



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**LAFAYETTE COUNTY DEMOCRATIC PARTY**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>	<input type="text" value="583.81"/>	<input type="text" value="583.81"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="583.81"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="6750.90"/>	<input type="text" value="6750.90"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="7334.71"/>	<input type="text" value="7334.71"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4947.61"/>	<input type="text" value="4947.61"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2387.10"/>	<input type="text" value="2387.10"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

LAFAYETTE COUNTY DEMOCRATIC PARTY

Report Covering the Period: From: 07 / 01 / 2023 To: 12 / 31 / 2023

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	2765.08	2765.08
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2765.08	2765.08
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2765.08	2765.08
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	3985.82	3985.82
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	6750.90	6750.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6750.90	6750.90

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
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 Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	4947.61	4947.61
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4947.61	4947.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4947.61	4947.61

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2765.08	2765.08
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2765.08	2765.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 10
<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 type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**LAFAYETTE COUNTY DEMOCRATIC PARTY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Lafayette County Criminal Court Escrow</b>		Date of Receipt
Mailing Address 1 Courthouse Square		<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2023"/>
City Oxford	State MS	Zip Code 38655
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.4214</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="600.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	Reimbursement for Funds Taken

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Lafayette County Criminal Court Escrow</b>		Date of Receipt
Mailing Address 1 Courthouse Square		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2023"/>
City Oxford	State MS	Zip Code 38655
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.4152</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="1100.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1700.00"/>	Reimbursement for Funds Taken

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Lafayette County Criminal Court Escrow</b>		Date of Receipt
Mailing Address 1 Courthouse Square		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2023"/>
City Oxford	State MS	Zip Code 38655
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.4215</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="1200.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="2900.00"/>	Reimbursement for Funds Taken

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="2900.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 10
<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 type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LAFAYETTE COUNTY DEMOCRATIC PARTY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. LAFAYETTE COUNTY DEMOCRATIC PARTY**

Mailing Address PO Box 1462

City OXFORD	State MS	Zip Code 38655
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FEC ID number of contributing federal political committee. **C** C00532788

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
582.63

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2023

**Transaction ID : SA17.4100**

Amount of Each Receipt this Period  
582.63

Memo Item  
Restitution for Funds Stolen

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Public Results LLC**

Mailing Address 1601 Lincoln S

City Berkeley	State CA	Zip Code 94703
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2023

**Transaction ID : SA17.4198**

Amount of Each Receipt this Period  
500.00

Memo Item  
Grant

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1082.63
<b>TOTAL</b> This Period (last page this line number only).....	3982.63

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LAFAYETTE COUNTY DEMOCRATIC PARTY**

Full Name (Last, First, Middle Initial)

**A. LAFAYETTE COUNTY DEMOCRATIC PARTY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	15	/	2023

Mailing Address PO Box 1462

City OXFORD State MS Zip Code 38655

FEC Identification Number

C C00532788

**Transaction ID : SB29.4228**

Amount of Each Disbursement this Period

2500.00

Memo Item

Purpose of Disbursement

Local Candidate Contributions

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. LAFAYETTE COUNTY DEMOCRATIC PARTY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	01	/	2023

Mailing Address PO Box 1462

City OXFORD State MS Zip Code 38655

FEC Identification Number

C C00532788

**Transaction ID : SB29.4205**

Amount of Each Disbursement this Period

210.00

Memo Item

Purpose of Disbursement

Post Office Box Renewal

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. LAFAYETTE COUNTY DEMOCRATIC PARTY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	02	/	2023

Mailing Address PO Box 1462

City OXFORD State MS Zip Code 38655

FEC Identification Number

C C00532788

**Transaction ID : SB29.4201**

Amount of Each Disbursement this Period

18.00

Memo Item

Purpose of Disbursement

Google Suite

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

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

2728.00



SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid for line numbers: 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. Line 29 is checked.

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NAME OF COMMITTEE (In Full)

LAFAYETTE COUNTY DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. LAFAYETTE COUNTY DEMOCRATIC PARTY

Mailing Address PO Box 1462

City OXFORD

State MS

Zip Code 38655

Purpose of Disbursement Document Biz - Sample Ballot

Candidate Name

Office Sought: House, Senate, President

Disbursement For: 2023 Primary, General (checked), Other

State: District:

Date of Disbursement

Date field: 10 / 05 / 2023

FEC Identification Number

C00532788

Transaction ID : SB29.4202

Amount of Each Disbursement this Period

Amount field: 235.40

Memo Item

Full Name (Last, First, Middle Initial)

B. LAFAYETTE COUNTY DEMOCRATIC PARTY

Mailing Address PO Box 1462

City OXFORD

State MS

Zip Code 38655

Purpose of Disbursement Local Candidate Donations

Candidate Name

Office Sought: House, Senate, President

Disbursement For: 2023 Primary, General (checked), Other

State: District:

Date of Disbursement

Date field: 10 / 17 / 2023

FEC Identification Number

C00532788

Transaction ID : SB29.4206

Amount of Each Disbursement this Period

Amount field: 1450.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LAFAYETTE COUNTY DEMOCRATIC PARTY

Mailing Address PO Box 1462

City OXFORD

State MS

Zip Code 38655

Purpose of Disbursement Google Suite

Candidate Name

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other

State: District:

Date of Disbursement

Date field: 12 / 02 / 2023

FEC Identification Number

C00532788

Transaction ID : SB29.4224

Amount of Each Disbursement this Period

Amount field: 18.00

Memo Item

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

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

Subtotal field: 1703.40

Total field: 1703.40

# 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**LAFAYETTE COUNTY DEMOCRATIC PARTY**

**A. LAFAYETTE COUNTY DEMOCRATIC PARTY**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1462

City OXFORD State MS Zip Code 38655

Purpose of Disbursement Sanitation Worker Holiday Party

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
12 / 15 / 2023

FEC Identification Number: C C00532788  
Transaction ID : SB29.4225

Amount of Each Disbursement this Period: 300.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4731.40