO ITEM]001-Luncheon				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.06		24.99		39.05

<b>B. Full Name (Last, First, Middle Initial)</b> Renaissance Hotel			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 1127 Connecticut Ave. NW			Allocated Activity or Event Year-To-Date 568.85	
City                      State                      Zip Code Washington                      DC                      20036-	Category/ Type 002		Date                      M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7	
Purpose of Disbursement: 002-Lodging			Transaction ID: H471217.E17669	
Activity or Event Identifier: ADMINISTRATION B 2 [MEMO ITEM]002-Lodging				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
204.79		364.06		568.85

<b>C. Full Name (Last, First, Middle Initial)</b> Elite Restaurant			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 141 E. Capitol St.			Allocated Activity or Event Year-To-Date 12.69	
City                      State                      Zip Code Jackson                      MS                      39201-	Category/ Type 001		Date                      M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7	
Purpose of Disbursement: 001-Luncheon			Transaction ID: H471217.E17674	
Activity or Event Identifier: ADMINISTRATION B 2 [MEMO ITEM]001-Luncheon				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.57		8.12		12.69

**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)**  
Exxon

Mailing Address  
6154 Old Canton

City	State	Zip Code
Jackson	MS	39211-

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

36.50

Activity or Event Identifier:  
ADMINISTRATION B 2

**[MEMO ITEM]**002-Gasoline

Date  /  /

Transaction ID: H471217.E17675

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.14		23.36		36.50

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

Mailing Address  
914 North State Street

City	State	Zip Code
Jackson	MS	39201-

001

Purpose of Disbursement:  
001-Office 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

90.79

Activity or Event Identifier:  
ADMINISTRATION B 2

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

Date  /  /

Transaction ID: H471217.E17672

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.68		58.11		90.79

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

Mailing Address  
4659 McWillie Drive

City	State	Zip Code
Jackson	MS	39206-

001

Purpose of Disbursement:  
001-Luncheon

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

82.43

Activity or Event Identifier:  
ADMINISTRATION B 2

**[MEMO ITEM]**001-Luncheon

Date  /  /

Transaction ID: H471217.E17666

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.67		52.76		82.43

**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)**  
Symantec Software

Mailing Address  
20330 Stevens Creek Blvd.

City	State	Zip Code	001
Cupertino	CA	95014-	

Purpose of Disbursement:  
001-Office Supplies

Activity or Event Identifier:  
ADMINISTRATION B 2  
**[MEMO ITEM]**001-Office 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  
53.49

Date 11 / 05 / 2007  
**Transaction ID:** H471217.E17671

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.26		34.23		53.49

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

Mailing Address  
Jackson Int. Airport

City	State	Zip Code	001
Jackson	MS	39205-	

Purpose of Disbursement:  
001-Parking

Activity or Event Identifier:  
ADMINISTRATION B 2  
**[MEMO ITEM]**001-Parking

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  
12.00

Date 11 / 05 / 2007  
**Transaction ID:** H471217.E17670

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.32		7.68		12.00

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

Mailing Address  
101 N. Jackson St.

City	State	Zip Code	002
Starkville	MS	39759-	

Purpose of Disbursement:  
002-Lodging

Activity or Event Identifier:  
ADMINISTRATION B 2  
**[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 11 / 05 / 2007  
**Transaction ID:** H471217.E17676

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.96		58.60		91.56

**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)(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)**  
Sphinx Gifts

Mailing Address  
4736 Best Rd.

City	State	Zip Code	Category/Type
Atlanta	GA	30337-	002

Purpose of Disbursement: 002- Travel Items	Category/Type
	002

Activity or Event Identifier:  
ADMINISTRATION B 2  
**[MEMO ITEM]**002- Travel Items

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  
38.07

Date   /   /

Transaction ID: H471217.E17667

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.71		24.36		38.07

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

Mailing Address  
Unknown St.

City	State	Zip Code	Category/Type
Washington	DC	20001-	001

Purpose of Disbursement: 001- Office Supplies	Category/Type
	001

Activity or Event Identifier:  
ADMINISTRATION B 2  
**[MEMO ITEM]**001- Office 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  
10.65

Date   /   /

Transaction ID: H471217.E17668

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.83		6.82		10.65

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

Mailing Address  
1855 Lakeland Dr. #H10

City	State	Zip Code	Category/Type
Jackson	MS	39216-	001

Purpose of Disbursement: 001-Luncheon	Category/Type
	001

Activity or Event Identifier:  
ADMINISTRATION B 2  
**[MEMO ITEM]**001-Luncheon

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  
59.71

Date   /   /

Transaction ID: H471217.E17673

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.50		38.21		59.71

**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> FIA Card Services			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 15710			Allocated Activity or Event Year-To-Date 199453.93		
City Wilmington	State DE	Zip Code 19886-5710	Date MM / DD / YYYY 11 / 05 / 2007		
Purpose of Disbursement: Credit Card: See Below			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471115.E17161		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.05		64.09		100.14

<b>B. Full Name (Last, First, Middle Initial)</b> Beau Rivage			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 875 Beach Boulevard			Allocated Activity or Event Year-To-Date 12.97		
City Biloxi	State MS	Zip Code 39530-	Date MM / DD / YYYY 11 / 05 / 2007		
Purpose of Disbursement: 001-Luncheon			Category/ Type 001		
Activity or Event Identifier: ADMINISTRATION B 2 [MEMO ITEM]001-Luncheon			Transaction ID: H471217.E17681		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.67		8.30		12.97

<b>C. Full Name (Last, First, Middle Initial)</b> Walgreens			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 955 North State Street			Allocated Activity or Event Year-To-Date 39.23		
City Jackson	State MS	Zip Code 39201-	Date MM / DD / YYYY 11 / 05 / 2007		
Purpose of Disbursement: 001-Meeting Supplies			Category/ Type 001		
Activity or Event Identifier: ADMINISTRATION B 2 [MEMO ITEM]001-Meeting Supplies			Transaction ID: H471217.E17679		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.12		25.11		39.23

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.05		64.09		100.14

**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)**  
Roses Quick Stop

Mailing Address  
Hwy 49

City	State	Zip Code	Category/ Type
Hattiesburg	MS	39402-	002

Purpose of Disbursement:  
002-Gasoline

Activity or Event Identifier:  
ADMINISTRATION B 2  
**[MEMO ITEM]**002-Gasoline

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  
47.94

Date   /   /      
**Transaction ID:** H471217.E17680

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.26		30.68		47.94

**B. Full Name (Last, First, Middle Initial)**  
Great American Leasi

Mailing Address  
P.O. Box 609

City	State	Zip Code	Category/ Type
Cedar Rapids	IA	52406-0609	001

Purpose of Disbursement:  
001-Postage Meter

Activity or Event Identifier:  
ADMINISTRATION B 2

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  
198853.79

Date   /   /      
**Transaction ID:** H471115.E17163

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.42		32.76		51.18

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

Mailing Address  
304 South State Street

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

Purpose of Disbursement:  
001-Storage

Activity or Event Identifier:  
ADMINISTRATION B 2

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  
196324.47

Date   /   /      
**Transaction ID:** H471115.E17164

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.80		147.20		230.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
101.22		179.96		281.18

**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)**  
ITC Deltacom

Mailing Address  
P. O. Box 740597

City	State	Zip Code	001
Atlanta	GA	30374-0597	

Purpose of Disbursement:  
001-Long Distance

Activity or Event Identifier:  
ADMINISTRATION B 2

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  
196712.65

Date   /   /

Transaction ID: H471115.E17165

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.70		195.02		304.72

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

Mailing Address  
Scott Coopwood P.O. Box 117

City	State	Zip Code	001
Cleveland	MS	38732-	

Purpose of Disbursement:  
001-Subscription

Activity or Event Identifier:  
ADMINISTRATION B 2

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  
196734.65

Date   /   /

Transaction ID: H471115.E17166

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.92		14.08		22.00

**C. 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 2

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  
195251.38

Date   /   /

Transaction ID: H471115.E17167

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.47		43.49		67.96

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.09		252.59		394.68

**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> Cellular South			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 519			Allocated Activity or Event Year-To-Date 196094.47	
City Meadville	State MS	Zip Code 39653-0519	Date <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: 001-Cell Phone			Transaction ID: H471115.E17169	
Activity or Event Identifier: ADMINISTRATION B 2			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
303.51		539.58		843.09

<b>B. Full Name (Last, First, Middle Initial)</b> Pennington & Trim Alarm			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4374 Mangum Drive Suite C			Allocated Activity or Event Year-To-Date 196407.93	
City Jackson	State MS	Zip Code 39232-2111	Date <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: 001-Building Security System			Transaction ID: H471115.E17170	
Activity or Event Identifier: ADMINISTRATION B 2			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.05		53.41		83.46

<b>C. Full Name (Last, First, Middle Initial)</b> Allied Waste Service			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 Jackson      1035 Old Brandon Road			Allocated Activity or Event Year-To-Date 196837.82	
City Flowood	State MS	Zip Code 39232-	Date <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: 001-Garbage			Transaction ID: H471115.E17172	
Activity or Event Identifier: ADMINISTRATION B 2			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.14		66.03		103.17

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
370.70		659.02		1029.72

**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> Jackson Data Products, 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 990			Allocated Activity or Event Year-To-Date 198802.61	
City Ridgeland	State MS	Zip Code 39158-	Category/ Type 001	
Purpose of Disbursement: 001-Office Supplies			Date MM / DD / YYYY 11 / 05 / 2007	
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471115.E17173	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
707.32		1257.47		1964.79

<b>B. Full Name (Last, First, Middle Initial)</b> Brad White			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 104			Allocated Activity or Event Year-To-Date 222005.10	
City DLo	State MS	Zip Code 39062-0104	Category/ Type	
Purpose of Disbursement: Reimbursement-See Below			Date MM / DD / YYYY 11 / 21 / 2007	
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471217.E17317	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.27		174.69		272.96

<b>C. Full Name (Last, First, Middle Initial)</b> Ricoh Americas Corporation			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 105533			Allocated Activity or Event Year-To-Date 223003.47	
City Atlanta	State GA	Zip Code 30348-5533	Category/ Type 001	
Purpose of Disbursement: 001-Copier Toner			Date MM / DD / YYYY 11 / 21 / 2007	
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471217.E17318	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.41		158.96		248.37

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
895.00		1591.12		2486.12

**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> 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 222755.10		
City Jackson	State MS	Zip Code 39236-3292	Date <input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: 001-Internet Website			Transaction ID: H471217.E17319		
Activity or Event Identifier: ADMINISTRATION B 2			Category/Type 001		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
270.00		480.00		750.00

<b>B. Full Name (Last, First, Middle Initial)</b> Ricoh Americas Corporation			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 105533			Allocated Activity or Event Year-To-Date 223357.39		
City Atlanta	State GA	Zip Code 30348-5533	Date <input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: 001-Copier Lease			Transaction ID: H471217.E17320		
Activity or Event Identifier: ADMINISTRATION B 2			Category/Type 001		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
127.41		226.51		353.92

<b>C. Full Name (Last, First, Middle Initial)</b> All Metro Pest Services			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 108 Office Park Dr., Ste. A			Allocated Activity or Event Year-To-Date 221732.14		
City Brandon	State MS	Zip Code 39042-	Date <input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: 001-Pest Control			Transaction ID: H471217.E17321		
Activity or Event Identifier: ADMINISTRATION B 2			Category/Type 001		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.00		32.00		50.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
415.41		738.51		1153.92

**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> Cellular South			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 519			Allocated Activity or Event Year-To-Date 232039.52	
City Meadville	State MS	Zip Code 39653-0519	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: 001-Cell Phone			Transaction ID: H471217.E17332	
Activity or Event Identifier: ADMINISTRATION B 2			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.37		46.87		73.24

<b>B. Full Name (Last, First, Middle Initial)</b> City Services Center			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 Payment Processing Center P.O. Box 1595			Allocated Activity or Event Year-To-Date 232268.02	
City Jackson	State MS	Zip Code 39215-1595	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: 001-Water/Sewer			Transaction ID: H471217.E17333	
Activity or Event Identifier: ADMINISTRATION B 2			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.26		146.24		228.50

<b>C. Full Name (Last, First, Middle Initial)</b> Aristotle Publishing, 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 205 Pennsylvania Avenue, SE			Allocated Activity or Event Year-To-Date 226607.39	
City Washington	State DC	Zip Code 20003-1164	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: 001-Computer Software			Transaction ID: H471217.E17334	
Activity or Event Identifier: ADMINISTRATION B 2			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1170.00		2080.00		3250.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1278.63		2273.11		3551.74

**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** Meadville **State** MS **Zip Code** 39653-0519  
**Purpose of Disbursement:**  
001-Cell Phone  
**Activity or Event Identifier:**  
ADMINISTRATION B 2

**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**  
231966.28  
**Date** 11 / 28 / 2007  
**Transaction ID:** H471217.E17336

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
332.11		590.42		922.53

**B. Full Name (Last, First, Middle Initial)**  
ITC Deltacom  
**Mailing Address**  
P. O. Box 740597  
**City** Atlanta **State** GA **Zip Code** 30374-0597  
**Purpose of Disbursement:**  
001-Long Distance  
**Activity or Event Identifier:**  
ADMINISTRATION B 2

**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**  
232872.61  
**Date** 11 / 28 / 2007  
**Transaction ID:** H471217.E17337

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
138.45		246.14		384.59

**C. Full Name (Last, First, Middle Initial)**  
Brads Green Machine  
**Mailing Address**  
P.O. Box 41  
**City** Star **State** MS **Zip Code** 39167-  
**Purpose of Disbursement:**  
001-Lawn Maintenance  
**Activity or Event Identifier:**  
ADMINISTRATION B 2

**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**  
233024.57  
**Date** 11 / 28 / 2007  
**Transaction ID:** H471217.E17338

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.60		54.40		85.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
501.16		890.96		1392.12

**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> Jackson Data Products, 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 990			Allocated Activity or Event Year-To-Date 233259.70	
City Ridgeland	State MS	Zip Code 39158-	Category/ Type 001	
Purpose of Disbursement: 001-Office Supplies			Date MM / DD / YYYY 11 / 28 / 2007	
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471217.E17339	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.65		150.48		235.13

<b>B. Full Name (Last, First, Middle Initial)</b> AT&T			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 234062.38	
City Atlanta	State GA	Zip Code 30348-5262	Category/ Type 001	
Purpose of Disbursement: 001-Telephone			Date MM / DD / YYYY 11 / 28 / 2007	
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471217.E17340	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
167.62		297.99		465.61

<b>C. Full Name (Last, First, Middle Initial)</b> Atmos Energy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 9001949			Allocated Activity or Event Year-To-Date 232939.57	
City Louisville	State KY	Zip Code 40290-1949	Category/ Type 001	
Purpose of Disbursement: 001-Utilities			Date MM / DD / YYYY 11 / 28 / 2007	
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471217.E17341	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.11		42.85		66.96

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
276.38		491.32		767.70

**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 231043.75																		
City   State   Zip Code Des Moines   IA   50368-9020	Category/ Type 001		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>8</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	1	1	D	D	2	8	Y	Y	Y	Y	2	0	0	7
M	M																				
1	1																				
D	D																				
2	8																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: 001-Office Supplies			Transaction ID: H471217.E17343																		
Activity or Event Identifier: ADMINISTRATION B 2																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
332.86		591.76		924.62

<b>B. Full Name (Last, First, Middle Initial)</b> Federal Express			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 660481			Allocated Activity or Event Year-To-Date 230119.13																		
City   State   Zip Code Dallas   TX   75266-0481	Category/ Type 001		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>8</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	1	1	D	D	2	8	Y	Y	Y	Y	2	0	0	7
M	M																				
1	1																				
D	D																				
2	8																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: 001-Postage/Shipping			Transaction ID: H471217.E17344																		
Activity or Event Identifier: ADMINISTRATION B 2																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
943.05		1676.53		2619.58

<b>C. Full Name (Last, First, Middle Initial)</b> AT&T Mobility			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 538695			Allocated Activity or Event Year-To-Date 234242.15																		
City   State   Zip Code Atlanta   GA   30353-8695	Category/ Type 001		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>8</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	1	1	D	D	2	8	Y	Y	Y	Y	2	0	0	7
M	M																				
1	1																				
D	D																				
2	8																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: 001-Cell Phone			Transaction ID: H471217.E17346																		
Activity or Event Identifier: ADMINISTRATION B 2																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.72		115.05		179.77

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1340.63		2383.34		3723.97

**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> 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 232488.02	
City                      State                      Zip Code Jackson                      MS                      39201-	Category/ Type 001		Date                      M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 7	
Purpose of Disbursement: 001-Storage			Transaction ID: H471217.E17348	
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.20		140.80		220.00

<b>B. 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 227499.55	
City                      State                      Zip Code Baton Rouge                      LA                      70891-8105	Category/ Type 001		Date                      M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 7	
Purpose of Disbursement: 001-Electricity			Transaction ID: H471217.E17349	
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
321.18		570.98		892.16

<b>C. Full Name (Last, First, Middle Initial)</b> Ricoh Americas Corporation			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 105533			Allocated Activity or Event Year-To-Date 233596.77	
City                      State                      Zip Code Atlanta                      GA                      30348-5533	Category/ Type 001		Date                      M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 7	
Purpose of Disbursement: 001-Copier Lease			Transaction ID: H471217.E17350	
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.35		215.72		337.07

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
521.73		927.50		1449.23

**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> FIA Card Services			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 15710			Allocated Activity or Event Year-To-Date 221554.64		
City Wilmington	State DE	Zip Code 19886-5710	Date <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Credit Card: See Below			Transaction ID: H471217.E17553		
Activity or Event Identifier: ADMINISTRATION B 2			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7200.00		12800.00		20000.00

<b>B. 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 4950 I-55 North			Allocated Activity or Event Year-To-Date 80.22		
City Jackson	State MS	Zip Code 39211-	Date <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: 001-Office Supplies			Transaction ID: H471217.E17653		
Activity or Event Identifier: ADMINISTRATION B 2 [MEMO ITEM] 001-Office Supplies			Category/Type 001		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.88		51.34		80.22

<b>C. Full Name (Last, First, Middle Initial)</b> McAlisters Deli of Jackson			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 1240 E. Northside Drive			Allocated Activity or Event Year-To-Date 92.35		
City Jackson	State MS	Zip Code 39211-	Date <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: 001-Luncheon			Transaction ID: H471217.E17645		
Activity or Event Identifier: ADMINISTRATION B 2 [MEMO ITEM] 001-Luncheon			Category/Type 001		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.25		59.10		92.35

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7200.00		12800.00		20000.00

**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> Hickory Pit			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 1491 Canton Mart Road			Allocated Activity or Event Year-To-Date 69.32	
City                      State                      Zip Code Jackson                      MS                      39211-	Category/ Type 001		Date                      M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7	
Purpose of Disbursement: 001-Luncheon			Transaction ID: H471217.E17643	
Activity or Event Identifier: ADMINISTRATION B 2 [MEMO ITEM]001-Luncheon				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.96		44.36		69.32

<b>B. Full Name (Last, First, Middle Initial)</b> Enterprise Rent A Car			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 #553J			Allocated Activity or Event Year-To-Date 2614.55	
City                      State                      Zip Code Jackson                      MS                      39201-	Category/ Type 001		Date                      M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7	
Purpose of Disbursement: 001-Rental Car Fee			Transaction ID: H471217.E17658	
Activity or Event Identifier: ADMINISTRATION B 2 [MEMO ITEM]001-Rental Car Fee				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
941.24		1673.31		2614.55

<b>C. Full Name (Last, First, Middle Initial)</b> Southwest Airlines			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 36647			Allocated Activity or Event Year-To-Date 3652.60	
City                      State                      Zip Code Dallas                      TX                      75235-1647	Category/ Type 002		Date                      M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7	
Purpose of Disbursement: 002- Airline Tickets			Transaction ID: H471217.E17639	
Activity or Event Identifier: ADMINISTRATION B 2 [MEMO ITEM]002- Airline Tickets				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1314.94		2337.66		3652.60

**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)**  
Southwest Airlines

Mailing Address  
P. O. Box 36647

City State Zip Code  
Dallas TX 75235-1647

002

Purpose of Disbursement:  
002-Airline Ticket

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

108.00

Activity or Event Identifier:  
ADMINISTRATION B 2  
[MEMO ITEM]002-Airline Ticket

Date 11 / 05 / 2007

Transaction ID: H471217.E17641

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.88		69.12		108.00

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

Mailing Address  
225 East Capitol St.

City State Zip Code  
Jackson MS 39201-

001

Purpose of Disbursement:  
001-Luncheon

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

32.98

Activity or Event Identifier:  
ADMINISTRATION B 2  
[MEMO ITEM]001-Luncheon

Date 11 / 05 / 2007

Transaction ID: H471217.E17654

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.87		21.11		32.98

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

Mailing Address  
425 Hwy 6 W

City State Zip Code  
Oxford MS 38655-

001

Purpose of Disbursement:  
001-Rental Fee

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

51.25

Activity or Event Identifier:  
ADMINISTRATION B 2  
[MEMO ITEM]001-Rental Fee

Date 11 / 05 / 2007

Transaction ID: H471217.E17652

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.45		32.80		51.25

**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)**  
Uhaul Downtown

Mailing Address  
425 Hwy 6 W

City State Zip Code  
Oxford MS 38655-

001

Purpose of Disbursement:  
001-Rental Fee

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

85.49

Activity or Event Identifier:  
ADMINISTRATION B 2

**[MEMO ITEM]**001-Rental Fee

Date   /   /

Transaction ID: H471217.E17650

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

30.78

54.71

85.49

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

Mailing Address  
High Street

City State Zip Code  
Jackson MS 39202-

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

22.44

Activity or Event Identifier:  
ADMINISTRATION B 2

**[MEMO ITEM]**002-Gasoline

Date   /   /

Transaction ID: H471217.E17647

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.08

14.36

22.44

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

Mailing Address  
200 S. Wacker Drive Suite 1900

City State Zip Code  
Chicago IL 60606-

002

Purpose of Disbursement:  
002-Airfare Processing Fee

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

134.82

Activity or Event Identifier:  
ADMINISTRATION B 2

**[MEMO ITEM]**002-Airfare Processing Fee

Date   /   /

Transaction ID: H471217.E17646

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

48.54

86.28

134.82

**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> Orbitz			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 200 S. Wacker Drive   Suite 1900			Allocated Activity or Event Year-To-Date 69.90		
City   State   Zip Code Chicago   IL   60606-	Category/ Type 002		Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 0 5 / 2 0 0 7		
Purpose of Disbursement: 002-Airfare Processing Fee			Transaction ID: H471217.E17644		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.16		44.74		69.90

<b>B. Full Name (Last, First, Middle Initial)</b> Continental Airlines			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 630 Colonial Park Drive   Suite 230			Allocated Activity or Event Year-To-Date 10200.45		
City   State   Zip Code Roswell   GA   30075-	Category/ Type 002		Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 0 5 / 2 0 0 7		
Purpose of Disbursement: 002-Airline Tickets			Transaction ID: H471217.E17648		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3672.16		6528.29		10200.45

<b>C. Full Name (Last, First, Middle Initial)</b> American Airlines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 619612   MD 2400			Allocated Activity or Event Year-To-Date 140.00		
City   State   Zip Code Dallas   TX   75261-	Category/ Type 002		Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 0 5 / 2 0 0 7		
Purpose of Disbursement: 002-Airline Ticket			Transaction ID: H471217.E17640		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.40		89.60		140.00

**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)**  
American Airlines

Mailing Address  
PO Box 619612 MD 2400

City	State	Zip Code	002
Dallas	TX	75261-	

Purpose of Disbursement: 002-Airline Tickets	Category/ Type
	4856.60

Activity or Event Identifier:  
ADMINISTRATION B 2  
**[MEMO ITEM]**002-Airline Tickets

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

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

Transaction ID: H471217.E17636

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1748.38		3108.22		4856.60

**B. Full Name (Last, First, Middle Initial)**  
Conference American Inc.

Mailing Address  
7079 University Court

City	State	Zip Code	001
Montgomery	AL	36117-	

Purpose of Disbursement: 001-Conference Call	Category/ Type
	237.84

Activity or Event Identifier:  
ADMINISTRATION B 2  
**[MEMO ITEM]**001-Conference Call

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

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

Transaction ID: H471217.E17656

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.62		152.22		237.84

**C. Full Name (Last, First, Middle Initial)**  
Pear Orchard Business Center

Mailing Address  
Pear Orchard Rd.

City	State	Zip Code	001
Ridgeland	MS	39157-	

Purpose of Disbursement: 001-Office Supplies	Category/ Type
	21.35

Activity or Event Identifier:  
ADMINISTRATION B 2  
**[MEMO ITEM]**001-Office 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

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

Transaction ID: H471217.E17637

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.69		13.66		21.35

**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)**  
Rasing Canes

Mailing Address  
202 Layfair Drive

City	State	Zip Code
Flowood	MS	39232-

001

Purpose of Disbursement:  
001- Luncheon

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

61.47

Activity or Event Identifier:  
ADMINISTRATION B 2

**[MEMO ITEM]**001- Luncheon

Date   /   /

Transaction ID: H471217.E17642

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.13		39.34		61.47

**B. Full Name (Last, First, Middle Initial)**  
Hard Rock Hotel

Mailing Address  
777 Beach Blvd.

City	State	Zip Code
Biloxi	MS	39530-

002

Purpose of Disbursement:  
002-Lodging

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

3737.44

Activity or Event Identifier:  
ADMINISTRATION B 2

**[MEMO ITEM]**002-Lodging

Date   /   /

Transaction ID: H471217.E17649

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1345.48		2391.96		3737.44

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

Mailing Address  
1 Infinite Loop

City	State	Zip Code
Cupertino	CA	95014-

001

Purpose of Disbursement:  
001-Office 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

4030.64

Activity or Event Identifier:  
ADMINISTRATION B 2

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

Date   /   /

Transaction ID: H471217.E17651

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1451.03		2579.61		4030.64

**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)**  
Microtel Inn & Suite

Mailing Address  
105 Westover Drive

City	State	Zip Code	Category/ Type
Hattiesburg	MS	39402-	002

Purpose of Disbursement:  
002-Lodging

Activity or Event Identifier:  
ADMINISTRATION B 2  
**[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  
3600.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

  
**Transaction ID:** H471217.E17655

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1296.00		2304.00		3600.00

**B. Full Name (Last, First, Middle Initial)**  
La Font Inn

Mailing Address  
2703 Denny Ave.

City	State	Zip Code	Category/ Type
Pascagoula	MS	39567-	002

Purpose of Disbursement:  
002-Lodging

Activity or Event Identifier:  
ADMINISTRATION B 2  
**[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  
1468.50

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

  
**Transaction ID:** H471217.E17657

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
528.66		939.84		1468.50

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

Mailing Address  
7207 Chapman Highway

City	State	Zip Code	Category/ Type
Knoxville	TN	37920-6609	001

Purpose of Disbursement:  
001-Merchant Fees

Activity or Event Identifier:  
ADMINISTRATION B 2

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  
195183.42

Date 

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

  
**Transaction ID:** H471217.E17563

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.04		35.64		55.68

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.04		35.64		55.68

**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> 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 221569.64	
City Brandon	State MS	Zip Code 39042-	Date M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 7	
Purpose of Disbursement: 001-Bank Charges			Category/ Type 001	
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471217.E17572	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.40		9.60		15.00

<b>B. Full Name (Last, First, Middle Initial)</b> FP Mailing Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Dept. 4272			Allocated Activity or Event Year-To-Date 199353.79	
City Elgin	State IL	Zip Code 60122-4272	Date M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7	
Purpose of Disbursement: 001-Postage			Category/ Type 001	
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471217.E17577	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.00		320.00		500.00

<b>C. Full Name (Last, First, Middle Initial)</b> Aristotle Publishing, 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 205 Pennsylvania Avenue, SE			Allocated Activity or Event Year-To-Date 221682.14	
City Washington	State DC	Zip Code 20003-1164	Date M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Purpose of Disbursement: 001-Merchants Fees			Category/ Type 001	
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471217.E17589	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.50		72.00		112.50

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
225.90		401.60		627.50

**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
14081.19	25033.22	39114.41

Image# 27931699394

Form/Schedule: **F3XN**

Transaction ID: **C00084368**

This report contains memo entries that reference back to a \$20,000 credit card payment that was previously reported on our November monthly report. This report has an additional \$20,000 credit card payment with memo entries also. As we previously discussed we had to prepay our credit card bill.

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