

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 12 01 2005 through 12 31 2005

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 03 17 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Mississippi Republican Party

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	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>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		19828.19
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	51082.61									
(c) Total Receipts (from Line 19)	26251.96	605119.07								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	77334.57	624947.26								
7. Total Disbursements (from Line 31)	50231.49	597844.18								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	27103.08	27103.08								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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	2

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

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	2746.50	281057.00
(i) Itemized (use Schedule A)	5274.00	228245.87
(ii) Unitemized	8020.50	509302.87
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10.00	170.00
(b) Political Party Committees	0.00	9674.53
(c) Other Political Committees (such as PACs)	8030.50	519147.40
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	36956.98
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)	3219.36	9979.36
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	2.10	35.33
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	15000.00	39000.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	15000.00	39000.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	26251.96	605119.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	11251.96	566119.07

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	15850.61	113871.64
(ii) Non-Federal Share.....	9349.87	167057.47
(b) Other Federal Operating Expenditures.....	7799.51	116672.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	32999.99	397601.37
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	20.00
(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	20.00
29. Other Disbursements.....	0.00	5952.16
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	17231.50	194270.65
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	17231.50	194270.65
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	50231.49	597844.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	40881.62	430786.71

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)	8030.50	519147.40
34. Total Contribution Refunds (from Line 28(d))	0.00	20.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8030.50	519127.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	23650.12	230543.90
37. Offsets to Operating Expenditures (from Line 15, page 3)	3219.36	9979.36
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20430.76	220564.54

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 / 77
	<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) A. James Perry		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 1218 Rosehill Circle		Transaction ID: 51219.C165839	
City State Zip Code Jackson MS 39202-2123	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Self Occupation Manufacturer	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. Betty Engle		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 915 Warren Street		Transaction ID: 51219.C165840	
City State Zip Code Pascagoula MS 39567-7581	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Andrew Martinolich		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 599 Suebe Street		Transaction ID: 51219.C165841	
City State Zip Code Bay Saint Louis MS 39520-2426	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Self Occupation Physician	Aggregate Year-to-Date ▼ 240.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	65.00
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 7 / 77
	<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)
Tony Palazzo II

Mailing Address 1063 Country Wood Cv

City State Zip Code
Tupelo MS 38801

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

Name of Employer N. Miss. Health Services Occupation Dir., Internal Audit

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165843

Amount of Each Receipt this Period
60.00

Receipt

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

Mailing Address 511 Bay Street

City State Zip Code
Brookhaven MS 39601-4037

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165847

Amount of Each Receipt this Period
25.00

Receipt

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

Mailing Address 3111 W. Lake Drive

City State Zip Code
Meridian MS 39307-4144

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

Name of Employer N/A Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165848

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	110.00
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 / 77
	<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) A. William Nations		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address Route 2, Box 187		Transaction ID: 51219.C165850
City State Zip Code Holcomb MS 38940-9410	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 245.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. James M. Cooper		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address 2152 S. Cla-Wood Place		Transaction ID: 51219.C165851
City State Zip Code Tupelo MS 38801-7261	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Tupelo Anesthesia Group Occupation Physician	Aggregate Year-to-Date ▼ 290.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. William Mounger		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address 200 E. Capitol Street, #1601		Transaction ID: 51219.C165852
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 ▼ 5120.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	40.00
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 9 / 77
	<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)
Murphy Adkins

Mailing Address P. O. Box 700

City State Zip Code
Brandon MS 39043-0700

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

Name of Employer Rankin County Occupation Chancery Clerk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165853

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 648 Dogwood Drive

City State Zip Code
Yazoo City MS 39194

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

Name of Employer State Of Mississippi Occupation Governor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165863

Amount of Each Receipt this Period
25.00

Receipt

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

Mailing Address PO Box 9594

City State Zip Code
Columbus MS 39705

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165868

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	70.00
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 10 / 77
	<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) A. Edwin Brent		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address PO Box 8		Transaction ID: 51219.C165882	
City Greenville	State MS	Zip Code 38702	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. S. F. Carlisle		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 100 Summer Place		Transaction ID: 51219.C165889	
City Hattiesburg	State MS	Zip Code 39402	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		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 ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Gilbert Carmichael		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 2009 - 39th Street		Transaction ID: 51219.C165890	
City Meridian	State MS	Zip Code 39305	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		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 ▼ 360.00		

SUBTOTAL of Receipts This Page (optional) ▶	75.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 77
	<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)
Cecil Cartwright

Mailing Address P. O. Box 227

City State Zip Code
Yazoo City MS 39194-0227

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165892

Amount of Each Receipt this Period
25.00

Receipt

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

Mailing Address 700 Peyton Circle

City State Zip Code
Marks MS 38646-1033

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

Name of Employer Self-employed Occupation Cotton Ginner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165893

Amount of Each Receipt this Period
17.00

Receipt

C. Full Name (Last, First, Middle Initial)
Connie Cochran

Mailing Address 5737 Terry Rd

City State Zip Code
Byram MS 39272

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

Name of Employer Alpha Printing Occupation Sales Rep.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165899

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	62.00
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 12 / 77
	<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 326 Russell Senate Office Building

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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165900

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 ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165902

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 ▼ 204.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165903

Amount of Each Receipt this Period
17.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	62.00
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 13 / 77
	<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)
Sandra Cooper

Mailing Address 20 Cla Wood Place

City State Zip Code
Tupelo MS 38801-7209

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

Name of Employer Dist 4 Lee Co. Occupation Election Comm.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165904

Amount of Each Receipt this Period
20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Karl Cornwell

Mailing Address 4644 East Drive

City State Zip Code
Belden MS 38826-9516

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165905

Amount of Each Receipt this Period
25.00

Receipt

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

Mailing Address P. O. Box 5654

City State Zip Code
Meridian MS 39302-5654

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

Name of Employer AES Ltd. Engineers Occupation Engr/surveyor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165908

Amount of Each Receipt this Period
30.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 77
	<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)
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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165922

Amount of Each Receipt this Period
25.00

Receipt

B. Full Name (Last, First, Middle Initial)
Nell Frisbie

Mailing Address P. O. Box 879

City State Zip Code
Kiln MS 39556-0879

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

Name of Employer Self Occupation Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165933

Amount of Each Receipt this Period
15.00

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 ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165939

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	65.00
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 15 / 77
	<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)
Joe Gregory

Mailing Address P. O. Box 588

City State Zip Code
Pontotoc MS 38863-0588

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

Name of Employer Occupation
Pontotoc Ins. Agency Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165948

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address P. O. Box 690

City State Zip Code
Indianola MS 38751-0690

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

Name of Employer Occupation
Gresham Petroleum Merchant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165950

Amount of Each Receipt this Period
25.00

Receipt

C. Full Name (Last, First, Middle Initial)
Thomas Gresham

Mailing Address 105 E. Gresham Street

City State Zip Code
Indianola MS 38751-2422

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

Name of Employer Occupation
Double Quick, Inc. Retailer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
620.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165951

Amount of Each Receipt this Period
10.00

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 16 / 77
	<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)
G. O. Griffith, Jr.

Mailing Address 625 Oakland Terrace

City State Zip Code
Alexandria VA 22302

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

Name of Employer Occupation
Barbour, Griffith & Rogers Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165952

Amount of Each Receipt this Period
25.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jerry Gullede

Mailing Address 104 Dampeer Street

City State Zip Code
Crystal Springs MS 39059-2561

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

Name of Employer Occupation
Self Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165953

Amount of Each Receipt this Period
40.00

Receipt

C. Full Name (Last, First, Middle Initial)
Boyce Keating

Mailing Address 119 Faith Drive

City State Zip Code
Batesville MS 38606

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C165981

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	85.00
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 17 / 77
	<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) Faith Koger Mailing Address 7314 Ahi Dr City State Zip Code Diamondhead MS 39525-3903 FEC ID number of contributing federal political committee. C 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 ▼ 210.00		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>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 51219.C165984 Amount of Each Receipt this Period <table border="1"> <tr> <td>5.00</td> </tr> </table> Receipt	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	6		2	0	0	5	5.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		0	6		2	0	0	5														
5.00																							

B. Full Name (Last, First, Middle Initial) Dewey Lane Mailing Address P. O. Box 1245 City State Zip Code Pascagoula MS 39568-1245 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		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>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 51219.C165989 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	2		0	6		2	0	0	5	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		0	6		2	0	0	5														
25.00																							

C. Full Name (Last, First, Middle Initial) Jeanne Luckey Mailing Address 101 Watersedge Lane City State Zip Code Ocean Springs MS 39564-5118 FEC ID number of contributing federal political committee. C 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 ▼ 300.00		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>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 51219.C165995 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	2		0	6		2	0	0	5	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		0	6		2	0	0	5														
25.00																							

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 18 / 77
	<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) A. Falton Mason, Jr. Mailing Address P. O. Box 1491		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5 Transaction ID: 51219.C166008
City State Zip Code Oxford MS 38655-1491	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		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 ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Harold Melvin Mailing Address P. O. Box 2661		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5 Transaction ID: 51219.C166014
City State Zip Code Laurel MS 39442-2661	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		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 ▼ 300.00	

Full Name (Last, First, Middle Initial) C. H. T. Miller, III Mailing Address 291 W. Park Avenue		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5 Transaction ID: 51219.C166016
City State Zip Code Drew MS 38737-3344	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Self	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	70.00
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 19 / 77
	<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) A. James Moreton		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address P. O. Box 537		Transaction ID: 51219.C166024	
City State Zip Code Brookhaven MS 39601-0537		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. James Moye		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 17 Glenwood Drive		Transaction ID: 51219.C166026	
City State Zip Code Laurel MS 39440		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			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. John Palmer		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address P. O. Box 3747		Transaction ID: 51219.C166031	
City State Zip Code Jackson MS 39207-3747		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Gulf South Capital Occupation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1120.00	

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 20 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
J. W. Person, Jr.

Mailing Address 602 Church Street

City State Zip Code
Port Gibson MS 39150-2114

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

Name of Employer Port Gibson Bank Occupation President

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 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166035

Amount of Each Receipt this Period
10.00

Receipt

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

Mailing Address 372 Sundial Road

City State Zip Code
Madison MS 39110-8772

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

Name of Employer Self Occupation Investments

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166037

Amount of Each Receipt this Period
25.00

Receipt

C. Full Name (Last, First, Middle Initial)
John Phillips, III

Mailing Address 4042 Highway 16 W

City State Zip Code
Yazoo City MS 39194-9243

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

Name of Employer Phillips Planting Co. Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5120.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166038

Amount of Each Receipt this Period
10.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	45.00
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 21 / 77
	<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)
Rubel Phillips

Mailing Address P. O. Box 823

City State Zip Code
Ridgeland MS 39158-0823

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

Name of Employer Self Employed Occupation
Self Employed Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166039

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
J. W. Pressler

Mailing Address 807 Hickory Avenue

City State Zip Code
Mc Comb MS 39648-2213

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

Name of Employer Self Occupation
Self Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166044

Amount of Each Receipt this Period
30.00

Receipt

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

Mailing Address 139 Bayou Road

City State Zip Code
Greenville MS 38701-7702

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

Name of Employer Self Employed Occupation
Self Employed Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1180.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166047

Amount of Each Receipt this Period
15.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **145.00**

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 22 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address P. O. Box 4457

City State Zip Code
Greenville MS 38704-4457

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

Name of Employer Occupation
U. S. Government Ambassador

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5620.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166048

Amount of Each Receipt this Period
10.00

Receipt

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

Mailing Address P. O. Box 605

City State Zip Code
Magee MS 39111-0605

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

Name of Employer Occupation
Self Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166062

Amount of Each Receipt this Period
25.00

Receipt

C. Full Name (Last, First, Middle Initial)
J. H. Sasser, Jr.

Mailing Address P. O. Box 437

City State Zip Code
Carthage MS 39051-0437

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

Name of Employer Occupation
The Carthage Bank Chairman Of The Bd.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166065

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 23 / 77
	<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)
Paul Sellars

Mailing Address 2419 Sellars Road

City Starkville State MS Zip Code 39759

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 ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166067

Amount of Each Receipt this Period
15.00

Receipt

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

Mailing Address 1502 Tanglewood Drive

City Clinton State MS Zip Code 39056-3648

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166068

Amount of Each Receipt this Period
25.00

Receipt

C. Full Name (Last, First, Middle Initial)
William Van Devender

Mailing Address P. O. Box 5327

City Jackson State MS Zip Code 39296-5327

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

Name of Employer Southern Timber Venture Occupation Owner/manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166097

Amount of Each Receipt this Period
30.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	70.00
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 24 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address 318 Hillview Drive

City State Zip Code
Ridgeland MS 39157

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

Name of Employer Occupation
Phelps, Dunbar, Etc. Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166101

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 129 Woodland Circle

City State Zip Code
Jackson MS 39216

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

Name of Employer Occupation
Self Employed Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166124

Amount of Each Receipt this Period
25.00

Receipt

C. Full Name (Last, First, Middle Initial)
Terry French

Mailing Address 2024 - 15th Street

City State Zip Code
Meridian MS 39301-4164

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

Name of Employer Occupation
Meridian Medical Assoc. Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 5

Transaction ID: 60106.C166434

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	65.00
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 25 / 77
	<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)
Jimmy Heidel

Mailing Address 1425 Wisteria Drive

City State Zip Code
Vicksburg MS 39180-4756

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

Name of Employer Occupation
MS Dept/Economic Devel. Exec. Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166129

Amount of Each Receipt this Period
20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Del Stover

Mailing Address 3900 Highway 178 W.

City State Zip Code
Holly Springs MS 38635

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166130

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 3109 Circle Hill Road

City State Zip Code
Alexandria VA 22305-1607

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

Name of Employer Occupation
Senator Thad Ccohran Chief Of Staff

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166131

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 65.00

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 26 / 77
	<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) A. Helen Beeman		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 115 Pecan Circle		Transaction ID: 51219.C166137	
City State Zip Code Quitman MS 39355-2653		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation Quitman Schools Teacher		Aggregate Year-to-Date ▼ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Dorothy Turner		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 2051 Turner Lane		Transaction ID: 51219.C166141	
City State Zip Code Crystal Springs MS 39059		Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation N/A Retired		Aggregate Year-to-Date ▼ 205.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mark Garriga		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 165 North Maple Street		Transaction ID: 51219.C166150	
City State Zip Code Ridgeland MS 39157-2308		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation Self Attorney		Aggregate Year-to-Date ▼ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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 27 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address 903 Robert E. Lee Drive

City Greenwood State MS Zip Code 38930-2434

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166153

Amount of Each Receipt this Period
25.00

Receipt

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

Mailing Address P. O. Box 384

City Hernando State MS Zip Code 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 ▼
420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166161

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
J. K. Stringer, Jr.

Mailing Address 104 Boxwood Cove

City Brandon State MS Zip Code 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 ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166165

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	85.00
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 28 / 77
	<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) A. Mark Formby		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 423 North Main Street		Transaction ID: 51219.C166167	
City Picayune State MS Zip Code 39466	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer MS House of Rep. Occupation Legislator	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. Margaret Hall		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 109 Glen Eagle Road		Transaction ID: 51219.C166175	
City Oxford State MS Zip Code 38655-2611	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cypress Co. Occupation Business Development	Aggregate Year-to-Date ▼ 340.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Anne Ross		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address P. O. Drawer B		Transaction ID: 51219.C166178	
City Eupora State MS Zip Code 39744-0991	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A Occupation Housewife	Aggregate Year-to-Date ▼ 420.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	40.00
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 29 / 77
	<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 D. Dennis

Mailing Address P. O. Box 6181

City State Zip Code
Gulfport MS 39506-6181

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

Name of Employer
Specialty Contractors/assoc.
Occupation
Contractor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166182

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 5203 Bradwood

City State Zip Code
Springfield VA 22151

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

Name of Employer
Postal Rate Comm.
Occupation
Commissioner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166185

Amount of Each Receipt this Period
10.00

Receipt

C. Full Name (Last, First, Middle Initial)
B. Keith Heard

Mailing Address 1300 Connecticut Avenue, NW, #600

City State Zip Code
Washington DC 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 ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166186

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	50.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address 404 Cherokee Drive

City State Zip Code
Booneville MS 38829

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

Name of Employer Occupation
Wbip Radio Station Broadcaster

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166195

Amount of Each Receipt this Period
20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Elsie Haygood

Mailing Address 1025 Wild Estates

City State Zip Code
McComb MS 39648-9449

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

Name of Employer Occupation
Central Bev. Inc. Bookkeeper

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166198

Amount of Each Receipt this Period
10.00

Receipt

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

Mailing Address 253 Ridge Drive

City State Zip Code
Jackson MS 39216

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

Name of Employer Occupation
Self Employed Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166204

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	50.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 77
	<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 ▼
540.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166206

Amount of Each Receipt this Period
20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Robert Daniels

Mailing Address 1430 Whispering Pines Circle

City State Zip Code
Starkville MS 39759

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

Name of Employer Occupation
Miss. State Univ. Forester

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166207

Amount of Each Receipt this Period
10.00

Receipt

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

Mailing Address P. O. Box 745

City State Zip Code
Winona MS 38967

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

Name of Employer Occupation
Winona Packing Company Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166220

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	50.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address 530 School St.

City State Zip Code
Clarksdale MS 38614

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
12 / 06 / 2005

Transaction ID: 51219.C166223

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 113 Darrowsby Place

City State Zip Code
Madison MS 39110

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

Name of Employer JOAMCA Chemical Products Occupation Manufacturer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1080.00

Date of Receipt
MM / DD / YYYY
12 / 06 / 2005

Transaction ID: 51219.C166229

Amount of Each Receipt this Period
40.00

Receipt

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

Mailing Address 3155 W. Tidewater Lane

City State Zip Code
Madison MS 39110-8928

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

Name of Employer Madison County Occupation Chancery Clerk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
12 / 06 / 2005

Transaction ID: 51219.C166230

Amount of Each Receipt this Period
15.00

Receipt

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 77
	<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)
Stewart Welch

Mailing Address 4730 W. Cheryl Drive

City State Zip Code
Jackson MS 39211-5812

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

Name of Employer Occupation
Browning & Welch Inc Geologist

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 2 / 1 9 / 2 0 0 5

Transaction ID: 60106.C166429

Amount of Each Receipt this Period
120.00

Receipt

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

Mailing Address P.O. Box 889

City State Zip Code
Brookhaven MS 39602

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

Name of Employer Occupation
State Bank & Trust Co. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166231

Amount of Each Receipt this Period
25.00

Receipt

C. Full Name (Last, First, Middle Initial)
R. C. Hammond, Jr.

Mailing Address 522 Lee Avenue

City State Zip Code
Crystal Springs MS 39059-2548

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 ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166233

Amount of Each Receipt this Period
10.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	155.00
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 34 / 77
	<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) A. Kathryn Arant		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 3731 Highway 8		Transaction ID: 51219.C166240	
City State Zip Code Ruleville MS 38771		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Self Occupation Farmer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. Ralph Germany		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 2853 Myrtlewood Drive		Transaction ID: 51219.C166242	
City State Zip Code Meridian MS 39307-4557		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Dist 3 Lauderdale County Occupation Election Comm			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Ike D. Hopper		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address Route 1, Box 145		Transaction ID: 51219.C166249	
City State Zip Code Porterville MS 39352-9739		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

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 35 / 77
	<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)
Walter C. Scott

Mailing Address 159 Meadowview Street

City State Zip Code
Jackson MS 39209-3206

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

Name of Employer Self Occupation Business Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 5

Transaction ID: 60106.C166420

Amount of Each Receipt this Period
50.00

Receipt

B. Full Name (Last, First, Middle Initial)
Allen C. Reno, Jr.

Mailing Address P.O. Box 2864

City State Zip Code
Jackson MS 39207

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

Name of Employer Stop Lawsuit Abuse Occupation Executive Director

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 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166253

Amount of Each Receipt this Period
10.00

Receipt

C. 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 ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166261

Amount of Each Receipt this Period
30.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	90.00
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 36 / 77
	<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)
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 Occupation
JPB Pathology, Inc. Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
4720.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166267

Amount of Each Receipt this Period
10.00

Receipt

B. 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 Occupation
Self Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166268

Amount of Each Receipt this Period
20.00

Receipt

C. Full Name (Last, First, Middle Initial)
Mick Bullock

Mailing Address 2002 Bayberry Dr.

City State Zip Code
Jackson MS 39232

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

Name of Employer Occupation
Fred Buhner Real Estate Real Estate

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 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166272

Amount of Each Receipt this Period
10.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	40.00
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 37 / 77
	<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)
Jim Perry

Mailing Address 6295 Old Canton Road
Apt. 9A

City Jackson State MS Zip Code 39211

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

Name of Employer State Of Mississippi Occupation Policy Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
12 / 06 / 2005

Transaction ID: 51219.C166273

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address P. O. Box 547

City Magee State MS Zip Code 39111

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

Name of Employer N/A Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
12 / 06 / 2005

Transaction ID: 51219.C166274

Amount of Each Receipt this Period
15.00

Receipt

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

Mailing Address 17064 Magnolia Drive

City Pass Christian State MS Zip Code 39571

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
12 / 06 / 2005

Transaction ID: 51219.C166275

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:	PAGE 38 / 77
	(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)
Kay S. Patterson

Mailing Address 201 Mayson Avenue

City State Zip Code
Columbia MS 39429

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

Name of Employer Occupation
Fred Buhrer Real Estate Real Estate

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166280

Amount of Each Receipt this Period
20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Kenneth Duncan

Mailing Address 1068 CR 12

City State Zip Code
Myrtle MS 38650

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

Name of Employer Occupation
N/A Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166300

Amount of Each Receipt this Period
20.00

Receipt

C. Full Name (Last, First, Middle Initial)
Nan B. Lott

Mailing Address 103 Eastwood Drive

City State Zip Code
Columbus MS 39702

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

Name of Employer Occupation
N/A Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166308

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	60.00
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 39 / 77
	<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)
Scott Carmichael

Mailing Address 369 Crittenden

City State Zip Code
Greenville MS 38701

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

Name of Employer Occupation
Planters Bank Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166312

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 202 Weathersby Road

City State Zip Code
Hattiesburg MS 39402

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166329

Amount of Each Receipt this Period
30.00

Receipt

C. Full Name (Last, First, Middle Initial)
Georgia Sheffield

Mailing Address 2822 Nashville Ferry Road E.

City State Zip Code
Columbus MS 39702

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 ▼ 870.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166332

Amount of Each Receipt this Period
10.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	60.00
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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	PAGE 40 / 77
	(check only one)	<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)
Charles Pittman

Mailing Address P.O. Box 211

City State Zip Code
Raymond MS 39154

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

Name of Employer State Of Mississippi Occupation Constituent Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166344

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 2845 Highway 14 East

City State Zip Code
Louisville MS 39339

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 5

Transaction ID: 60106.C166418

Amount of Each Receipt this Period
20.00

Receipt

C. Full Name (Last, First, Middle Initial)
Virginia Carlton

Mailing Address 18 Hassellwood Road

City State Zip Code
Columbia MS 39429

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

Name of Employer State Of Mississippi Occupation Legislator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166347

Amount of Each Receipt this Period
15.00

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:	PAGE 41 / 77
	(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)
Sally W. Birdsall

Mailing Address 6145 Lake Trace Circle

City State Zip Code
Jackson MS 39211

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

Name of Employer N/A Occupation Housewife

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166356

Amount of Each Receipt this Period
20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Arnold S. Hederman

Mailing Address 1051 Northpointe Dr.

City State Zip Code
Jackson MS 39211

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

Name of Employer Miss, Rep. Party Occupation Exec. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166357

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address P.O. Box 219

City State Zip Code
Harrisville MS 39082

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166362

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	60.00
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 42 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address 112 Lakeview Court

City State Zip Code
Madison MS 39110

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

Name of Employer Self Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166366

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 ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166368

Amount of Each Receipt this Period
20.00

Receipt

C. Full Name (Last, First, Middle Initial)
Bryan Shaver

Mailing Address 6180 Spring Crossing

City State Zip Code
Olive Branch MS 38654

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

Name of Employer Brown and Haynes Insurance Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166376

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	60.00
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 43 / 77
	<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)
Brenda Willis

Mailing Address P.O. Box 27

City State Zip Code
Caledonia MS 39740

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

Name of Employer N/A Occupation Home Maker

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 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166380

Amount of Each Receipt this Period
10.00

Receipt

B. 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 ▼ 960.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166381

Amount of Each Receipt this Period
80.00

Receipt

C. Full Name (Last, First, Middle Initial)
Bruce Longest

Mailing Address 122 Cooper Dr.

City State Zip Code
Bruce MS 38915

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

Name of Employer Self Employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166385

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	110.00
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 44 / 77
	<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)
Wilbur Colom

Mailing Address 406 3rd Ave. N.

City Columbus State MS Zip Code 39703

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

Name of Employer Colom Law Firm, LLC Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166387

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address P.O. Box 1199

City Cleveland State MS Zip Code 38732

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 ▼ 680.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166388

Amount of Each Receipt this Period
40.00

Receipt

C. Full Name (Last, First, Middle Initial)
David Young

Mailing Address 4414 Hwy. 178 West

City Red Banks State MS Zip Code 38661

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

Name of Employer D & B Transport Occupation Owner/manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 5

Transaction ID: 51219.C166390

Amount of Each Receipt this Period
30.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	90.00
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 45 / 77
	<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) Francis Rullan Mailing Address 1613 Linden Place City State Zip Code Jackson MS 39202 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5 Transaction ID: 51219.C166391 Amount of Each Receipt this Period 20.00 Receipt
Name of Employer Occupation Div. of Medicaid Director of Public Relations Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 340.00		

B. Full Name (Last, First, Middle Initial) Lynn McAlpin Mailing Address 1207 Beauregard City State Zip Code Tupelo MS 38801 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5 Transaction ID: 51219.C166397 Amount of Each Receipt this Period 10.00 Receipt
Name of Employer Occupation N/A Homemaker Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 420.00		

C. Full Name (Last, First, Middle Initial) Stan Purvis Mailing Address 647 Wendover Way City State Zip Code Ridgeland MS 39157 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5 Transaction ID: 51219.C166406 Amount of Each Receipt this Period 10.00 Receipt
Name of Employer Occupation Trustmark National Bank Financial Advisor Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 520.00		

SUBTOTAL of Receipts This Page (optional)	▶	40.00
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:	PAGE 46 / 77
	(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)
David Koger

Mailing Address 1321 Queen St.

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
US Dept. of State Foreign Affairs Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
12 / 06 / 2005

Transaction ID: 51219.C166408

Amount of Each Receipt this Period
12.50

Receipt

B. Full Name (Last, First, Middle Initial)
Ann Keller

Mailing Address P.O. Box 9004

City State Zip Code
Columbus MS 39705

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 ▼
440.00

Date of Receipt
MM / DD / YYYY
12 / 06 / 2005

Transaction ID: 51219.C166409

Amount of Each Receipt this Period
10.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	22.50
TOTAL This Period (last page this line number only)	▶	2746.50

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 47 / 77	
	(check only one)			
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Friends of Phil Bryant

Mailing Address P. O. Box 5141

City	State	Zip Code
Brandon	MS	39047

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	6	/	2	0	0	5

Transaction ID: 51219.C166262

Amount of Each Receipt this Period
10.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	10.00
TOTAL This Period (last page this line number only)	▶	10.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 48 / 77	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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)
State Auto Insurance

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 5

Transaction ID: 60106.C166437

Amount of Each Receipt this Period

3219.36

Offsets to Operating Expenditure

SUBTOTAL of Receipts This Page (optional)	▶	3219.36
TOTAL This Period (last page this line number only)	▶	3219.36

**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) A. Mississippi State Tax Commission		Transaction ID: 60106.E10860 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 5
Mailing Address P. O. Box 960		Amount of Each Disbursement this Period 300.63
City Jackson State MS Zip Code 39205-	-PAYROLL TAXES	
Purpose of Disbursement -Payroll Taxes		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mississippi State Tax Commission		Transaction ID: 60106.E10859 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5
Mailing Address P. O. Box 960		Amount of Each Disbursement this Period 102.51
City Jackson State MS Zip Code 39205-	-PAYROLL TAXES	
Purpose of Disbursement -Payroll Taxes		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. ADP, Inc.		Transaction ID: 60106.E10848 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 5
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 69.52
City Atlanta State GA Zip Code 30328-	-PAYROLL PROCESSING FEES	
Purpose of Disbursement -Payroll Processing Fees		001 Category/ Type
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	472.66
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Mamie C. Taylor		Transaction ID: 51219.E10809 Date of Disbursement 12 / 06 / 2005	
Mailing Address 408 Timber Ridge Way		Amount of Each Disbursement this Period 105.12	
City Brandon	State MS	Zip Code 39047-	REIMBURSEMENT: SEE BELOW
Purpose of Disbursement REIMBURSEMENT: SEE BELOW		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Blue Cross & Blue Shield of MS		Transaction ID: 60317.E11170 Date of Disbursement 12 / 06 / 2005	
Mailing Address P. O. Box 23082		Amount of Each Disbursement this Period 105.12	
City Jackson	State MS	Zip Code 39225-3082	[MEMO ITEM] MEMO: -HEALTH INSURANCE
Purpose of Disbursement -Health Insurance		Category/ Type 001	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mississippi Employment Security Comm.		Transaction ID: 60106.E10861 Date of Disbursement 12 / 28 / 2005	
Mailing Address P O Box 22781		Amount of Each Disbursement this Period 48.12	
City Jackson	State MS	Zip Code 39225-2781	-PAYROLL TAXES
Purpose of Disbursement -Payroll Taxes		Category/ Type 001	
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) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	153.24
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Mississippi State Tax Commission		Transaction ID: 51219.E10825	
Mailing Address P. O. Box 960		Date of Disbursement 12 / 15 / 2005	
City Jackson	State MS	Zip Code 39205-	Amount of Each Disbursement this Period 300.63
Purpose of Disbursement -Payroll Taxes		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	-PAYROLL TAXES		

Full Name (Last, First, Middle Initial) B. Fred Dunlap		Transaction ID: 60317.E11184	
Mailing Address 126 Morrow Road		Date of Disbursement 12 / 07 / 2005	
City Brandon	State MS	Zip Code 39042-	Amount of Each Disbursement this Period 456.00
Purpose of Disbursement -Contract Employment		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	-CONTRACT EMPLOYMENT		

Full Name (Last, First, Middle Initial) C. Mississippi Employment Security Comm.		Transaction ID: 51219.E10826	
Mailing Address P O Box 22781		Date of Disbursement 12 / 15 / 2005	
City Jackson	State MS	Zip Code 39225-2781	Amount of Each Disbursement this Period 48.12
Purpose of Disbursement -Payroll Taxes		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	-PAYROLL TAXES		

SUBTOTAL of Disbursements This Page (optional)	804.75
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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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) A. Internal Revenue Service		Transaction ID: 60106.E10858	
Mailing Address P. O. Box 70503		Date of Disbursement 12 / 28 / 2005	
City Charlotte	State NC	Zip Code 28272-0503	Amount of Each Disbursement this Period 2171.02
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. Butchart, Ellzey & Assoc., PC		Transaction ID: 51219.E10829	
Mailing Address P. O. Box 629		Date of Disbursement 12 / 19 / 2005	
City Canton	State MS	Zip Code 39046-0629	Amount of Each Disbursement this Period 1001.00
Purpose of Disbursement -Accounting Fees		001 Category/ Type	
Candidate Name		-ACCOUNTING FEES	
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) C. Internal Revenue Service		Transaction ID: 51219.E10824	
Mailing Address P. O. Box 70503		Date of Disbursement 12 / 15 / 2005	
City Charlotte	State NC	Zip Code 28272-0503	Amount of Each Disbursement this Period 2171.04
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:			

SUBTOTAL of Disbursements This Page (optional)	5343.06
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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) A. ADP, Inc.		Transaction ID: 51219.E10818 Date of Disbursement 12 / 15 / 2005	
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 69.52	
City Atlanta State GA Zip Code 30328-	Purpose of Disbursement -Payroll Processing Fees	001 Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	-PAYROLL PROCESSING FEES		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Transaction ID: 60106.E10857 Date of Disbursement 12 / 21 / 2005	
Mailing Address P. O. Box 70503		Amount of Each Disbursement this Period 890.74	
City Charlotte State NC Zip Code 28272-0503	Purpose of Disbursement -Payroll Processing Fees	001 Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	-PAYROLL PROCESSING FEES		

Full Name (Last, First, Middle Initial) C. ADP, Inc.		Transaction ID: 60106.E10847 Date of Disbursement 12 / 21 / 2005	
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 65.54	
City Atlanta State GA Zip Code 30328-	Purpose of Disbursement -Payroll Processing Fees	001 Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	-PAYROLL PROCESSING FEES		

SUBTOTAL of Disbursements This Page (optional) ▶	1025.80
TOTAL This Period (last page this line number only) ▶	7799.51

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) A. Nathan Wells		Transaction ID: 51219.E10823 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 5
Mailing Address 790 Highpoint Drive		Amount of Each Disbursement this Period 1191.36
City Byram State MS Zip Code 39272-	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. Mamie C. Taylor		Transaction ID: 60106.E10852 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 5
Mailing Address 408 Timber Ridge Way		Amount of Each Disbursement this Period 1136.06
City Brandon State MS Zip Code 39047-	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) C. Edna K. Apostle		Transaction ID: 60106.E10855 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 5
Mailing Address 974 Bayridge Drive		Amount of Each Disbursement this Period 1128.85
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

SUBTOTAL of Disbursements This Page (optional) ▶	3456.27
TOTAL 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) A. Mamie C. Taylor		Transaction ID: 51219.E10822 Date of Disbursement 12 / 15 / 2005	
Mailing Address 408 Timber Ridge Way		Amount of Each Disbursement this Period 1136.06	
City Brandon	State MS	Zip Code 39047-	Category/ Type FEA SALARY
Purpose of Disbursement FEA SALARY		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Arnold S. Hederman		Transaction ID: 51219.E10820 Date of Disbursement 12 / 15 / 2005	
Mailing Address 1051 Northpointe Dr.		Amount of Each Disbursement this Period 2306.75	
City Jackson	State MS	Zip Code 39211-	Category/ Type FEA SALARY
Purpose of Disbursement FEA SALARY		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Nathan Wells		Transaction ID: 60106.E10854 Date of Disbursement 12 / 28 / 2005	
Mailing Address 790 Highpoint Drive		Amount of Each Disbursement this Period 1191.36	
City Byram	State MS	Zip Code 39272-	Category/ Type FEA SALARY
Purpose of Disbursement FEA SALARY		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	4634.17
TOTAL 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) A. Mamie C. Taylor		Transaction ID: 60106.E10851 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5
Mailing Address 408 Timber Ridge Way		Amount of Each Disbursement this Period 1009.45
City State Zip Code Brandon MS 39047-	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. Richard C. Lacey		Transaction ID: 60106.E10850 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 5
Mailing Address 50 Northtown Drive 6 G		Amount of Each Disbursement this Period 1196.36
City State Zip Code Jackson MS 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) C. Edna K. Apostle		Transaction ID: 51219.E10819 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 5
Mailing Address 974 Bayridge Drive		Amount of Each Disbursement this Period 1128.85
City State Zip Code Jackson MS 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

SUBTOTAL of Disbursements This Page (optional) ▶	3334.66
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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) A. Arnold S. Hederman		Transaction ID: 60106.E10856 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 5	
Mailing Address 1051 Northpointe Dr.		Amount of Each Disbursement this Period 2306.75	
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. Nathan Wells		Transaction ID: 60106.E10853 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5	
Mailing Address 790 Highpoint Drive		Amount of Each Disbursement this Period 1149.15	
City Byram State MS Zip Code 39272-	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) C. Richard C. Lacey		Transaction ID: 60106.E10849 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5	
Mailing Address 50 Northtown Drive 6 G		Amount of Each Disbursement this Period 1154.15	
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	

SUBTOTAL of Disbursements This Page (optional) ▶	4610.05
TOTAL 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 58 / 77

<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)

A. Richard C. Lacey

Mailing Address 50 Northtown Drive
6 G

City Jackson State MS Zip Code 39211-

Purpose of Disbursement
FEA SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 51219.E10821

Date of Disbursement

12 / 15 / 2005

Amount of Each Disbursement this Period

1196.35

FEA SALARY

SUBTOTAL of Disbursements This Page (optional)

1196.35

TOTAL This Period (last page this line number only)

17231.50

METHOD OF ALLOCATION FOR:

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

NAME OF COMMITTEE (In Full)
 Mississippi Republican Party

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

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

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

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

or

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

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

- Administrative Generic Voter Drive Public Communications Referencing Party Only

METHOD OF ALLOCATION FOR:

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

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

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

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

or

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

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

- Administrative
- Generic Voter Drive
- Public Communications Referencing Party Only

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Methods of allocation :

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

ACTIVITY OR EVENT IDENTIFIER
2006 SUSTAINING MEMBERSHIP

ACTIVITY IS:

- Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

- New Revised Same as Previously Reported

FEDERAL %

98.00 %

NONFEDERAL %

2.00 %

**Transaction ID:
H2160106.J18**

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

NAME OF COMMITTEE (In Full)
 Mississippi Republican Party

NAME OF ACCOUNT Mississippi Rep P. O. Box 60	DATE OF RECEIPT M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 15000.00
--	---	--------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	15000.00	Transaction ID: H351219.C165838
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	15000.00
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	15000.00

**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) Brads Green Machine			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																					
Mailing Address P.O. Box 41			Allocated Activity or Event Year-To-Date 197107.83																					
City Star	State MS	Zip Code 39167-	Category/ Type 001																					
Purpose of Disbursement: 001-Lawn Maintenance			Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: H451202.E10790		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	2	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y															
1	2	/	0	2	/	2	0	0	5															
Activity or Event Identifier: ADMINISTRATION B 3																								

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.85		67.15		85.00

B. Full Name (Last, First, Middle Initial) Platinum Plus for Business			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																					
Mailing Address P.O. Box 15469			Allocated Activity or Event Year-To-Date 198270.54																					
City Wilmington	State DE	Zip Code 19886-5469	Category/ Type																					
Purpose of Disbursement: Credit Card: See Below			Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: H451202.E10793		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	2	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y															
1	2	/	0	2	/	2	0	0	5															
Activity or Event Identifier: ADMINISTRATION B 3																								

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
244.17		918.54		1162.71

C. Full Name (Last, First, Middle Initial) Platinum Plus for Business			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																					
Mailing Address P.O. Box 15469			Allocated Activity or Event Year-To-Date 198422.47																					
City Wilmington	State DE	Zip Code 19886-5469	Category/ Type																					
Purpose of Disbursement: Credit Card: See Below			Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: H451202.E10794		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	2	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y															
1	2	/	0	2	/	2	0	0	5															
Activity or Event Identifier: ADMINISTRATION B 3																								

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.91		120.02		151.93

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
293.93		1105.71		1399.64

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) Platinum Plus for Business			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 15469			Allocated Activity or Event Year-To-Date 201381.02		
City Wilmington	State DE	Zip Code 19886-5469	Date <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>		
Purpose of Disbursement: Credit Card: See Below			Transaction ID: H451202.E10792		
Activity or Event Identifier: ADMINISTRATION B 3			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
621.30		2337.25		2958.55

B. Full Name (Last, First, Middle Initial) Richard C. Lacey			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 Northtown Drive 6 G			Allocated Activity or Event Year-To-Date 201519.02		
City Jackson	State MS	Zip Code 39211-	Date <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>		
Purpose of Disbursement: 002-Mileage			Transaction ID: H451219.E10808		
Activity or Event Identifier: ADMINISTRATION B 3			Category/Type 002		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.98		109.02		138.00

C. Full Name (Last, First, Middle Initial) Edna K. Apostle			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 974 Bayridge Drive			Allocated Activity or Event Year-To-Date 201544.65		
City Jackson	State MS	Zip Code 39211-	Date <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>		
Purpose of Disbursement: Reimbursement: See Below			Transaction ID: H451219.E10807		
Activity or Event Identifier: ADMINISTRATION B 3			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.38		20.25		25.63

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
655.66		2466.52		3122.18

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) Fred Dunlap			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 126 Morrow Road			Allocated Activity or Event Year-To-Date 201702.25		
City Brandon	State MS	Zip Code 39042-	Date <input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Reimbursement: See Below			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H460317.E11185		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.10		124.50		157.60

B. Full Name (Last, First, Middle Initial) Fred Dunlap			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 126 Morrow Road			Allocated Activity or Event Year-To-Date 202377.25		
City Brandon	State MS	Zip Code 39042-	Date <input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: 002-Mileage			Category/ Type 002		
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H451219.E10812		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
141.75		533.25		675.00

C. Full Name (Last, First, Middle Initial) 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 202389.25		
City Brandon	State MS	Zip Code 39042-	Date <input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: 001-Bank Charges			Category/ Type 001		
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H451219.E10816		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.52		9.48		12.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.37		667.23		844.60

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)
Natalie Cole

Mailing Address
250 Jacks Place

City	State	Zip Code	
Brandon	MS	39047-	002

Purpose of Disbursement:
002-Mileage

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
202593.25

Date / /
Transaction ID: H451219.E10814

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.84		161.16		204.00

B. Full Name (Last, First, Middle Initial)
Entergy - Eastern Region

Mailing Address
P. O. Box 61825

City	State	Zip Code	
New Orleans	LA	70161-	001

Purpose of Disbursement:
001-Electricity

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
203073.55

Date / /
Transaction ID: H451219.E10832

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.86		379.44		480.30

C. Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address
P. O. Box 94515

City	State	Zip Code	
Palatine	IL	60094-4515	001

Purpose of Disbursement:
001-Postage/Shipping

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
203097.75

Date / /
Transaction ID: H451219.E10834

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.08		19.12		24.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
148.78		559.72		708.50

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

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) U. S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address General Mail Facility			Allocated Activity or Event Year-To-Date 203247.75	
City Jackson	State MS	Zip Code 39201-	Category/ Type 001	
Purpose of Disbursement: 001-Postage Fees #312			Date M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 5	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H451219.E10835	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.50		118.50		150.00

B. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 856460			Allocated Activity or Event Year-To-Date 203472.45	
City Louisville	State KY	Zip Code 40285-6460	Category/ Type 001	
Purpose of Disbursement: 001-Postage Equipment			Date M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 5	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H451219.E10837	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.19		177.51		224.70

C. Full Name (Last, First, Middle Initial) 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 203561.95	
City Meadville	State MS	Zip Code 39653-0519	Category/ Type 001	
Purpose of Disbursement: 001-Cell Phone			Date M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 5	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H451219.E10830	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.80		70.70		89.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.49		366.71		464.20

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

A. Full Name (Last, First, Middle Initial) Marlin Leasing Corp.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 13604			Allocated Activity or Event Year-To-Date 203835.99		
City Philadelphia	State PA	Zip Code 19101-3604	Date M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 5		
Purpose of Disbursement: 001-Postage Meter			Transaction ID: H451219.E10839		
Activity or Event Identifier: ADMINISTRATION B 3					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.55		216.49		274.04

B. Full Name (Last, First, Middle Initial) Exell Companies			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 5393			Allocated Activity or Event Year-To-Date 203860.87		
City Jackson	State MS	Zip Code 39296-	Date M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 5		
Purpose of Disbursement: 001-Water/Office Supplies			Transaction ID: H451219.E10833		
Activity or Event Identifier: ADMINISTRATION B 3					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.22		19.66		24.88

C. Full Name (Last, First, Middle Initial) 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 204267.98		
City Louisville	State KY	Zip Code 40290-1949	Date M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 5		
Purpose of Disbursement: 001-Utilities-Gas			Transaction ID: H451219.E10828		
Activity or Event Identifier: ADMINISTRATION B 3					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.49		321.62		407.11

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
148.26		557.77		706.03

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Allied Waste Service
Mailing Address
Jackson 1035 Old Brandon Road
City State Zip Code
Flowood MS 39232-
Purpose of Disbursement:
001-Garbage Pickup
Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
204367.81
Date 12 / 19 / 2005
Transaction ID: H451219.E10827

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.96		78.87		99.83

B. Full Name (Last, First, Middle Initial)
Regions Commercial Loans
Mailing Address
Department 2521 P.O. Box 2153
City State Zip Code
Birmingham AL 35287-
Purpose of Disbursement:
001-Building Mortgage
Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
207828.12
Date 12 / 19 / 2005
Transaction ID: H451219.E10838

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
726.67		2733.64		3460.31

C. Full Name (Last, First, Middle Initial)
Central Mississippi Telephone Service
Mailing Address
107 Shadia Drive
City State Zip Code
Clinton MS 39056-
Purpose of Disbursement:
001-Telephone Repairs
Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
207897.67
Date 12 / 19 / 2005
Transaction ID: H451219.E10831

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.61		54.94		69.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
762.24		2867.45		3629.69

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) BellSouth			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 105262			Allocated Activity or Event Year-To-Date 208324.04	
City Atlanta	State GA	Zip Code 30348-5262	Date <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: 001-Telephone			Transaction ID: H451219.E10836	
Activity or Event Identifier: ADMINISTRATION B 3			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.54		336.83		426.37

B. Full Name (Last, First, Middle Initial) Nathan Wells			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 790 Highpoint Drive			Allocated Activity or Event Year-To-Date 208434.04	
City Byram	State MS	Zip Code 39272-	Date <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: 002-Mileage			Transaction ID: H460106.E10844	
Activity or Event Identifier: ADMINISTRATION B 3			Category/Type 002	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.10		86.90		110.00

C. Full Name (Last, First, Middle Initial) Natalie Cole			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 250 Jacks Place			Allocated Activity or Event Year-To-Date 208511.04	
City Brandon	State MS	Zip Code 39047-	Date <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: 002-Mileage			Transaction ID: H460106.E10842	
Activity or Event Identifier: ADMINISTRATION B 3			Category/Type 002	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.17		60.83		77.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
128.81		484.56		613.37

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) Steven Carter			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 11504 Myrtleville Road			Allocated Activity or Event Year-To-Date 208577.04	
City Bentonla	State MS	Zip Code 39040-	Date M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Purpose of Disbursement: 002-Mileage			Transaction ID: H460106.E10843	
Activity or Event Identifier: ADMINISTRATION B 3				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.86		52.14		66.00

B. Full Name (Last, First, Middle Initial) Dennerys, 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 330 Greymont Avenue			Allocated Activity or Event Year-To-Date 74.84	
City Jackson	State MS	Zip Code 39202-3599	Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5	
Purpose of Disbursement: 001-Luncheon			Transaction ID: H460106.E10894	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]001-Luncheon				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.72		59.12		74.84

C. Full Name (Last, First, Middle Initial) Sylvester Management 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 986			Allocated Activity or Event Year-To-Date 12.50	
City Irmo	State SC	Zip Code 29063-	Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5	
Purpose of Disbursement: 001-Seminar Fees			Transaction ID: H460106.E10881	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]001-Seminar Fees				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.63		9.87		12.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.86		52.14		66.00

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)
Top It Off

Mailing Address
4085 Northview Drive

City State Zip Code
Jackson MS 39206-

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

66.34

Activity or Event Identifier:
ADMINISTRATION B 3

[MEMO ITEM]001-Meeting Supplies

Date 12 / 02 / 2005

Transaction ID: H460106.E10885

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.93		52.41		66.34

B. Full Name (Last, First, Middle Initial)
WalMart

Mailing Address
815 South Wheatley

City State Zip Code
Ridgeland MS 39157-

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

68.35

Activity or Event Identifier:
ADMINISTRATION B 3

[MEMO ITEM]001-Meeting Supplies

Date 12 / 02 / 2005

Transaction ID: H460106.E10882

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.35		54.00		68.35

C. Full Name (Last, First, Middle Initial)
Mississippi Parking Assoc.

Mailing Address
Jackson Intern. Airport

City State Zip Code
Pearl MS 39208-

002

Purpose of Disbursement:
002-Parking

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

40.00

Activity or Event Identifier:
ADMINISTRATION B 3

[MEMO ITEM]002-Parking

Date 12 / 02 / 2005

Transaction ID: H460106.E10888

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.40		31.60		40.00

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)
Kroger

Mailing Address
4910 I-55 North

City State Zip Code
Jackson MS 39206-

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

141.58

Activity or Event Identifier:
ADMINISTRATION B 3

[MEMO ITEM] 001-Meeting Supplies

Date 12 / 02 / 2005

Transaction ID: H460106.E10891

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.73		111.85		141.58

B. Full Name (Last, First, Middle Initial)
Montgomery Hardware

Mailing Address
2801 Old Canton Road

City State Zip Code
Jackson MS 39216-

001

Purpose of Disbursement:
001-Building 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

18.67

Activity or Event Identifier:
ADMINISTRATION B 3

[MEMO ITEM] 001-Building Supplies

Date 12 / 02 / 2005

Transaction ID: H460106.E10884

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.92		14.75		18.67

C. Full Name (Last, First, Middle Initial)
Que Sera Sera

Mailing Address
2801 North State Street

City State Zip Code
Jackson MS 39216-

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

9.84

Activity or Event Identifier:
ADMINISTRATION B 3

[MEMO ITEM] 001-Luncheon

Date 12 / 02 / 2005

Transaction ID: H460106.E10893

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.07		7.77		9.84

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
Dallas TX 75261-

Purpose of Disbursement:
002-Airline Tickets

Activity or Event Identifier:
ADMINISTRATION B 3
[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
99.04

Date 12 / 02 / 2005
Transaction ID: H460106.E10886

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.80		78.24		99.04

B. Full Name (Last, First, Middle Initial)
Sony

Mailing Address
101 Fourth Street

City State Zip Code
San Francisco CA 94103-

Purpose of Disbursement:
001-Office Computer

Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]001-Office Computer

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
2792.69

Date 12 / 02 / 2005
Transaction ID: H460106.E10883

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
586.46		2206.23		2792.69

C. Full Name (Last, First, Middle Initial)
Little Rhein Steakhouse

Mailing Address
515 Villita St.

City State Zip Code
San Antonio TX 78205-

Purpose of Disbursement:
002-Meals

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

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
116.00

Date 12 / 02 / 2005
Transaction ID: H460106.E10887

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.36		91.64		116.00

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)
Crowne Plaza Riverwalk San Antonio
Mailing Address
111 E. Pecan St.
City San Antonio **State** TX **Zip Code** 78205-
Purpose of Disbursement:
002-Lodging
Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]002-Lodging

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
760.54
Date 12 / 02 / 2005
Transaction ID: H460106.E10889

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
159.71		600.83		760.54

B. Full Name (Last, First, Middle Initial)
Burger King
Mailing Address
1240 High Street
City Jackson **State** MS **Zip Code** 39202-
Purpose of Disbursement:
001-Luncheon
Activity or Event Identifier:
ADMINISTRATION B 3
[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
5.55
Date 12 / 02 / 2005
Transaction ID: H460106.E10890

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.17		4.38		5.55

C. Full Name (Last, First, Middle Initial)
Bull Market
Mailing Address
1325 Church Road West
City Southaven **State** MS **Zip Code** 38671-
Purpose of Disbursement:
002-Meals
Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]002-Meals

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
67.25
Date 12 / 02 / 2005
Transaction ID: H460106.E10892

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.12		53.13		67.25

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) Big Lots			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 5465 I-55 North			Allocated Activity or Event Year-To-Date 25.63	
City Jackson	State MS	Zip Code 39206-	Date M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Purpose of Disbursement: 001-Office Supplies			Transaction ID: H460317.E11167	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]001-Office Supplies				
FEDERAL SHARE		+	NONFEDERAL SHARE	
5.38			20.25	
		=	TOTAL AMOUNT	
			25.63	

B. Full Name (Last, First, Middle Initial) Pantry			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 320 W Government			Allocated Activity or Event Year-To-Date 84.85	
City Brandon	State MS	Zip Code 39042-	Date M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 5	
Purpose of Disbursement: 002-Gasoline			Transaction ID: H460317.E11187	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]002-Gasoline				
FEDERAL SHARE		+	NONFEDERAL SHARE	
17.82			67.03	
		=	TOTAL AMOUNT	
			84.85	

C. Full Name (Last, First, Middle Initial) Great Southern			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 206 E. Government			Allocated Activity or Event Year-To-Date 72.75	
City Brandon	State MS	Zip Code 39042-	Date M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 5	
Purpose of Disbursement: 002-Gasoline			Transaction ID: H460317.E11186	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]002-Gasoline				
FEDERAL SHARE		+	NONFEDERAL SHARE	
15.28			57.47	
		=	TOTAL AMOUNT	
			72.75	

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) Miss. Rep. Party - State			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 60			Allocated Activity or Event Year-To-Date 211120.33	
City Jackson	State MS	Zip Code 39205-	Date M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 0 5	
Purpose of Disbursement: 001-Insurance Proceeds			Category/ Type 001	
Activity or Event Identifier: ADMINISTRATION B 4			Transaction ID: H460130.E10993	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2543.29		0.00		2543.29

B. Full Name (Last, First, Middle Initial) Southwest Publishing			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 376			Allocated Activity or Event Year-To-Date 11102.98	
City Topeka	State KS	Zip Code 66601-0376	Date M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Purpose of Disbursement: 003-2006 Sustaining Direct Mail			Category/ Type 003	
Activity or Event Identifier: 2006 SUSTAINING MEMBERSHIP			Transaction ID: H460106.E10840	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4699.65		95.91		4795.56

C. Full Name (Last, First, Middle Initial) Southwest Publishing			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 376			Allocated Activity or Event Year-To-Date 11102.98	
City Topeka	State KS	Zip Code 66601-0376	Date M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Purpose of Disbursement: 003-2006 Sustaining Direct Mail			Category/ Type 003	
Activity or Event Identifier: 2006 SUSTAINING MEMBERSHIP			Transaction ID: H460106.E10841	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6181.27		126.15		6307.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13424.21		222.06		13646.27

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
15850.61		9349.87		25200.48