

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

ALL CITIZENS FOR MISSISSIPPI

ADDRESS (number and street)

1750 ELLIS AVE., SUITE 600

☐ Check if different than previously reported. (ACC)

JACKSON

MS

39204

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00564351

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
Year-End 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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
05 24 2014

through

M M M / D D D / Y Y Y Y Y Y
06 30 2014

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 Jacqueline Vann

Signature of Treasurer

Jacqueline Vann

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 12 2015

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ALL CITIZENS FOR MISSISSIPPI

Report Covering the Period: From: M M / D D / Y Y Y Y 05 / 24 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y 2014		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19)	154340.00	154340.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	154340.00	154340.00
7. Total Disbursements (from Line 31)	117122.90	117122.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	37217.10	37217.10
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)	20577.81	



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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ALL CITIZENS FOR MISSISSIPPI

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

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).....	7150.00	7150.00
(ii) Unitemized	5190.00	5190.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	12340.00	12340.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	142000.00	142000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ►	154340.00	154340.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	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.).....	0.00	0.00
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))..... ►	154340.00	154340.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ►	154340.00	154340.00

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) 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	110125.00	110125.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	110125.00	110125.00
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)	6997.90	6997.90
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) 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)) ..	117122.90	117122.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	117122.90	117122.90

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	154340.00	154340.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	154340.00	154340.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	110125.00	110125.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	110125.00	110125.00

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

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

FOR LINE NUMBER: PAGE 6 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

ALL CITIZENS FOR MISSISSIPPI

Full Name (Last, First, Middle Initial)

A. Willie M Bozeman

Mailing Address 2757 Moncure Marble Road

City State Zip Code
Terry MS 39170

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 24 / 2014

Transaction ID : SA11AI.4256

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Lee R Bush

Mailing Address 432 Buena Vista Ave

City State Zip Code
Jackson MS 39209

FEC ID number of contributing federal political committee.

C

Name of Employer

NCS Trash & Garbage

Occupation

Self Employed Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 24 / 2014

Transaction ID : SA11AI.4212

Amount of Each Receipt this Period

500.00

Terry fundraiser

Full Name (Last, First, Middle Initial)

C. Toni D Colley

Mailing Address 1028 Whitsett Walk

City State Zip Code
Jackson MS 39206

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 24 / 2014

Transaction ID : SA11AI.4205

Amount of Each Receipt this Period

1000.00

Terry fundraiser

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 7 OF 24
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

ALL CITIZENS FOR MISSISSIPPI

Full Name (Last, First, Middle Initial)

A. Lillian M Cooley

Mailing Address 1116 Hallmark Dr

City State Zip Code
 Jackson MS 39206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 24 2014

Transaction ID : SA11AI.4232

Amount of Each Receipt this Period

500.00

Terry fundraiser

Full Name (Last, First, Middle Initial)

B. William M Cooley

Mailing Address 1116 Hallmark Dr

City State Zip Code
 Jackson MS 39206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 24 2014

Transaction ID : SA11AI.4208

Amount of Each Receipt this Period

1000.00

Terry fundraiser

Full Name (Last, First, Middle Initial)

C. James Covington

Mailing Address 1061 Whitsett Walk

City State Zip Code
 Jackson MS 39206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 24 2014

Transaction ID : SA11AI.4234

Amount of Each Receipt this Period

500.00

Terry fundraiser

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 24
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

ALL CITIZENS FOR MISSISSIPPI

Full Name (Last, First, Middle Initial)

A. Leland S Garrett

Mailing Address 2659 Livingston Road

City State Zip Code
 Jackson MS 39213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Garrett Enterprises/Constructi

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 24 2014

Transaction ID : SA11AI.4214

Amount of Each Receipt this Period

500.00

Terry fundraiser

Full Name (Last, First, Middle Initial)

B. Marvin Hogan

Mailing Address 111 Rock Glen Place

City State Zip Code
 Jackson MS 39206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 24 2014

Transaction ID : SA11AI.4227

Amount of Each Receipt this Period

250.00

Terry fundraiser

Full Name (Last, First, Middle Initial)

C. Dr. Hickman M Johnson

Mailing Address 1035 Devonshire Dr

City State Zip Code
 Jackson MS 39206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 24 2014

Transaction ID : SA11AI.4216

Amount of Each Receipt this Period

400.00

Terry fundraiser

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

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

1150.00

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

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

FOR LINE NUMBER: PAGE 9 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

ALL CITIZENS FOR MISSISSIPPI

Full Name (Last, First, Middle Initial)

A. Lemont Scott Group, LLC

Mailing Address 124 Sherwood Dr

City State Zip Code
 Brandon MS 39047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 24 / 2014

Transaction ID : SA11AI.4230

Amount of Each Receipt this Period

250.00

Terry fundraiser

Full Name (Last, First, Middle Initial)

B. Bob Owens

Mailing Address P O Box 808

City State Zip Code
 Jackson MS 39205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 24 / 2014

Transaction ID : SA11AI.4223

Amount of Each Receipt this Period

750.00

Terry fundraiser

Full Name (Last, First, Middle Initial)

C. Reddix Medical Group

Mailing Address 5903 Ridgewood Rd

City State Zip Code
 Jackson MS 39211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 24 / 2014

Transaction ID : SA11AI.4203

Amount of Each Receipt this Period

1000.00

Terry fundraiser

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 10 OF 24
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

ALL CITIZENS FOR MISSISSIPPI

Full Name (Last, First, Middle Initial)

A. Dr. Robert Smith

Mailing Address 1134 Winter Street

City State Zip Code
 Jackson MS 39204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 24 2014

Transaction ID : SA11AI.4225

Amount of Each Receipt this Period

250.00

Terry fundraiser

Full Name (Last, First, Middle Initial)

B.

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 Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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 Y Y

Amount of Each Receipt this Period

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

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

250.00

7150.00

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

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

FOR LINE NUMBER: PAGE 11 OF 24
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

ALL CITIZENS FOR MISSISSIPPI

Full Name (Last, First, Middle Initial)

A. Mississippi Conservatives

Mailing Address P O Box 2096

City State Zip Code
 Jackson MS 39225

FEC ID number of contributing
federal political committee.

C C00554774

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11C.4099

Amount of Each Receipt this Period

60000.00

Full Name (Last, First, Middle Initial)

B. Mississippi Conservatives

Mailing Address P O Box 2096

City State Zip Code
 Jackson MS 39225

FEC ID number of contributing
federal political committee.

C C00554774

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 20 / 2014

Transaction ID : SA11C.4101

Amount of Each Receipt this Period

65000.00

Full Name (Last, First, Middle Initial)

C. Mississippi Conservatives

Mailing Address P O Box 2096

City State Zip Code
 Jackson MS 39225

FEC ID number of contributing
federal political committee.

C C00554774

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

137000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 24 / 2014

Transaction ID : SA11C.4102

Amount of Each Receipt this Period

12000.00

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

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

137000.00

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

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

FOR LINE NUMBER: PAGE 12 OF 24

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

ALL CITIZENS FOR MISSISSIPPI

Full Name (Last, First, Middle Initial)

A. Mississippi Conservatives

Mailing Address P O Box 2096

City State Zip Code
Jackson MS 39225

FEC ID number of contributing
federal political committee.

C C00554774

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 27 2014

Transaction ID : SA11C.4103

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

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 Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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 Y Y

Amount of Each Receipt this Period

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

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

5000.00

142000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 24

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)

ALL CITIZENS FOR MISSISSIPPI

Full Name (Last, First, Middle Initial)

A. Ronny Barrett

Mailing Address 87 North Ratliff

City Morton State MS Zip Code 39117

Purpose of Disbursement
Door to door get out the vote efforts

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 12 2014
Transaction ID : SB21B.4130

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Ronny Barrett

Mailing Address 87 North Ratliff

City Morton State MS Zip Code 39117

Purpose of Disbursement
Door to door get out the vote efforts

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 17 2014
Transaction ID : SB21B.4136

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Best Solved Solutions, LLC

Mailing Address 695 Luckney Rd

City Brandon State MS Zip Code 39042

Purpose of Disbursement
Door to door get out the vote efforts

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 20 2014
Transaction ID : SB21B.4142

Amount of Each Disbursement this Period

19000.00

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

21500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 24

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)

ALL CITIZENS FOR MISSISSIPPI

Full Name (Last, First, Middle Initial)

A. Credell Calhoun

Mailing Address 255 Myer Ave

City Jackson State MS Zip Code 39209

Purpose of Disbursement
Door to door get out the vote efforts

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 20 2014
Transaction ID : SB21B.4145

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Ronnie Crudup Sr.

Mailing Address 242 Heathway Cove

City Jackson State MS Zip Code 39272

Purpose of Disbursement
Catering cost

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 16 2014
Transaction ID : SB21B.4111

Amount of Each Disbursement this Period

2625.00

Full Name (Last, First, Middle Initial)

C. Roosevelt Daniels

Mailing Address P O Box 2264

City Jackson State MS Zip Code 39225

Purpose of Disbursement
Door to door get out the vote efforts

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 12 2014
Transaction ID : SB21B.4128

Amount of Each Disbursement this Period

5000.00

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

12625.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 24

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)

ALL CITIZENS FOR MISSISSIPPI

Full Name (Last, First, Middle Initial)

A. Roosevelt Daniels

Mailing Address P O Box 2264

City Jackson State MS Zip Code 39225

Purpose of Disbursement
Door to door get out the vote efforts

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 18 2014
Transaction ID : SB21B.4137

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Roosevelt Daniels

Mailing Address P O Box 2264

City Jackson State MS Zip Code 39225

Purpose of Disbursement
Door to door get out the vote efforts

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 24 2014
Transaction ID : SB21B.4148

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Roosevelt Daniels

Mailing Address P O Box 2264

City Jackson State MS Zip Code 39225

Purpose of Disbursement
Door to door get out the vote efforts

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 24 2014
Transaction ID : SB21B.4149

Amount of Each Disbursement this Period

5000.00

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

15000.00

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

NAME OF COMMITTEE (In Full)
ALL CITIZENS FOR MISSISSIPPI

A. Kehinde Gaynor

Mailing Address 1221 Scots Glen

City	State	Zip Code
Jackson	MS	39204

Purpose of Disbursement Brochures

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.4122

Amount of Each Disbursement this Period

225.00

Full Name (Last, First, Middle Initial)

B. Vince Gordon

Mailing Address 753 McCluer Rd

City	State	Zip Code
Jackson	MS	39212

Purpose of Disbursement
Use of private vehicle

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President

State: District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4108

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Staci Hunter

Mailing Address 624 Fremont St

City	State	Zip Code
Jackson	MS	39204

Purpose of Disbursement	Consultant

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

Three digital displays are shown, each with a grid of small squares above the digits. The first display shows '06' with squares above the '0' and '6'. The second display shows '20' with squares above the '2' and '0'. The third display shows '2014' with squares above each digit.

Transaction ID : SB21B.4140

Amount of Each Disbursement this Period

500.00

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

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

2725.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 24

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)

ALL CITIZENS FOR MISSISSIPPI

Full Name (Last, First, Middle Initial)

A. New Horizon Church InternationalMailing Address 1770 Ellis Ave
Suite 200

City Jackson State MS Zip Code 39204

Purpose of Disbursement
Rent for office space

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
06 / 30 / 2014**Transaction ID : SB21B.4106**

Amount of Each Disbursement this Period

275.00

Full Name (Last, First, Middle Initial)

B. Levon Owens

Mailing Address P o Box 21

City Terry State MS Zip Code 39170

Purpose of Disbursement
Door to door get out the vote efforts

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
06 / 24 / 2014**Transaction ID : SB21B.4150**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Keith Richardson

Mailing Address 718 Wingfield St

City Jackson State MS Zip Code 39209

Purpose of Disbursement
Door to door get out to vote efforts

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
06 / 04 / 2014**Transaction ID : SB21B.4240**

Amount of Each Disbursement this Period

6000.00

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

7275.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 24

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)

ALL CITIZENS FOR MISSISSIPPI

Full Name (Last, First, Middle Initial)

A. Jacqueline Vann

Mailing Address 1750 Ellis Ave

City Jackson State MS Zip Code 39204

Purpose of Disbursement
Accounting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 16 / 2014
Transaction ID : SB21B.4110

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. James Warren

Mailing Address 695 Luckney Rd

City Brandon State MS Zip Code 39042

Purpose of Disbursement
Door to door get out the vote efforts

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2014
Transaction ID : SB21B.4126

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. James Warren

Mailing Address 695 Luckney Rd

City Brandon State MS Zip Code 39042

Purpose of Disbursement
Door to door get out the vote efforts

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 16 / 2014
Transaction ID : SB21B.4133

Amount of Each Disbursement this Period

7000.00

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

11000.00

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

NAME OF COMMITTEE (In Full)
ALL CITIZENS FOR MISSISSIPPI

A. James Warren

Mailing Address 695 Luckney Rd

City	State	Zip Code
Brandon	MS	39042

Purpose of Disbursement	Door to door get out the vote efforts
-------------------------	---------------------------------------

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President
State:	District:	

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.4134

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Bill Washington

Mailing Address P O Box 931

City	State	Zip Code
Jackson	MS	39071

Purpose of Disbursement	Door to door get out to vote efforts
-------------------------	--------------------------------------

Candidate Name	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	

Office Sought:	☐	House
	☐	Senate
	☐	President
State:	District:	

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.4124

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Bill Washington

Mailing Address P O Box 931

City	State	Zip Code
Jackson	MS	39071

Purpose of Disbursement	Door to door get out the vote efforts
-------------------------	---------------------------------------

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President
State:	District:	

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.4135

Amount of Each Disbursement this Period

12000.00

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

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

21000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 24

☒ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 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)

ALL CITIZENS FOR MISSISSIPPI

Full Name (Last, First, Middle Initial)

A. Bill Washington

Mailing Address P O Box 931

City	State	Zip Code
Jackson	MS	39071

Purpose of Disbursement
Door to door get out the vote efforts

Candidate Name

Office Sought:	☐ House ☐ Senate ☐ President
State:	District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2014

Transaction ID : SB21B.4144

Amount of Each Disbursement this Period

19000.00

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

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

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

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

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

19000.00

110125.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 OF 24

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ALL CITIZENS FOR MISSISSIPPI

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

American Media & Advocacy Group

Nature of Debt (Purpose):

Radio Ad

Mailing Address 815 Slaters Lane

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4194

Amount Incurred This Period

20577.81

Payment This Period

0.00

Outstanding Balance at Close of This Period

20577.81

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

20577.81

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

20577.81

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

20577.81

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 22 OF 24
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) ALL CITIZENS FOR MISSISSIPPI		FEC IDENTIFICATION NUMBER ▼ C C00564351	
Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on		MM / DD / YYYY	
Full Name of Payee American Media & Advocacy Group [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 21 / 2014	
Mailing Address 815 Slaters Lane		Amount 20577.81	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.4193
Purpose of Expenditure Radio Ad	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 02 / 2014	
Name of Federal Candidate THAD COCHRAN		☒ Support ☐ Oppose	Office Sought: ☐ House ☒ Senate ☐ President ☐ General State: MS
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General 2014 ☒ Other (specify) ▶ Runoff	
Full Name of Payee Jackson Free Press		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 16 / 2014	
Mailing Address 125 S Congress St Suite 1324		Amount 1875.00	
City Jackson	State MS	Zip Code 39201	Transaction ID : SE.4156
Purpose of Expenditure Print Advertisement	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 16 / 2014	
Name of Federal Candidate THAD COCHRAN		☒ Support ☐ Oppose	Office Sought: ☐ House ☒ Senate ☐ President ☐ General State: MS
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General 2014 ☒ Other (specify) ▶ Runoff	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		1875.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Jacqueline Vann		Date MM / DD / YYYY 01 / 12 / 2015	
[Electronically Filed]			

Full Name of Payee The Jackson Advocate		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 11 / 2014	
Mailing Address 438 Mill St		Amount 1174.90	
City Jackson	State MS	Zip Code 39202	Transaction ID : SE.4158
Purpose of Expenditure Print advertisement		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 06 / 11 / 2014
Name of Federal Candidate THAD COCHRAN		☒ Support ☐ Oppose	Office Sought: ☐ House ☒ Senate ☐ President District: _____ State: MS
Calendar Year-To-Date Per Election for Office Sought		1174.90	Disbursement For: ☐ Primary ☐ General 2014 ☒ Other (specify) ▶ Runoff

Full Name of Payee The Jackson Advocate		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 19 / 2014	
Mailing Address 438 Mill St		Amount 1548.00	
City Jackson	State MS	Zip Code 39202	Transaction ID : SE.4162 Date of Disbursement or Obligation MM / DD / YYYY 06 / 20 / 2014
Purpose of Expenditure Print advertisement		Category/ Type 004	
Name of Federal Candidate THAD COCHRAN		☒ Support ☐ Oppose	Office Sought: ☐ House ☒ Senate ☐ President
			District: _____ State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		4597.90	Disbursement For: ☐ Primary ☐ General ☒ Other (specify) ► <u>Runoff</u>

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	2722.90
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date _____

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 24 OF 24
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) ALL CITIZENS FOR MISSISSIPPI	FEC IDENTIFICATION NUMBER ▼ C C00564351
Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee The Mississippi Link			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 06 / 2014		
Mailing Address 2659 Livingston Rd			Amount 800.00		
City Jackson	State MS	Zip Code 39213	Transaction ID : SE.4163 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 06 / 06 / 2014		
Purpose of Expenditure Print advertisement		Category/ Type 004	Name of Federal Candidate THAD COCHRAN		
Calendar Year-To-Date Per Election for Office Sought		800.00	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>MS</u>		
Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ► _____					

Full Name of Payee The Mississippi Link			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 19 / 2014		
Mailing Address 2659 Livingston Rd			Amount 1600.00		
City Jackson	State MS	Zip Code 39213	Transaction ID : SE.4164 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2014		
Purpose of Expenditure Print advertisement		Category/ Type 004	Name of Federal Candidate THAD COCHRAN		
Calendar Year-To-Date Per Election for Office Sought		6197.90	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>MS</u>		
Disbursement For: ☐ Primary ☐ General 2014 ☒ Other (specify) ► <u>Runoff</u>					

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	2400.00
(b) SUBTOTAL of Unitemized Independent Expenditures ►	
(c) TOTAL Independent Expenditures..... ►	6997.90

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jacqueline Vann

[Electronically Filed]

Date

M M M

 /

D D D

 /

Y Y Y Y Y Y

01 / 12 / 2015

Signature