

**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

Haley's PAC

ADDRESS (number and street)

P.O. Box 1186

☐Check if different
than previously
reported. (ACC)

Jackson

MS

39215

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00406314

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 (12S)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

2010

in the
State of

5. Covering Period

10

14

2010

through

11

22

2010

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

Henry Barbour

Signature of Treasurer

Electronically Filed by Henry Barbour

Date

12

02

2010

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)

2 / 57

Write or Type Committee Name
Haley's PAC

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	116494.16
(b) Cash on Hand at Beginning of Reporting Period	455614.56	
(c) Total Receipts (from Line 19)	108152.41	907587.50
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	563766.97	1024081.66
7. Total Disbursements (from Line 31)	174248.00	634562.69
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	389518.97	389518.97
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

FEC Form 3X (Rev. 06/2004)

3 / 57

Write or Type Committee Name

Haley's PAC

Report Covering the Period:

From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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)	53270.00	699395.00
(ii) Unitemized	54882.41	108692.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	108152.41	808087.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	99500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	108152.41	907587.50
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 Transfer (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))	108152.41	907587.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	108152.41	907587.50

DETAILED SUMMARY PAGE

of Disbursements

4 / 57

FEC Form 3X (Rev. 02/2003)

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.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	109658.00	406472.69	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	109658.00	406472.69	
22. Transfers to Affiliated/Other Party Committees.....	2000.00	2000.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	62590.00	221590.00	
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	500.00	
(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	500.00	
29. Other Disbursements.....	0.00	4000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	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))..	174248.00	634562.69	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	174248.00	634562.69	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 57

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)	108152.41	907587.50
34. Total Contribution Refunds (from Line 28(d))	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	108152.41	907087.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	109658.00	406472.69
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	109658.00	406472.69

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

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

FOR LINE NUMBER: PAGE 6 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

ANN ALEXANDER

Mailing Address P.O. BOX 1265

City

MERIDIAN

State

MS

Zip Code

39302-1265

FEC ID number of contributing
federal political committee.

C

Name of Employer
A & B ELECTRIC CO., INC

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.17861

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BENJAMIN W. ALLEN, III

Mailing Address 2517 MEADOWBROOK RD

City

JACKSON

State

MS

Zip Code

39211-6557

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCHOLASTIC PRODUCTS AND
AWARDS

Occupation
MANUFACTURER REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.19208

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

LEORA AMDUR

Mailing Address 31 DARBY DRIVE

City

HUNTINGTON STATION

State

NY

Zip Code

11746-4727

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIRST BRADFORD CORP.

Occupation
ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.17851

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. MASTON L. BALLEW, III

Mailing Address PO BOX 12247

City

JACKSON

State

MS

Zip Code

39236-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer
SECURITY BALLEW

Occupation

FINANCIAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: SA11.17795

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MASTON L. BALLEW, III

Mailing Address PO BOX 12247

City

JACKSON

State

MS

Zip Code

39236-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer
SECURITY BALLEW

Occupation

FINANCIAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: SA11.18386

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES BARTELS

Mailing Address 3201 TAM O. SHANTER DRIVE

City

HAYS

State

KS

Zip Code

67601-1833

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11.18586

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

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 8 / 57

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. JAMES BARTELS

Mailing Address 3201 TAM O. SHANTER DRIVE

City

HAYS

State

KS

Zip Code

67601-1833

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.19237

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. WALTERINE H. BELL

Mailing Address 548 HIGHWAY 468

City

BRANDON

State

MS

Zip Code

39042-7900

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18231

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. JOHN W. BOWLIN

Mailing Address 2661 COLUMBINE PLACE

City

TUPELO

State

MS

Zip Code

38801-8433

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

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

Transaction ID: SA11.18785

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

640.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MS. SUE BRIDGES

Mailing Address PO BOX 243

City

LAUREL

State

MS

Zip Code

39441-0243

FEC ID number of contributing
federal political committee.

C

Name of Employer
HC SERVICES

Occupation

EXECUTIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.17874

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN B. BROCK, III

Mailing Address 5603 INDIAN CIRCLE

City

HOUSTON

State

TX

Zip Code

77056-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18022

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BILL D. BUFFINGTON

Mailing Address PO BOX 214

City

MAYERSVILLE

State

MS

Zip Code

39113-0214

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.18277

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Tranfer on 11/01/2010 to
Haly's State PAC.

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 57

(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)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. WAYNE O. BURKES

Mailing Address 137 DORCHESTER COURT

City

BRANDON

State

MS

Zip Code

39047-8071

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	1	0

Transaction ID: SA11.18173

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HENRY M. BURKHALTER

Mailing Address P.O. BOX 12287

City

JACKSON

State

MS

Zip Code

39236-2287

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.18387

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Transfer on 11/01/2010 to
Haley's State PAC.**C.**

Full Name (Last, First, Middle Initial)

MS. RITA BUTH

Mailing Address 9933 SW 62ND AVENUE

City

OCALA

State

FL

Zip Code

34476-7703

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.18468

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5310.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 57

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. SEAN B. CAROTHERS

Mailing Address PO BOX 189

City

TAYLOR

State

MS

Zip Code

38673-0189

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAROTHERS CONSTRUCTION,
INC.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.18744

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES M. CARR, JR.

Mailing Address 1451 HIGHLAND PARK DRIVE

City

JACKSON

State

MS

Zip Code

39211-5967

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18227

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LAURANCE CARTER

Mailing Address 521 N FIRST STREET

City

ROLLING FORK

State

MS

Zip Code

39159-2215

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18224

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. JAMES CAUSLEY

Mailing Address 37910 SEAWAT COURT

City

HARRISON TOWNSHIP

State

MI

Zip Code

48045-6201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: SA11.17671

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN M. CHRISTIAN

Mailing Address PO BOX 22

City

LAUREL

State

MS

Zip Code

39441-0022

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.18790

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. FREDERICK CLARK

Mailing Address 1176 HIGHLAND DRIVE

City

YAZOO CITY

State

MS

Zip Code

39194-9783

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18264

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. HOWARD COHEN

Mailing Address 10405 SANDRINGHAM CT

City

POTOMAC

State

MD

Zip Code

20854-1901

FEC ID number of contributing
federal political committee.

C

Name of Employer
HC ASSOCIATES, INC.

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.17784

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JACK COPELAND

Mailing Address 105 E. BEDFORD STREET

City

DIMMITT

State

TX

Zip Code

79027-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer
COPELAND CONSULTING INTER-
NATIO

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.18385

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FRED CORLEY

Mailing Address 175 E. EDGEWOOD PLACE

City

SAN ANTONIO

State

TX

Zip Code

78209-3301

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIVERSITY OF TEXAS

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.17873

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

SHAWN COUGHLIN

Mailing Address 4401 UPLAND DRIVE

City

ALEXANDRIA

State

VA

Zip Code

22310-1331

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAPITOL HEALTH GROUP, LLCOccupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: SA11.18909

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

EDWARD F. COX

Mailing Address 1133 AVENUE OF THE AMERICAS

City

NEW YORK

State

NY

Zip Code

10036-6710

FEC ID number of contributing
federal political committee.

C

Name of Employer
PATTERSON BELKNAP WEBB AND
TAYLER LLPOccupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.18390

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN D'AMICO

Mailing Address 3 DANFORTH ROAD

City

EASTON

State

PA

Zip Code

18045-7821

FEC ID number of contributing
federal political committee.

C

Name of Employer
MAP OF EASTON, INC.Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.18283

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

GEORGE G. DANIELS

Mailing Address 526 THORPE RD.

City

ORLANDO

State

FL

Zip Code

32824-8133

FEC ID number of contributing
federal political committee.

C

Name of Employer

DANIELS MANUFACTURING COR-
P.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.17800

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MAURICE DANTIN

Mailing Address P.O. BOX 604

City

COLUMBIA

State

MS

Zip Code

39429-0604

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18228

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN M. DEAN, JR.

Mailing Address P.O. BOX 272

City

LELAND

State

MS

Zip Code

38756-0272

FEC ID number of contributing
federal political committee.

C

Name of Employer
DEAN LAND AND REALTY CO.

Occupation

REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.19021

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2350.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MRS. LUCILLE DILLARD

Mailing Address 115 BAYOU ROAD

City

GREENVILLE

State

MS

Zip Code

38701-7702

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: SA11.18910

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CLYDE B. EDWARDS, JR.

Mailing Address P.O. BOX 115

City

CANTON

State

MS

Zip Code

39046-0115

FEC ID number of contributing
federal political committee.

C

Name of Employer
ADCAMP, INC.

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18219

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD ELLZEY

Mailing Address 2886 BRIDLE PATH LANE

City

FRIENDSWOOD

State

TX

Zip Code

77546-3043

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18225

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM L. FREEMAN, JR.

Mailing Address 909 CARLTON PARK DRIVE

City

FLOWOOD

State

MS

Zip Code

39232-5530

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF MISSISSIPPI

Occupation
MILITARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.19027

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MICHAEL FRISBIE

Mailing Address 7793 E. HIGHWAY K4

City

GYPSUM

State

KS

Zip Code

67448-9734

FEC ID number of contributing
federal political committee.

C

Name of Employer
FRISBIE CONSTRUCTION CO

Occupation
PRESIDENT

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 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18067

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. CARL GESSLER, JR.

Mailing Address 516 EUSTIS AVENUE SE

City

HUNTSVILLE

State

AL

Zip Code

35801-4112

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE HEART CENTER

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.19317

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 57

(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)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. DONALD G. GUMPERTZ

Mailing Address P.O. BOX 2450

City

TOLUCA LAKE

State

CA

Zip Code

91610-0450

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.18284

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DONALD G. GUMPERTZ

Mailing Address P.O. BOX 2450

City

TOLUCA LAKE

State

CA

Zip Code

91610-0450

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	8		2	0	1	0

Transaction ID: SA11.19278

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BILL M. GUTHRIE

Mailing Address 3538 BETHUNE DRIVE

City

MOUNTAIN BROOK

State

AL

Zip Code

35223-1418

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.18725

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. GEORGE HAMMACK

Mailing Address 1589 WOOD GLEN DRIVE

City

JACKSON

State

MS

Zip Code

39204-4443

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.18750

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID JOSEPH HARDY

Mailing Address 481 JORDAN DRIVE

City

BILOXI

State

MS

Zip Code

39531-2312

FEC ID number of contributing
federal political committee.

C

Name of Employer
ELEY GUILD HARDY ARCHITEC-
TS PA

Occupation
ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11.18782

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. FRANCES D. HARRELL

Mailing Address 2660 MAGNOLIA AVENUE

City

PENSACOLA

State

FL

Zip Code

32503-4945

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
OIL AND GAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.18389

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 57

(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)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

GREGORY M. HORNE

Mailing Address 135 BOUNDS STREET

City

JACKSON

State

MS

Zip Code

39206-4121

FEC ID number of contributing
federal political committee.

C

Name of Employer
GMHORNE, LLC

Occupation

MATERIALS DISTRUBUTOR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.17768

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. WANDA JENNINGS

Mailing Address 1535 SHERWOOD LANE

City

SOUTHAVEN

State

MS

Zip Code

38671-8818

FEC ID number of contributing
federal political committee.

C

Name of Employer
MS HOUSE OF REPRESENTATIVES

Occupation

STATE REPRESENTATIVE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.18732

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JIM W. JOHNSON

Mailing Address 1811 FOREST PARK

City

TUPELO

State

MS

Zip Code

38801-7100

FEC ID number of contributing
federal political committee.

C

Name of Employer
JOHNSON CONSULTING, P.L.L.-C.

Occupation

ARCHITECT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	1	0

Transaction ID: SA11.17967

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. TED H. KENDALL, III

Mailing Address P.O. BOX 96

City

BOLTON

State

MS

Zip Code

39041-0096

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE GADDIS FARMS

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11.18798

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CLAUDE KENNEDY

Mailing Address 39 COUNTY ROAD 2040

City

BOONEVILLE

State

MS

Zip Code

38829-8807

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11.19037

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. LINDA G. KENNEDY

Mailing Address 39 COUNTY ROAD

City

BOONEVILLE

State

MS

Zip Code

38829

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11.19041

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. JULIUS W. KING

Mailing Address P.O. BOX 470248

City

FORT WORTH

State

TX

Zip Code

76147-0248

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.18799

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WALTER H. KLEINER

Mailing Address 1725 89TH PLACE NE

City

CLYDE HILL

State

WA

Zip Code

98004-3213

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.17665

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DAVID LAMOND

Mailing Address 2840 GREEN ST

City

SAN FRANCISCO

State

CA

Zip Code

94123-4611

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARTIS CAPITAL

Occupation

BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.17840

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 23 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MRS. JUANITA L. LAWRENCE

Mailing Address 4637 NW 44TH COURT

City

TAMARAC

State

FL

Zip Code

33319-3612

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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
1 1 / 0 3 / 2 0 1 0

Transaction ID: SA11.19197

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JUANITA L. LAWRENCE

Mailing Address 4637 NW 44TH COURT

City

TAMARAC

State

FL

Zip Code

33319-3612

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.19325

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES LOWRY

Mailing Address 7310 BURTONWOOD DRIVE

City

ALEXANDRIA

State

VA

Zip Code

22307-2060

FEC ID number of contributing
federal political committee.

C

Name of Employer
RESPONSE AMERICA

Occupation
DIRECT MAIL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.18703

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MRS. JEANNE C. LUCKEY

Mailing Address PO BOX 724

City

OCEAN SPRINGS

State

MS

Zip Code

39566-0724

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.19075

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DONALD A. MALMO

Mailing Address 395 S. YATES ROAD

City

MEMPHIS

State

TN

Zip Code

38120-2431

FEC ID number of contributing
federal political committee.

C

Name of Employer
DUCAN-WILLIAMS INC.

Occupation

CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: SA11.18819

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. CLAUDINE MALONE

Mailing Address 700 BELGROVE ROAD

City

MCLEAN

State

VA

Zip Code

22101-1836

FEC ID number of contributing
federal political committee.

C

Name of Employer
FINANCIAL & MANAGEMENT CO-
NSULTING, INC

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.18491

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5700.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 25 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. COLIN MALONEY

Mailing Address P.O. BOX 1366

City

TUPELO

State

MS

Zip Code

38802-1366

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

REAL ESTATE DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: SA11.19083

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. JOHN MANN

Mailing Address 10320 BOUNDS AVENUE

City

PHILADELPHIA

State

MS

Zip Code

39350-3721

FEC ID number of contributing
federal political committee.

C

Name of Employer
NESHOB CO. HOSPITAL

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.18981

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. HELEN L. MARSHALL

Mailing Address 827 SUSAN AVENUE

City

WOODSTOCK

State

VA

Zip Code

22664-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.17666

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 26 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MRS. HELEN L. MARSHALL

Mailing Address 827 SUSAN AVENUE

City

WOODSTOCK

State

VA

Zip Code

22664-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18243

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CONRAD MARTIN

Mailing Address P.O. BOX 6384

City

JACKSON

State

MS

Zip Code

39288-6384

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONRAD MARTIN REAL ESTATE
INC.

Occupation
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.18339

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KEN MARTIN

Mailing Address 951 CATO ROAD

City

MENDENHALL

State

MS

Zip Code

39114-4450

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.18756

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD C. MARX

Mailing Address P.O. BOX 440

City

WAPPINGERS FALLS

State

NY

Zip Code

12590-0440

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.18455

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

FRANK L. MASON

Mailing Address 400 UNIVERSITY PARK DRIVE
APARTMENT 286

City

BIRMINGHAM

State

AL

Zip Code

35209-8825

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11.17667

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DRAKE MILLS

Mailing Address P.O. BOX 2525

City

RUSTON

State

LA

Zip Code

71273-2525

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMMUNITY TRUST BANK

Occupation

BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.17767

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 28 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

DR. MICHAEL H. MOORE

Mailing Address 5401 ROCKWOOD ROAD

City

EL PASO

State

TX

Zip Code

79932-2413

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
DDS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.18804

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. PAUL H. MOORE

Mailing Address 1211 FARNSWORTH AVE

City

PASCAGOULA

State

MS

Zip Code

39567-1255

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.19076

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES C. NORTHEY

Mailing Address 1565 50TH COURT

City

VERO BEACH

State

FL

Zip Code

32966-2333

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.19022

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 57

(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)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

DR. JUNIUS K. OATES

Mailing Address 111 REYNOLDS CIR

City

OCEAN SPRINGS

State

MS

Zip Code

39564-9736

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11.17871

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN PENSON

Mailing Address 3756 ARMSTRONG AVENUE

City

DALLAS

State

TX

Zip Code

75205-3837

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.19151

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. CINDY PHILLIPS

Mailing Address 372 SUN DIAL ROAD

City

MADISON

State

MS

Zip Code

39110-8772

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11.18171

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 30 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. R. DALE PIERCE

Mailing Address P.O. BOX 201

City

ABERDEEN

State

MS

Zip Code

39730-0201

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18221

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN PLACE

Mailing Address 34 POND LANE

City

BRYN MAWR

State

PA

Zip Code

19010-1772

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18033

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN PRICE

Mailing Address 5309 BRIARFIELD ROAD

City

JACKSON

State

MS

Zip Code

39211-4602

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRICE AND ZIRULNIK

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: SA11.18678

Amount of Each Receipt this Period

700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 57

(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)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

JAMES E. PRINCE III

Mailing Address 580 BOARDWALK BLVD

City

RIDGELAND

State

MS

Zip Code

39157-4112

FEC ID number of contributing
federal political committee.

C

Name of Employer

PRINCE NEWSPAPER HOLDINGS
INC.

Occupation

NEWSPAPER PUBLISHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.18274

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. LENORA PUSTA

Mailing Address 138 W. SUNFLOWER DRIVE

City

PAYSON

State

AZ

Zip Code

85541-6152

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.19319

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID M. RATCLIFF

Mailing Address PO BOX 706

City

LAUREL

State

MS

Zip Code

39441-0706

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11.18713

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 32 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MRS. MARY RAVEL

Mailing Address 1300 ENISWOOD PARKWAY

City

PALM HARBOR

State

FL

Zip Code

34683-2026

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18143

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. MARY RAVEL

Mailing Address 1300 ENISWOOD PARKWAY

City

PALM HARBOR

State

FL

Zip Code

34683-2026

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11.18774

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHNNY RIMMER

Mailing Address 3804 MOCKINGBIRD LANE

City

DALLAS

State

TX

Zip Code

75205-2127

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18250

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 57

(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)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

DR. ROBERT L. ROBINSON

Mailing Address 29 COUNTY ROAD 406

City

IUKA

State

MS

Zip Code

38852-8533

FEC ID number of contributing
federal political committee.

C

Name of Employer
MS DIVISION OF MEDICAID

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: SA11.18438

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. NANCY ROGERS

Mailing Address P.O. BOX 842

City

OXFORD

State

MS

Zip Code

38655-0842

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 ▼

250.00

Date of Receipt

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

Transaction ID: SA11.19074

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. DOUGLAS W. ROUSE

Mailing Address 111 BEDFORD ROAD

City

HATTIESBURG

State

MS

Zip Code

39402-2302

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

PHYSICIAN

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.18377

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 34 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. SHAN T. RUSSELL

Mailing Address 5660 WOODSIDE CIRCLE

City

MONTGOMERY

State

AL

Zip Code

36117-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.18506

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. EDWIN C. SANDHAM

Mailing Address 1964 SW SAINT ANDREWS DRIVE

City

PALM CITY

State

FL

Zip Code

34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

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

Transaction ID: SA11.17670

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EDWIN C. SANDHAM

Mailing Address 1964 SW SAINT ANDREWS DRIVE

City

PALM CITY

State

FL

Zip Code

34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

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

Transaction ID: SA11.18573

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

560.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 35 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MRS. KATHY H. SASSER

Mailing Address 913 BOGUE CHITTO ROAD S.W.

City

BOGUE CHITTO

State

MS

Zip Code

39629-9545

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFF-EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11.19149

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. KELLY S. SEGARS, SR. M.D.

Mailing Address 52 COUNTY ROAD 150

City

IUKA

State

MS

Zip Code

38852-7114

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIRST AMERICAN NATIONAL
BANK

Occupation

FOUNDER, CHAIRMAN & PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4660.00

Date of Receipt

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

Transaction ID: SA11.18807

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. KELLY S. SEGARS, SR. M.D.

Mailing Address 52 COUNTY ROAD 150

City

IUKA

State

MS

Zip Code

38852-7114

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIRST AMERICAN NATIONAL
BANK

Occupation

FOUNDER, CHAIRMAN & PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4660.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.19225

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

410.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 36 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. STEPHEN SIMONS

Mailing Address 4519 WHITECHAPEL LN

City

BELDEN

State

MS

Zip Code

38826-8728

FEC ID number of contributing
federal political committee.

C

Name of Employer
VIP CINEMA LLC

Occupation

FURNITURE MANUFACTURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11.17754

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RAY SMITH

Mailing Address 3031 DUBBS ROAD

City

DUNDEE

State

MS

Zip Code

38626-9548

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11.19033

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOE STEDMAN

Mailing Address 114 MAIN STREET

City

NATCHEZ

State

MS

Zip Code

39120-3458

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEDMAN REALTORS INC.

Occupation

REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.17872

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 37 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. JESSE C. STINSON, JR.

Mailing Address 1241 51ST STREET S.

City

BIRMINGHAM

State

AL

Zip Code

35222-3922

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18259

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT SWAIN

Mailing Address 188 W. CANEY CREEK ROAD

City

ROGERSVILLE

State

TN

Zip Code

37857-3839

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.18672

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. RUTH B. TANT

Mailing Address 26 WATERFORD PLACE

City

JACKSON

State

MS

Zip Code

39211-2945

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

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
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11.18810

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 38 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT TEMKOVITS

Mailing Address P.O. BOX 334

City

BROOKSVILLE

State

MS

Zip Code

39739-0334

FEC ID number of contributing
federal political committee.

C

Name of Employer
TEM'S FOOD MARKETS

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

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

Transaction ID: SA11.19143

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILFRED S. TEMPLETON

Mailing Address 323 BEN FRANKLIN DRIVE

City

SARASOTA

State

FL

Zip Code

34236-2003

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

AUTO DEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: SA11.18388

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILFRED S. TEMPLETON

Mailing Address 323 BEN FRANKLIN DRIVE

City

SARASOTA

State

FL

Zip Code

34236-2003

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

AUTO DEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11.19235

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 57

(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)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. CHARLIE THOMAS

Mailing Address P.O. BOX 98

City

SHUQUALAK

State

MS

Zip Code

39361-0098

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHUQUALAK LUMBER COMPANY

Occupation

MILL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	1	0

Transaction ID: SA11.18220

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. REBECCA THOMPSON

Mailing Address P.O. BOX 134

City

YAZOO CITY

State

MS

Zip Code

39194-0134

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11.19323

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LARRY VANCE

Mailing Address PO BOX 6006

City

RIDGELAND

State

MS

Zip Code

39158-6006

FEC ID number of contributing
federal political committee.

C

Name of Employer
FOX EVERETT

Occupation

INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	1	0

Transaction ID: SA11.17990

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 57

(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)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL WALKER

Mailing Address 228 N. GARFIELD STREET

City

KENNETT SQUARE

State

PA

Zip Code

19348-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.17689

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DON WALLER

Mailing Address 136 COUNTY ROAD 313

City

OXFORD

State

MS

Zip Code

38655-8508

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11.18738

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PHILIP L. WALLING

Mailing Address 17275 MOUNTAIN VIEW ROAD

City

GREENVILLE

State

CA

Zip Code

95947-9712

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.19306

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 57

(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)

Haley's PAC

A.Full Name (Last, First, Middle Initial)
RONALD G. WANEK

Mailing Address 1205 SNELL ISLE BLVD NE

City	State	Zip Code
SAINT PETERSBURG	FL	33704-3035

FEC ID number of contributing
federal political committee.

C

Name of Employer
ASHLEY FURNITUREOccupation
CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: SA11.17778

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

B.Full Name (Last, First, Middle Initial)
MR. EVERETTE I. WATKINS

Mailing Address 8684 STONY CREEK ROA

City	State	Zip Code
YPSILANTI	MI	48197-9338

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.18604

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.Full Name (Last, First, Middle Initial)
MS. NELL L. WEISS

Mailing Address 3 GROVE PARK PLACE

City	State	Zip Code
JACKSON	MS	39216-3616

FEC ID number of contributing
federal political committee.

C

Name of Employer
MAISON WEISS, INC.Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.18768

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 42 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. NORMAN B. WILLIAMSON

Mailing Address 1555 ORLANDO ROAD

City

PASADENA

State

CA

Zip Code

91106-4129

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11.18039

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS M. WRIGHT, JR.

Mailing Address 265 COUNTY ROAD 263

City

SALTILLO

State

MS

Zip Code

38866-9124

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMMUNITY ELDERCARE SERVI-
CES

Occupation
BUSINESS EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.18282

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

53270.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 43 / 57

<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)
Haley's PAC

A.

Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address PO BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District: 00

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

Transaction ID: SB.26

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.95

B.

Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address PO BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District: 00

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

Transaction ID: SB.28

Date of Disbursement

/ /

Amount of Each Disbursement this Period

273.57

C.

Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District: 00

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

Transaction ID: SB.37

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4459.41

SUBTOTAL of Disbursements This Page (optional)

4737.93

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)

PAGE 44 / 57

<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)
Haley's PAC

A. Full Name (Last, First, Middle Initial) CTS HOLDINGS, LLC	Transaction ID: SB.39 Date of Disbursement
Mailing Address 6855 PACIFIC STREET	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D0</div> <div>^D9</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City OMAHA State NE Zip Code 68106	Amount of Each Disbursement this Period
Purpose of Disbursement CREDIT CARD PROCESSING FEES	<div>10.00</div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) ELAVON MERCHANT SERVICES	Transaction ID: SB.35 Date of Disbursement
Mailing Address 7300 CHAPMAN HIGHWAY	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D0</div> <div>^D2</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City KNOXVILLE State TN Zip Code 37920	Amount of Each Disbursement this Period
Purpose of Disbursement CREDIT CARD PROCESSING FEES	<div>478.37</div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) EMOTIVE, LLC	Transaction ID: SB.1 Date of Disbursement
Mailing Address 2800 SHIRLINGTON RD, STE 901	<div> <div>^M1</div> <div>^M0</div> <div>/</div> <div>^D1</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period
Purpose of Disbursement WEBSITE	<div>1132.26</div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1620.63

TOTAL This Period (last page this line number only)

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

NAME OF COMMITTEE (In Full)
Haley's PAC

FEC Schedule B (Form 3X) (Revised 02/2003)

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 46 / 57

<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)
Haley's PAC

A.

Full Name (Last, First, Middle Initial)
THE TARRANCE GROUP

Mailing Address 201 N. UNION STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District: 00

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

Transaction ID: SB.36

Date of Disbursement

/ /

Amount of Each Disbursement this Period

54750.00

B.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address PO BOX 3501

City JACKSON State MS Zip Code 39207

Purpose of Disbursement
POSTAL SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District: 00

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

Transaction ID: SB.27

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional)

64750.00

TOTAL This Period (last page this line number only)

109658.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 47 / 57

<input type="checkbox"/> 21b	<input checked="" 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)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

HALEY'S PAC - MISSISSIPPI

Mailing Address PO BOX 1186

City
JACKSON

State
MS

Zip Code
39215

Purpose of Disbursement
TRANSFER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District: 00

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.34

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 48 / 57

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

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NAME OF COMMITTEE (In Full)
Haley's PAC

A.

Full Name (Last, First, Middle Initial)
ALASKA REPUBLICAN PARTY

Mailing Address 1001 WEST FIREWOOD LANE

City ANCHORAGE State AK Zip Code 99503

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB.8

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)
ALLEN WEST FOR CONGRESS

Mailing Address PO BOX 1028

City DEERFIELD BEACH State FL Zip Code 33441

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name
Allen West

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 22

Transaction ID: SB.20

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
ARIZONA REPUBLICAN PARTY

Mailing Address 3501 NORTH 24TH STREET

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB.9

Date of Disbursement

/ /

Amount of Each Disbursement this Period

840.00

SUBTOTAL of Disbursements This Page (optional)

3840.00

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)

PAGE 49 / 57

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

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NAME OF COMMITTEE (In Full)
Haley's PAC

A. Full Name (Last, First, Middle Initial)
BILL HASLAM FOR GOVERNOR

Mailing Address 1701 WEST END AVENUE

City State Zip Code
NASHVILLE TN 37203

Purpose of Disbursement
TN POLITICAL CONTRIBUTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB.4

Date of Disbursement

M M / D D / Y Y Y Y
10 18 2010

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
BOEHNER FOR SPEAKER COMMITTEE

Mailing Address 631-B PENNSYLVANIA AVENUE, SE

City State Zip Code
WASHINGTON DC 20003

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name
John Boehner

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.12

Date of Disbursement

M M / D D / Y Y Y Y
10 18 2010

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
CITIZENS FOR BILL BRADY

Mailing Address 500 W MONROE STREET

City State Zip Code
SPRINGFIELD IL 62704

Purpose of Disbursement
IL POLITICAL CONTRIBUTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB.7

Date of Disbursement

M M / D D / Y Y Y Y
10 18 2010

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

9500.00

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)

PAGE 50 / 57

☐ 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)
Haley's PAC

A.

Full Name (Last, First, Middle Initial)
DAUGAARD FOR SOUTH DAKOTA

Mailing Address 24930 480TH AVENUE

City State Zip Code
GARRETSON SD 57030

Purpose of Disbursement
SD POLITICAL CONTRIBUTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB.3

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)
FRIENDS OF JOE HECK

Mailing Address 6675 S TENAYA WAY

City State Zip Code
LAS VEGAS NV 89113

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name
Joe Heck

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: NV District: 03

Transaction ID: SB.29

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
FRIENDS OF FRANK GUINTA

Mailing Address PO BOX 877

City State Zip Code
MANCHESTER OH 03105

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name
Frank Guinta

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: NH District: 01

Transaction ID: SB.33

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

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)

PAGE 51 / 57

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

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NAME OF COMMITTEE (In Full)
Haley's PAC

A.

Full Name (Last, First, Middle Initial)
KASICH TAYLOR FOR OHIO

Mailing Address 340 EAST GAY STREET

City State Zip Code
COLUMBUS OH 43215

Purpose of Disbursement
OH POLITICAL CONTRIBUTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB.13

Date of Disbursement

M M / D D / Y Y Y Y
10 19 2010

Amount of Each Disbursement this Period

11000.00

B.

Full Name (Last, First, Middle Initial)
LEPAGE 2010

Mailing Address PO BOX 1788

City State Zip Code
WATERVILLE ME 04903

Purpose of Disbursement
ME POLITICAL CONTRIBUTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB.2

Date of Disbursement

M M / D D / Y Y Y Y
10 18 2010

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)
MARY FALLIN FOR GOVERNOR 2010

Mailing Address PO BOX 590

City State Zip Code
OKLAHOMA CITY OK 73101

Purpose of Disbursement
OK POLITICAL CONTRIBUTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB.15

Date of Disbursement

M M / D D / Y Y Y Y
10 19 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

14250.00

TOTAL This Period (last page this line number only)

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

NAME OF COMMITTEE (In Full)
Haley's PAC

2500.00

1000.00

500.00

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

PAGE 53 / 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Haley's PAC**A.**Full Name (Last, First, Middle Initial)
ROBERT HURT FOR CONGRESS

Mailing Address 101 EAST CARY STREET

City RICHMOND State VA Zip Code 23219

Purpose of Disbursement
POLITICAL CONTRIBUTIONSCandidate Name
Robert HurtCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: VA District: 05

Transaction ID: SB.30

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00									
---------	--	--	--	--	--	--	--	--	--

B.Full Name (Last, First, Middle Initial)
ZAUN FOR CONGRESS

Mailing Address PO BOX 42221

City URBANDALE State IA Zip Code 50323

Purpose of Disbursement
POLITICAL CONTRIBUTIONSCandidate Name
Brad ZuanCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District: 03

Transaction ID: SB.32

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00									
---------	--	--	--	--	--	--	--	--	--

C.Full Name (Last, First, Middle Initial)
COLORADO REPUBLICAN PARTY

Mailing Address 5950 WILLOW DRIVE

City GREENWOOD VILLAGE State CO Zip Code 80111

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB.25

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00									
---------	--	--	--	--	--	--	--	--	--

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

NAME OF COMMITTEE (In Full)
Haley's PAC

FEC Schedule B (Form 3X) (Revised 02/2003)

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

PAGE 55 / 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Haley's PAC**A.**Full Name (Last, First, Middle Initial)
NEW HAMPSHIRE REPUBLICAN PARTY

Mailing Address 10 WATER STREET

City State Zip Code
CONCORD NH 03301Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name

Category/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB.19

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

B.Full Name (Last, First, Middle Initial)
REPUBLICAN FEDERAL COMMITTEE OF PA

Mailing Address 112 STATE STREET

City State Zip Code
HARRISBURG PA 17101Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name

Category/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB.11

Date of Disbursement

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount of Each Disbursement this Period

2500.00

C.Full Name (Last, First, Middle Initial)
REPUBLICAN PARTY OF MINNESOTA

Mailing Address 525 PARK STREET

City State Zip Code
ST. PAUL MN 55103Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name

Category/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB.14

Date of Disbursement

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

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

9500.00

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)

PAGE 56 / 57

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

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NAME OF COMMITTEE (In Full)
Haley's PAC

A.

Full Name (Last, First, Middle Initial)
REPUBLICAN PARTY OF IOWA

Mailing Address 621 E 9TH STREET

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼
State: District: 00

Transaction ID: SB.16

Date of Disbursement

M M / D D / Y Y Y Y
10 19 2010

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
REPUBLICAN PARTY OF WISCONSIN

Mailing Address 148 EAST JOHNSON STREET

City MILWAUKEE State WI Zip Code 53703

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼
State: District: 00

Transaction ID: SB.17

Date of Disbursement

M M / D D / Y Y Y Y
10 20 2010

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)
REPUBLICAN PARTY OF NEW YORK

Mailing Address 315 STATE STREET

City ALBANY State NY Zip Code 12210

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼
State: District: 00

Transaction ID: SB.21

Date of Disbursement

M M / D D / Y Y Y Y
10 21 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

8500.00

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)

PAGE 57 / 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

REPUBLICAN PARTY OF RHODE ISLAND

Mailing Address 1800 POST ROAD

City
WARWICK

State
RI

Zip Code
02886

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB.24

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)