



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Mississippi Republican Party**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="2543.20"/>	<input type="text" value="2543.20"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="10338.69"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="76097.32"/>	<input type="text" value="382427.20"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="86436.01"/>	<input type="text" value="384970.40"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="45881.90"/>	<input type="text" value="344416.29"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="40554.11"/>	<input type="text" value="40554.11"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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)

Write or Type Committee Name

**Mississippi Republican Party**

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

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).....	48985.00	210240.00
(ii) Unitemized .....	23574.00	140681.45
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	72559.00	350921.45
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	3200.00	30490.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	75759.00	381411.45
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).....	338.18	1014.54
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.14	1.21
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	76097.32	382427.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	76097.32	382427.20

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	14456.90	89977.36
(ii) Non-Federal Share.....	12021.38	90152.39
(b) Other Federal Operating Expenditures .....	10626.51	88334.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	37104.79	268464.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	600.00	710.00
(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)).....	600.00	710.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	8177.11	75241.93
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	8177.11	75241.93
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	45881.90	344416.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33860.52	254263.90

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	75759.00	381411.45
34. Total Contribution Refunds (from Line 28(d)) .....	600.00	710.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	75159.00	380701.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	25083.41	178311.97
37. Offsets to Operating Expenditures (from Line 15, page 3).....	338.18	1014.54
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24745.23	177297.43

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Sally Brown**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3111 W. Lake Drive

City Meridian	State MS	Zip Code 39307-4144
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
08 / 07 / 2012  
**Transaction ID : 20817.C238714**

Amount of Each Receipt this Period  
250.00

Receipt

**B. William Dripps**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1404 - 32nd Street

City Laurel	State MS	Zip Code 39440-1415
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
08 / 06 / 2012  
**Transaction ID : 20817.C239200**

Amount of Each Receipt this Period  
100.00

Receipt

**C. William Mounger**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4450 Old Canton Rd., Ste. 203

City Jackson	State MS	Zip Code 39211
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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 ▼  
5400.00

Date of Receipt  
08 / 07 / 2012  
**Transaction ID : 20817.C238717**

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> 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 7 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Haley Barbour**  
Full Name (Last, First, Middle Initial)  
Mailing Address 648 Dogwood Drive  
City Yazoo City State MS Zip Code 39194  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Butler, Snow And Omara Occupation lobbyist  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **9900.00**

Date of Receipt **08 / 07 / 2012**  
**Transaction ID : 20817.C238725**  
Amount of Each Receipt this Period **25.00**  
Receipt

**B. Edwin Brent**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 8  
City Greenville State MS Zip Code 38702  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **225.00**

Date of Receipt **08 / 07 / 2012**  
**Transaction ID : 20817.C238738**  
Amount of Each Receipt this Period **25.00**  
Receipt

**C. S. F. Carlisle**  
Full Name (Last, First, Middle Initial)  
Mailing Address 100 Summer Place  
City Hattiesburg State MS Zip Code 39402  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Ins. Occupation Agency Mgr.  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **260.00**

Date of Receipt **08 / 07 / 2012**  
**Transaction ID : 20817.C238741**  
Amount of Each Receipt this Period **20.00**  
Receipt

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Richard Clark, Jr.**  
Full Name (Last, First, Middle Initial)  
Mailing Address #3 Cherokee Circle

City Hattiesburg	State MS	Zip Code 39401
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Date of Receipt  
08 / 07 / 2012  
**Transaction ID : 20817.C238747**

Amount of Each Receipt this Period  
10.00

Receipt

**B. Richard Clark, Jr.**  
Full Name (Last, First, Middle Initial)  
Mailing Address #3 Cherokee Circle

City Hattiesburg	State MS	Zip Code 39401
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Date of Receipt  
08 / 08 / 2012  
**Transaction ID : 20817.C239333**

Amount of Each Receipt this Period  
100.00

Receipt

**C. James Clayton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 103 E. Gresham Street

City Indianola	State MS	Zip Code 38751-2422
FEC ID number of contributing federal political committee. C		
Name of Employer Planters Bank	Occupation Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 160.00	

Date of Receipt  
08 / 07 / 2012  
**Transaction ID : 20817.C238748**

Amount of Each Receipt this Period  
20.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> 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 9 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. James Clayton**

Mailing Address 103 E. Gresham Street

City Indianola State MS Zip Code 38751-2422

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

Name of Employer Planters Bank Occupation Banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 08 / 13 / 2012  
**Transaction ID : 20817.C239387**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address P. O. Box 215

City Scott State MS Zip Code 38772

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 08 / 07 / 2012  
**Transaction ID : 20817.C238750**

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address 5021 Kiln DeLisle Road

City Kiln State MS Zip Code 39556-8185

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

Name of Employer Self Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
 08 / 07 / 2012  
**Transaction ID : 20817.C238769**

Amount of Each Receipt this Period  
15.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 135.00

**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 10 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Nell Frisbie**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5021 Kiln DeLisle Road  
City Kiln State MS Zip Code 39556-8185  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Real Estate  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **820.00**

Date of Receipt **08 / 20 / 2012**  
**Transaction ID : 20821.C239450**  
Amount of Each Receipt this Period **300.00**  
Receipt

**B. Frank Genzer**  
Full Name (Last, First, Middle Initial)  
Mailing Address 145 Saint Jude Street  
City Biloxi State MS Zip Code 39530-3602  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Architect  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **500.00**

Date of Receipt **08 / 07 / 2012**  
**Transaction ID : 20817.C238774**  
Amount of Each Receipt this Period **25.00**  
Receipt

**C. Russell Grant, Jr.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 36 Wintergreen Road  
City Madison State MS Zip Code 39110-9614  
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 **210.00**

Date of Receipt **08 / 07 / 2012**  
**Transaction ID : 20817.C238778**  
Amount of Each Receipt this Period **20.00**  
Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>345.00</b>
<b>TOTAL</b> 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 11 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. Joe Gregory**

Mailing Address P. O. Box 588

City Pontotoc State MS Zip Code 38863-0588

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

Name of Employer Pontotoc Ins. Agency Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 07 / 2012**

**Transaction ID : 20817.C238779**

Amount of Each Receipt this Period  
**20.00**

Receipt

Full Name (Last, First, Middle Initial)  
**B. Bill Gresham, III**

Mailing Address P. O. Box 690

City Indianola State MS Zip Code 38751-0690

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

Name of Employer Gresham Petro, Co. Occupation Oil Merchant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **150.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 07 / 2012**

**Transaction ID : 20817.C238780**

Amount of Each Receipt this Period  
**25.00**

Receipt

Full Name (Last, First, Middle Initial)  
**C. Bill Gresham, III**

Mailing Address P. O. Box 690

City Indianola State MS Zip Code 38751-0690

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

Name of Employer Gresham Petro, Co. Occupation Oil Merchant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 15 / 2012**

**Transaction ID : 20817.C239408**

Amount of Each Receipt this Period  
**100.00**

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **145.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

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

Mailing Address 105 E. Gresham Street

City Indianola State MS Zip Code 38751-2422

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

Name of Employer Double Quick, Inc. Occupation Retailer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **580.00**

Date of Receipt **08 / 07 / 2012**

**Transaction ID : 20817.C238781**

Amount of Each Receipt this Period **100.00**

Receipt

**B. Lanny Griffith, Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address 625 Oakland Terrace

City Alexandria State VA Zip Code 22302

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

Name of Employer Barbour, Griffith & Rogers Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **08 / 07 / 2012**

**Transaction ID : 20817.C238782**

Amount of Each Receipt this Period **50.00**

Receipt

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

Mailing Address 104 Dampeer Street

City Crystal Springs State MS Zip Code 39059-2561

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 ▼ **320.00**

Date of Receipt **08 / 07 / 2012**

**Transaction ID : 20817.C238783**

Amount of Each Receipt this Period **40.00**

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... **100.00**

**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 13 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Mark Henry**  
Full Name (Last, First, Middle Initial)

Mailing Address 321 Avalon Way

City Brandon	State MS	Zip Code 39047
-----------------	-------------	-------------------

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

Name of Employer State Of Mississippi	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2012

**Transaction ID : 20817.C239178**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 321 Avalon Way

City Brandon	State MS	Zip Code 39047
-----------------	-------------	-------------------

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

Name of Employer State Of Mississippi	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2012

**Transaction ID : 20817.C238791**

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address 2701 - 24th Avenue

City Gulfport	State MS	Zip Code 39501
------------------	-------------	-------------------

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 ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2012

**Transaction ID : 20817.C238798**

Amount of Each Receipt this Period  
10.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> 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 OF 89  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. Dewey Lane**

Mailing Address P. O. Box 1245

City State Zip Code  
 Pascagoula MS 39568-1245

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

Name of Employer Occupation  
 N/A Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 08 / 07 / 2012  
**Transaction ID : 20817.C238807**

Amount of Each Receipt this Period  
 25.00

Receipt

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

Mailing Address P. O. Box 1245

City State Zip Code  
 Pascagoula MS 39568-1245

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

Name of Employer Occupation  
 N/A Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 08 / 09 / 2012  
**Transaction ID : 20817.C239363**

Amount of Each Receipt this Period  
 100.00

Receipt

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

Mailing Address 200 Bellevue Circle

City State Zip Code  
 Mobile AL 36608

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

Name of Employer Occupation  
 N/A Homemaker

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1100.00

Date of Receipt  
 08 / 07 / 2012  
**Transaction ID : 20817.C238810**

Amount of Each Receipt this Period  
 25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

**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 OF 89  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. James Moreton**  
 Mailing Address P. O. Box 537  
 City State Zip Code  
 Brookhaven MS 39601-0537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A Retired  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2012  
**Transaction ID : 20817.C238833**  
 Amount of Each Receipt this Period  
 50.00  
 Receipt

Full Name (Last, First, Middle Initial)  
**B. C. Ray Phillips**  
 Mailing Address 372 Sundial Road  
 City State Zip Code  
 Madison MS 39110-8772  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self Investments  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2012  
**Transaction ID : 20817.C238844**  
 Amount of Each Receipt this Period  
 25.00  
 Receipt

Full Name (Last, First, Middle Initial)  
**C. J. W. Pressler**  
 Mailing Address 807 Hickory Avenue  
 City State Zip Code  
 Mc Comb MS 39648-2213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self Physician  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2012  
**Transaction ID : 20817.C238848**  
 Amount of Each Receipt this Period  
 30.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ► 105.00  
**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 16 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Wirt Yerger, Jr.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 129 Woodland Circle

City Jackson	State MS	Zip Code 39216
-----------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Insurance Agent
-----------------------------------	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5200.00

Date of Receipt  
08 / 07 / 2012  
**Transaction ID : 20817.C238904**

Amount of Each Receipt this Period  
25.00

Receipt

**B. Joe Tubb**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 4998

City Jackson	State MS	Zip Code 39296-4998
-----------------	-------------	------------------------

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

Name of Employer Tubb Equipment	Occupation Owner
------------------------------------	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
08 / 08 / 2012  
**Transaction ID : 20817.C239340**

Amount of Each Receipt this Period  
100.00

Receipt

**C. Helen Beeman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 115 Pecan Circle

City Quitman	State MS	Zip Code 39355-2653
-----------------	-------------	------------------------

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

Name of Employer Quitman Schools	Occupation Teacher
-------------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
08 / 06 / 2012  
**Transaction ID : 20817.C239237**

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> 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 17 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Helen Beeman**  
Full Name (Last, First, Middle Initial)

Mailing Address 115 Pecan Circle

City Quitman	State MS	Zip Code 39355-2653
-----------------	-------------	------------------------

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

Name of Employer Quitman Schools	Occupation Teacher
-------------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
08 / 07 / 2012  
**Transaction ID : 20817.C238914**

Amount of Each Receipt this Period  
200.00

Receipt

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

Mailing Address 5709 Belle Fontaine Dr

City Ocean Springs	State MS	Zip Code 39564
-----------------------	-------------	-------------------

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

Name of Employer McDonalds	Occupation Owner
-------------------------------	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
08 / 06 / 2012  
**Transaction ID : 20817.C239229**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address P. O. Box 819

City Grenada	State MS	Zip Code 38902-0819
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
08 / 08 / 2012  
**Transaction ID : 20817.C239344**

Amount of Each Receipt this Period  
200.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	320.00
<b>TOTAL</b> 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 18 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. James Herring**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 232 E. Semmes Street  
 City Canton State MS Zip Code 39046-4530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herring Long and Crews Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **710.00**

Date of Receipt **08 / 07 / 2012**  
**Transaction ID : 20817.C238917**  
 Amount of Each Receipt this Period **20.00**  
 Receipt

**B. Robert T. Hardeman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 903 Robert E. Lee Drive  
 City Greenwood State MS Zip Code 38930-2434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **08 / 07 / 2012**  
**Transaction ID : 20817.C238926**  
 Amount of Each Receipt this Period **25.00**  
 Receipt

**C. Ellett Lawrence**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 E. Cleveland Avenue  
 City Greenwood State MS Zip Code 38930-3112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lawrence Printing Occupation Owner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **205.00**

Date of Receipt **08 / 06 / 2012**  
**Transaction ID : 20817.C239213**  
 Amount of Each Receipt this Period **100.00**  
 Receipt

**SUBTOTAL** of Receipts This Page (optional)..... **145.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. Ellett Lawrence**

Mailing Address 400 E. Cleveland Avenue

City Greenwood	State MS	Zip Code 38930-3112
-------------------	-------------	------------------------

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

Name of Employer Lawrence Printing	Occupation Owner
---------------------------------------	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
08 / 07 / 2012  
**Transaction ID : 20817.C238927**

Amount of Each Receipt this Period  
15.00

Receipt

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

Mailing Address P. O. Box 384

City Hernando	State MS	Zip Code 38632-0384
------------------	-------------	------------------------

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

Name of Employer Self	Occupation Investor
--------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
08 / 07 / 2012  
**Transaction ID : 20817.C238933**

Amount of Each Receipt this Period  
35.00

Receipt

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

Mailing Address P. O. Box 2299

City Natchez	State MS	Zip Code 39121-2299
-----------------	-------------	------------------------

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

Name of Employer Armstrong Foundation	Occupation President
--	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
08 / 06 / 2012  
**Transaction ID : 20817.C239188**

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 20 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Frank Cannon**  
Full Name (Last, First, Middle Initial)  
Mailing Address 528 Mockingbird Drive  
City Long Beach State MS Zip Code 39560-3118  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **400.00**

Date of Receipt **08 / 07 / 2012**  
**Transaction ID : 20817.C238937**  
Amount of Each Receipt this Period **50.00**  
Receipt

**B. Mark Formby**  
Full Name (Last, First, Middle Initial)  
Mailing Address 423 North Main Street  
City Picayune State MS Zip Code 39466  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MS House of Rep. Occupation Legislator  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **300.00**

Date of Receipt **08 / 20 / 2012**  
**Transaction ID : 20821.C239449**  
Amount of Each Receipt this Period **300.00**  
Receipt

**C. Marsha Barbour**  
Full Name (Last, First, Middle Initial)  
Mailing Address 24 Woodlawn Dr  
City Yazoo City State MS Zip Code 39194  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Homemaker  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **380.00**

Date of Receipt **08 / 07 / 2012**  
**Transaction ID : 20817.C238940**  
Amount of Each Receipt this Period **10.00**  
Receipt

**SUBTOTAL** of Receipts This Page (optional)..... **360.00**  
**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 21 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. B. Keith Heard**  
Full Name (Last, First, Middle Initial)  
Mailing Address 21600 Zion Rd.  
City Brookeville State MD Zip Code 20833  
FEC ID number of contributing federal political committee. **C**  
Name of Employer T.C.H. Group Occupation Public Affairs  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 160.00

Date of Receipt 08 / 07 / 2012  
**Transaction ID : 20817.C238951**  
Amount of Each Receipt this Period 20.00  
Receipt

**B. B. Keith Heard**  
Full Name (Last, First, Middle Initial)  
Mailing Address 21600 Zion Rd.  
City Brookeville State MD Zip Code 20833  
FEC ID number of contributing federal political committee. **C**  
Name of Employer T.C.H. Group Occupation Public Affairs  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 760.00

Date of Receipt 08 / 22 / 2012  
**Transaction ID : 20909.C239458**  
Amount of Each Receipt this Period 600.00  
Receipt

**C. Max Jordan**  
Full Name (Last, First, Middle Initial)  
Mailing Address P. O. Box 823  
City Ocean Springs State MS Zip Code 39566-0823  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 06 / 2012  
**Transaction ID : 20817.C239227**  
Amount of Each Receipt this Period 100.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 720.00  
**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 22 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Gary Chism**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 2343

City Columbus State MS Zip Code 39702-9430

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

Name of Employer Columbus Ins. Ser. Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **160.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 07 / 2012**

**Transaction ID : 20817.C238955**

Amount of Each Receipt this Period  
**20.00**

Receipt

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

Mailing Address P. O. Box 2343

City Columbus State MS Zip Code 39702-9430

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

Name of Employer Columbus Ins. Ser. Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 16 / 2012**

**Transaction ID : 20817.C239428**

Amount of Each Receipt this Period  
**100.00**

Receipt

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

Mailing Address 432 Buena Vista Ave

City Jackson State MS Zip Code 39209-6405

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

Name of Employer Self Occupation Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **760.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 07 / 2012**

**Transaction ID : 20817.C238956**

Amount of Each Receipt this Period  
**20.00**

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>140.00</b>
<b>TOTAL</b> 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 23 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. Ellen Jernigan**

Mailing Address 1610 Mt. Pleasant Road

City Hernando	State MS	Zip Code 38632
------------------	-------------	-------------------

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

Name of Employer Hernando	Occupation Alderman
------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1090.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2012  
**Transaction ID : 20817.C239304**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 1610 Mt. Pleasant Road

City Hernando	State MS	Zip Code 38632
------------------	-------------	-------------------

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

Name of Employer Hernando	Occupation Alderman
------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1110.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2012  
**Transaction ID : 20817.C238966**

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address 3980 Council Circle

City Jackson	State MS	Zip Code 39206
-----------------	-------------	-------------------

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

Name of Employer University Medical Center	Occupation Nurse
---	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
130.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2012  
**Transaction ID : 20817.C238969**

Amount of Each Receipt this Period  
10.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> 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 24 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. Anna Barnes**

Mailing Address 3980 Council Circle

City Jackson	State MS	Zip Code 39206
-----------------	-------------	-------------------

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

Name of Employer University Medical Center	Occupation Nurse
---	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2012

**Transaction ID : 20817.C239412**

Amount of Each Receipt this Period  

100.00
--------

Receipt

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

Mailing Address 104 Hidden Heights

City Ridgeland	State MS	Zip Code 39157
-------------------	-------------	-------------------

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

Name of Employer JOAMCA Chemical Products	Occupation Manufacturer
--	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2012

**Transaction ID : 20817.C238984**

Amount of Each Receipt this Period  

40.00
-------

Receipt

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

Mailing Address 2032 Tidewater Lane

City Madison	State MS	Zip Code 39110-8928
-----------------	-------------	------------------------

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

Name of Employer Madison County	Occupation Chancery Clerk
------------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2012

**Transaction ID : 20817.C239233**

Amount of Each Receipt this Period  

100.00
--------

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>240.00</b>
<b>TOTAL</b> 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 25 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

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

Mailing Address 2032 Tidewater Lane

City Madison State MS Zip Code 39110-8928

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

Name of Employer Madison County Occupation Chancery Clerk

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **08 / 07 / 2012**

**Transaction ID : 20817.C238985**

Amount of Each Receipt this Period **15.00**

Receipt

Full Name (Last, First, Middle Initial)  
**B. Harris Barnes, III**

Mailing Address 5 River Bend Place, Suite A

City Jackson State MS Zip Code 39208

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

Name of Employer Barnes, Broom, Dallas & McLeod Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **08 / 06 / 2012**

**Transaction ID : 20817.C239258**

Amount of Each Receipt this Period **200.00**

Receipt

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

Mailing Address 114 Main Street

City Natchez State MS Zip Code 39120

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

Name of Employer Self Occupation Real Estate Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **08 / 07 / 2012**

**Transaction ID : 20817.C239006**

Amount of Each Receipt this Period **25.00**

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... **240.00**

**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 26 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Sue Stedman**  
Full Name (Last, First, Middle Initial)

Mailing Address 114 Main Street

City Natchez State MS Zip Code 39120

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

Name of Employer Self Occupation Real Estate Broker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 13 / 2012  
**Transaction ID : 20817.C239367**

Amount of Each Receipt this Period  
**600.00**

Receipt

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

Mailing Address 114 Main Street

City Natchez State MS Zip Code 39120

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

Name of Employer Self Occupation Real Estate Broker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **950.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 13 / 2012  
**Transaction ID : 20817.C239366**

Amount of Each Receipt this Period  
**100.00**

Receipt

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

Mailing Address 10576 Cambrooke Cv

City Collierville State TN Zip Code 38017-3600

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

Name of Employer Cellular South Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2012  
**Transaction ID : 20817.C239009**

Amount of Each Receipt this Period  
**30.00**

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... **730.00**

**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 27 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. Greg Snowden**

Mailing Address P. O. Box 3807

City	State	Zip Code
Meridian	MS	39303-3807

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

Name of Employer	Occupation
Self	Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **490.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2012

**Transaction ID : 20817.C239010**

Amount of Each Receipt this Period  

Receipt	30.00
---------	-------

Full Name (Last, First, Middle Initial)  
**B. James Cahill, Jr.**

Mailing Address P. O. Box 186

City	State	Zip Code
Senatobia	MS	38668-0186

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

Name of Employer	Occupation
Self	Rentals

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2012

**Transaction ID : 20817.C239249**

Amount of Each Receipt this Period  

Receipt	100.00
---------	--------

Full Name (Last, First, Middle Initial)  
**C. Delbert Hosemann, Jr.**

Mailing Address 2219 Heritage Hills Dr.

City	State	Zip Code
Jackson	MS	39211

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

Name of Employer	Occupation
State Of Mississippi	Secretary of State

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2012

**Transaction ID : 20817.C239011**

Amount of Each Receipt this Period  

Receipt	10.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>140.00</b>
<b>TOTAL</b> 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 28 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Bobbie Thomas**  
Full Name (Last, First, Middle Initial)  
Mailing Address 105 Hardy Avenue

City Long Beach	State MS	Zip Code 39560
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
80.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2012

**Transaction ID : 20817.C239016**

Amount of Each Receipt this Period  
100.00

Receipt

**B. Bobbie Thomas**  
Full Name (Last, First, Middle Initial)  
Mailing Address 105 Hardy Avenue

City Long Beach	State MS	Zip Code 39560
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1080.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : 20817.C239434**

Amount of Each Receipt this Period  
1000.00

Receipt

**C. Bobbie Thomas**  
Full Name (Last, First, Middle Initial)  
Mailing Address 105 Hardy Avenue

City Long Beach	State MS	Zip Code 39560
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1180.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : 20817.C239433**

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1110.00
<b>TOTAL</b> 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 29 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Charlie Williams**  
Full Name (Last, First, Middle Initial)  
Mailing Address P. O. Box 946

City Senatobia	State MS	Zip Code 38668
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Date of Receipt  
08 / 07 / 2012  
**Transaction ID : 20817.C239020**

Amount of Each Receipt this Period  
100.00

Receipt

**B. Brian Perry**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1125 Poplar Blvd.

City Jackson	State MS	Zip Code 39202
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt  
08 / 20 / 2012  
**Transaction ID : 20817.C239352**

Amount of Each Receipt this Period  
300.00

Receipt

**C. Terri Herring**  
Full Name (Last, First, Middle Initial)  
Mailing Address 319 Hillview Drive

City Ridgeland	State MS	Zip Code 39157-8607
FEC ID number of contributing federal political committee. C		
Name of Employer Kerioth Corp.	Occupation Real Estate Develop.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	

Date of Receipt  
08 / 17 / 2012  
**Transaction ID : 20819.C239436**

Amount of Each Receipt this Period  
600.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> 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 30 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Peter Wilson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 453 Carmargue Ln.  
City Biloxi State MS Zip Code 39531  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Bancorp South Occupation Bank Insurance Rep.  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 430.00

Date of Receipt 08 / 07 / 2012  
**Transaction ID : 20817.C239038**  
Amount of Each Receipt this Period 100.00  
Receipt

**B. Nan B. Lott**  
Full Name (Last, First, Middle Initial)  
Mailing Address 103 Eastwood Drive  
City Columbus State MS Zip Code 39702  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 160.00

Date of Receipt 08 / 07 / 2012  
**Transaction ID : 20817.C239039**  
Amount of Each Receipt this Period 20.00  
Receipt

**C. Nan B. Lott**  
Full Name (Last, First, Middle Initial)  
Mailing Address 103 Eastwood Drive  
City Columbus State MS Zip Code 39702  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 16 / 2012  
**Transaction ID : 20817.C239429**  
Amount of Each Receipt this Period 100.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 130.00  
**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 31 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Carl Ray Furr**  
Full Name (Last, First, Middle Initial)

Mailing Address 5317 Reddoch Street

City Jackson State MS Zip Code 39211

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

Name of Employer Self Occupation Civil Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2012  
**Transaction ID : 20909.C239481**

Amount of Each Receipt this Period  
 600.00

Receipt

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

Mailing Address 202 Weathersby Road

City Hattiesburg State MS Zip Code 39402

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2012  
**Transaction ID : 20817.C239056**

Amount of Each Receipt this Period  
 30.00

Receipt

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

Mailing Address PO Box 38

City Long Beach State MS Zip Code 39560

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

Name of Employer Self Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2012  
**Transaction ID : 20817.C239059**

Amount of Each Receipt this Period  
 20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00

**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 32 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. John Green**  
Full Name (Last, First, Middle Initial)

Mailing Address 431 Turnberry Ct.

City Oxford	State MS	Zip Code 38655
----------------	-------------	-------------------

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

Name of Employer Crossroads Strategies	Occupation Govt Relations
---	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
08 / 20 / 2012  
**Transaction ID : 20817.C239353**

Amount of Each Receipt this Period  
2500.00

Receipt

**B. Donald R. Taylor**  
Full Name (Last, First, Middle Initial)

Mailing Address 15018 New Zion Road

City Crystal Springs	State MS	Zip Code 39059-8838
-------------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
760.00

Date of Receipt  
08 / 07 / 2012  
**Transaction ID : 20817.C239066**

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address P.O. Box 905

City Tupelo	State MS	Zip Code 38802
----------------	-------------	-------------------

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

Name of Employer Congressman Alan Nunnelee	Occupation Political Director
---	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1280.00

Date of Receipt  
08 / 09 / 2012  
**Transaction ID : 20817.C239355**

Amount of Each Receipt this Period  
1200.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3720.00
<b>TOTAL</b> 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 33 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Morgan Baldwin**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 905

City Tupelo	State MS	Zip Code 38802
----------------	-------------	-------------------

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

Name of Employer Congressman Alan Nunnelee	Occupation Political Director
---	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	13	/	2012

**Transaction ID : 20909.C239505**

Amount of Each Receipt this Period  
20.00

Receipt

**B. Carey A. Johnston**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1064 Stokes Road

City Canton	State MS	Zip Code 39046
----------------	-------------	-------------------

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

Name of Employer Self	Occupation Endodontist
--------------------------	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2012

**Transaction ID : 20817.C239195**

Amount of Each Receipt this Period  
100.00

Receipt

**C. James Barksdale**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Woodlands Parkway Suite 118

City Ridgeland	State MS	Zip Code 39157
-------------------	-------------	-------------------

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 ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	20	/	2012

**Transaction ID : 20821.C239447**

Amount of Each Receipt this Period  
10000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10120.00
<b>TOTAL</b> 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 34 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. Henry Barbour**

Mailing Address 685 Woodland Drive

City Yazoo City State MS Zip Code 39194

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

Name of Employer Capitol Resources, LLC Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 07 / 2012**

**Transaction ID : 20817.C239072**

Amount of Each Receipt this Period  
**50.00**

Receipt

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

Mailing Address 105 Sunrise Point Dr.

City Brandon State MS Zip Code 39047

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

Name of Employer Ms Dept. Of Finance Occupation Exec. Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 06 / 2012**

**Transaction ID : 20817.C239168**

Amount of Each Receipt this Period  
**300.00**

Receipt

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

Mailing Address 5750 I-55 North

City Jackson State MS Zip Code 39211

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 ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 16 / 2012**

**Transaction ID : 20817.C239421**

Amount of Each Receipt this Period  
**300.00**

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **650.00**

**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 35 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Karen Elam**  
Full Name (Last, First, Middle Initial)

Mailing Address 3805 Majestic Oaks Dr.

City	State	Zip Code
Oxford	MS	38655

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

Name of Employer	Occupation
Self	Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1440.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : 20817.C239425**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 1842 Piedmont Street

City	State	Zip Code
Jackson	MS	39202

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

Name of Employer	Occupation
Butler, Snow And Omara	Exec. Asst

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
80.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2012

**Transaction ID : 20817.C239080**

Amount of Each Receipt this Period  
10.00

Receipt

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

Mailing Address 1842 Piedmont Street

City	State	Zip Code
Jackson	MS	39202

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

Name of Employer	Occupation
Butler, Snow And Omara	Exec. Asst

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2012

**Transaction ID : 20817.C239418**

Amount of Each Receipt this Period  
300.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	410.00
<b>TOTAL</b> 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 36 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Ryan Annison**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1443 Sheffield Drive

City Jackson	State MS	Zip Code 39211
-----------------	-------------	-------------------

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

Name of Employer Senator Roger Wicker	Occupation Executive
--	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
160.00

Date of Receipt  
08 / 07 / 2012  
**Transaction ID : 20817.C239082**

Amount of Each Receipt this Period  
20.00

Receipt

**B. Ryan Annison**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1443 Sheffield Drive

City Jackson	State MS	Zip Code 39211
-----------------	-------------	-------------------

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

Name of Employer Senator Roger Wicker	Occupation Executive
--	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  
08 / 15 / 2012  
**Transaction ID : 20817.C239417**

Amount of Each Receipt this Period  
300.00

Receipt

**C. Irl Dean Rhodes**  
Full Name (Last, First, Middle Initial)  
Mailing Address 159 Dogwood Place

City Jackson	State MS	Zip Code 39232
-----------------	-------------	-------------------

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

Name of Employer CO-MAN, Inc.	Occupation Executive
----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
08 / 06 / 2012  
**Transaction ID : 20817.C239221**

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	420.00
<b>TOTAL</b> 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 37 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Dana Stringer**  
Full Name (Last, First, Middle Initial)

Mailing Address 104 Boxwood Cove

City	State	Zip Code
Brandon	MS	39047

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

Name of Employer	Occupation
Self	Project Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2012

**Transaction ID : 20817.C239358**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 3908 Cambridge St.

City	State	Zip Code
Jackson	MS	39216

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

Name of Employer	Occupation
Adams & Reese, LLP	Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
160.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2012

**Transaction ID : 20817.C239093**

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address 3908 Cambridge St.

City	State	Zip Code
Jackson	MS	39216

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

Name of Employer	Occupation
Adams & Reese, LLP	Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2012

**Transaction ID : 20817.C239414**

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	220.00
<b>TOTAL</b> 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 OF 89  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. Sampat Shivangi**

Mailing Address 104 Summer Lake Drive

City State Zip Code  
 Ridgeland MS 39157

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

Name of Employer Occupation  
 Self Medical Doctor

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2600.00

Date of Receipt  
 08 / 13 / 2012  
**Transaction ID : 20817.C239400**

Amount of Each Receipt this Period  
 1000.00

Receipt

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

Mailing Address 1849 Gilles Pt. N.

City State Zip Code  
 Southaven MS 38671

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

Name of Employer Occupation  
 Self Developer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 08 / 27 / 2012  
**Transaction ID : 20819.C239444**

Amount of Each Receipt this Period  
 300.00

Receipt

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

Mailing Address P.O. Box 1199

City State Zip Code  
 Cleveland MS 38732

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

Name of Employer Occupation  
 N/A Homemaker

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 08 / 07 / 2012  
**Transaction ID : 20817.C239099**

Amount of Each Receipt this Period  
 50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.00

**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 39 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Francis Rullan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1613 Linden Place  
 City Jackson State MS Zip Code 39202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Div. of Medicaid Director of Public Relations  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 08 / 07 / 2012  
**Transaction ID : 20817.C239100**  
 Amount of Each Receipt this Period  
 200.00  
 Receipt

**B. Bobby Lee Graham, Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2306 Twin Lakes Circle  
 City Jackson State MS Zip Code 39211-6757  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self Physician  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 08 / 06 / 2012  
**Transaction ID : 20817.C239257**  
 Amount of Each Receipt this Period  
 500.00  
 Receipt

**C. Don Halle**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 225 Cowan Rd.  
 City Gulfport State MS Zip Code 39507-1430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self Land Developer  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 08 / 06 / 2012  
**Transaction ID : 20817.C239169**  
 Amount of Each Receipt this Period  
 300.00  
 Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	820.00
<b>TOTAL</b> 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 OF 89  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. William Billingsley**

Mailing Address 569 N Old Canton Rd

City State Zip Code  
 Madison MS 39110

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

Name of Employer Occupation  
 Self Investor

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 08 / 07 / 2012  
**Transaction ID : 20817.C239106**

Amount of Each Receipt this Period  
 50.00

Receipt

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

Mailing Address 2210 Culleywood Rd.

City State Zip Code  
 Jackson MS 39211

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

Name of Employer Occupation  
 State Of Mississippi Administration

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 700.00

Date of Receipt  
 08 / 15 / 2012  
**Transaction ID : 20817.C239420**

Amount of Each Receipt this Period  
 300.00

Receipt

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

Mailing Address P.O. Box 6189

City State Zip Code  
 Diamondhead MS 39525

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

Name of Employer Occupation  
 Self Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 08 / 06 / 2012  
**Transaction ID : 20817.C239226**

Amount of Each Receipt this Period  
 100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**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 41 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. A.L. Price**  
Full Name (Last, First, Middle Initial)  
Mailing Address 716 Inheritance Pl.  
City Flowood State MS Zip Code 39232-7903  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.00**

Date of Receipt **08 / 06 / 2012**  
**Transaction ID : 20817.C239207**  
Amount of Each Receipt this Period **100.00**  
Receipt

**B. Giles Ward**  
Full Name (Last, First, Middle Initial)  
Mailing Address 114 Jordan Circle  
City Louisville State MS Zip Code 39339  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Mississippi Senate Occupation State Senator  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **80.00**

Date of Receipt **08 / 07 / 2012**  
**Transaction ID : 20817.C239110**  
Amount of Each Receipt this Period **10.00**  
Receipt

**C. Giles Ward**  
Full Name (Last, First, Middle Initial)  
Mailing Address 114 Jordan Circle  
City Louisville State MS Zip Code 39339  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Mississippi Senate Occupation State Senator  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **380.00**

Date of Receipt **08 / 22 / 2012**  
**Transaction ID : 20909.C239468**  
Amount of Each Receipt this Period **300.00**  
Receipt

**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: (check only one)	PAGE 42 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Kevin Blackwell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4105 Jessica Drive  
 City Southhaven State MS Zip Code 38672  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Health Care  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **08 / 20 / 2012**  
**Transaction ID : 20817.C239351**  
 Amount of Each Receipt this Period **300.00**  
 Receipt

**B. Tommy Gollott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 Bayview Dr.  
 City Biloxi State MS Zip Code 39530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Of Mississippi Occupation Senator  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **08 / 06 / 2012**  
**Transaction ID : 20817.C239294**  
 Amount of Each Receipt this Period **20.00**  
 Receipt

**C. Linda Gayle Bentz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2619 Parkview Drive  
 City Biloxi State MS Zip Code 39531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt **08 / 09 / 2012**  
**Transaction ID : 20817.C239354**  
 Amount of Each Receipt this Period **600.00**  
 Receipt

**SUBTOTAL** of Receipts This Page (optional)..... **920.00**  
**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 43 OF 89  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Linda Gayle Bentz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2619 Parkview Drive  
 City State Zip Code  
 Biloxi MS 39531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A Retired  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 17 / 2012  
**Transaction ID : 20819.C239438**  
 Amount of Each Receipt this Period  
 300.00  
 Receipt

**B. William G. Yates, III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2104 Ward Lane  
 City State Zip Code  
 Biloxi MS 39531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Yates Construction Executive  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 13 / 2012  
**Transaction ID : 20817.C239399**  
 Amount of Each Receipt this Period  
 10000.00  
 Receipt

**C. Sidney Allen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 193 Saint Ives Drive  
 City State Zip Code  
 Madison MS 39110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Comcast lobbyist  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2012  
**Transaction ID : 20817.C239190**  
 Amount of Each Receipt this Period  
 100.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10400.00  
**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 44 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Sidney Allen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 193 Saint Ives Drive  
City Madison State MS Zip Code 39110  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Comcast Occupation lobbyist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 07 / 2012  
**Transaction ID : 20817.C239113**  
Amount of Each Receipt this Period 15.00  
Receipt

**B. Sidney Allen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 193 Saint Ives Drive  
City Madison State MS Zip Code 39110  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Comcast Occupation lobbyist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 570.00

Date of Receipt 08 / 13 / 2012  
**Transaction ID : 20817.C239375**  
Amount of Each Receipt this Period 300.00  
Receipt

**C. James Peavy**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2000 Front St. #407  
City Meridian State MS Zip Code 39301  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 23 / 2012  
**Transaction ID : 20909.C239479**  
Amount of Each Receipt this Period 300.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 615.00  
**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 45 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Joel Bomgar**  
Full Name (Last, First, Middle Initial)

Mailing Address 5624 Brentwood Dr.

City Jackson State MS Zip Code 39211

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

Name of Employer Bomgar Corporation Occupation Founder & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2012  
**Transaction ID : 20817.C239117**

Amount of Each Receipt this Period  
 25.00

Receipt

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

Mailing Address 1112 Halstead Bayou Drive

City Ocean Springs State MS Zip Code 39564

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

Name of Employer Jackson County Occupation Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2012  
**Transaction ID : 20817.C239124**

Amount of Each Receipt this Period  
 20.00

Receipt

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

Mailing Address 402 Daniel Drive

City Brandon State MS Zip Code 39047

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2012  
**Transaction ID : 20817.C239165**

Amount of Each Receipt this Period  
 600.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 645.00

**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 46 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

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

Mailing Address 210 South Dewey Street

City	State	Zip Code
Ackerman	MS	39735

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

Name of Employer	Occupation
North Amer. Coal Corp	Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2012

**Transaction ID : 20909.C239510**

Amount of Each Receipt this Period  

100.00
--------

Receipt

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

Mailing Address 111 Wisteria Hill Dr.

City	State	Zip Code
Flowood	MS	39232-7422

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

Name of Employer	Occupation
N/A	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	22	/	2012

**Transaction ID : 20909.C239475**

Amount of Each Receipt this Period  

100.00
--------

Receipt

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

Mailing Address 6505 Shore Drive

City	State	Zip Code
Ocean Springs	MS	39564

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

Name of Employer	Occupation
N/A	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2012

**Transaction ID : 20817.C239331**

Amount of Each Receipt this Period  

100.00
--------

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>300.00</b>
<b>TOTAL</b> 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 47 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Lynn Fitch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 109 Cedar Woods Cove  
 City Madison State MS Zip Code 39110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Exec. Director  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **440.00**

Date of Receipt **08 / 06 / 2012**  
**Transaction ID : 20817.C239162**  
 Amount of Each Receipt this Period **300.00**  
 Receipt

**B. Lynn Fitch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 109 Cedar Woods Cove  
 City Madison State MS Zip Code 39110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Exec. Director  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **460.00**

Date of Receipt **08 / 07 / 2012**  
**Transaction ID : 20817.C239142**  
 Amount of Each Receipt this Period **20.00**  
 Receipt

**C. Drew St. John II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Covington Bend  
 City Madison State MS Zip Code 39110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer New South Equipment Mats Occupation CEO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **3200.00**

Date of Receipt **08 / 07 / 2012**  
**Transaction ID : 20817.C239144**  
 Amount of Each Receipt this Period **400.00**  
 Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>720.00</b>
<b>TOTAL</b> 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 48 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. Boyce Adams**

Mailing Address P.O. Box 8370

City Columbus State MS Zip Code 39705

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

Name of Employer Bank Tel Occupation Banking

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 06 / 2012**

**Transaction ID : 20817.C239161**

Amount of Each Receipt this Period  
**300.00**

Receipt

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

Mailing Address 300 Sherborne Place

City Flowood State MS Zip Code 39232

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

Name of Employer Baker Donelson Attorneys Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 20 / 2012**

**Transaction ID : 20821.C239448**

Amount of Each Receipt this Period  
**600.00**

Receipt

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

Mailing Address 1228 Monticello Blvd.

City Ocean Springs State MS Zip Code 39564

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 08 / 2012**

**Transaction ID : 20817.C239332**

Amount of Each Receipt this Period  
**100.00**

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1000.00</b>
<b>TOTAL</b> 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 49 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Herchel Price**  
Full Name (Last, First, Middle Initial)  
Mailing Address 363 County Home Road

City Ellisville	State MS	Zip Code 39437
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2012

**Transaction ID : 20817.C239235**

Amount of Each Receipt this Period  
100.00

Receipt

**B. Brandon Payne**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 6213

City Gulfport	State MS	Zip Code 39506
------------------	-------------	-------------------

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

Name of Employer Senator Roger Wicker	Occupation Field Representative
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2012

**Transaction ID : 20909.C239504**

Amount of Each Receipt this Period  
100.00

Receipt

**C. Brandon Payne**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 6213

City Gulfport	State MS	Zip Code 39506
------------------	-------------	-------------------

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

Name of Employer Senator Roger Wicker	Occupation Field Representative
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	13	/	2012

**Transaction ID : 20909.C239507**

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> 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 50 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Jenny Berryhill**  
Full Name (Last, First, Middle Initial)

Mailing Address 907 Euclid Ave.

City Jackson	State MS	Zip Code 39202
-----------------	-------------	-------------------

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

Name of Employer Butler, Snow And Omara	Occupation Exec. Asst
--	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2012

**Transaction ID : 20817.C239419**

Amount of Each Receipt this Period  

300.00
--------

Receipt

**B. C. Tyler Norman**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 11

City Newton	State MS	Zip Code 39345
----------------	-------------	-------------------

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

Name of Employer Chuck Norman Roofing Inc.	Occupation Roofing Contractor
---	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	13	/	2012

**Transaction ID : 20817.C239376**

Amount of Each Receipt this Period  

300.00
--------

Receipt

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

Mailing Address 2000 Front Street #203

City Meridian	State MS	Zip Code 39301
------------------	-------------	-------------------

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

Name of Employer City Of Meridian	Occupation Mayors Office
--------------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	23	/	2012

**Transaction ID : 20909.C239480**

Amount of Each Receipt this Period  

300.00
--------

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>900.00</b>
<b>TOTAL</b> 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 51 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Amy Russell**  
Full Name (Last, First, Middle Initial)

Mailing Address 298 Hoy Farms Dr.

City Madison	State MS	Zip Code 39110
-----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
08 / 20 / 2012  
**Transaction ID : 20821.C239451**

Amount of Each Receipt this Period  
300.00

Receipt

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

Mailing Address 300 Byram Dr. Apt 31B

City Byram	State MS	Zip Code 39272
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
08 / 06 / 2012  
**Transaction ID : 20817.C239159**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 300 Byram Dr. Apt 31B

City Byram	State MS	Zip Code 39272
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
08 / 15 / 2012  
**Transaction ID : 20817.C239415**

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 52 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Justin Braswell**  
Full Name (Last, First, Middle Initial)

Mailing Address 1306 Robert Drive

City Jackson State MS Zip Code 39211

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

Name of Employer Triumph Campaigns Occupation Political Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2012  
**Transaction ID : 20817.C239160**

Amount of Each Receipt this Period  
 1200.00

Receipt

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

Mailing Address 305 Green Oak Lane

City Madison State MS Zip Code 39110

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

Name of Employer MS Dept of Treasury Occupation Exec.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2012  
**Transaction ID : 20817.C239163**

Amount of Each Receipt this Period  
 300.00

Receipt

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

Mailing Address 151 Oakhurst Trail

City Ridgeland State MS Zip Code 39157

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 ▼ 100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2012  
**Transaction ID : 20817.C239241**

Amount of Each Receipt this Period  
 100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1600.00
<b>TOTAL</b> 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 53 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Laura Barbour**  
Full Name (Last, First, Middle Initial)

Mailing Address 151 Oakhurst Trail

City State Zip Code  
Ridgeland MS 39157

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

Name of Employer Occupation  
Self Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
08 / 06 / 2012  
**Transaction ID : 20817.C239167**

Amount of Each Receipt this Period  
600.00

Receipt

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

Mailing Address 515 College St. Apt. 6

City State Zip Code  
Columbus IL 39701

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

Name of Employer Occupation  
Cadence Bank Banking

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
08 / 09 / 2012  
**Transaction ID : 20817.C239356**

Amount of Each Receipt this Period  
300.00

Receipt

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

Mailing Address 515 College St. Apt. 6

City State Zip Code  
Columbus IL 39701

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

Name of Employer Occupation  
Cadence Bank Banking

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
08 / 17 / 2012  
**Transaction ID : 20819.C239437**

Amount of Each Receipt this Period  
300.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<b>TOTAL</b> 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 54 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. John Jennings**

Mailing Address 100 Amberwood Ct.

City Longwood State FL Zip Code 32779-2144

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

Name of Employer Waste Pro Occupation Chairman & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
08 / 13 / 2012  
**Transaction ID : 20817.C239377**

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address P.O. Box 8675

City Jackson State MS Zip Code 39284

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

Name of Employer University Medical Center Occupation Medical Doctor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
08 / 27 / 2012  
**Transaction ID : 20819.C239445**

Amount of Each Receipt this Period  
300.00

Receipt

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

Mailing Address 602 Northlake Ave.

City Ridgeland State MS Zip Code 39157

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

Name of Employer Horne CPA Group Occupation Business Advisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
08 / 20 / 2012  
**Transaction ID : 20821.C239452**

Amount of Each Receipt this Period  
300.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1600.00
<b>TOTAL</b> 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 55 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. Andrew Laws**

Mailing Address 112 Oxmoor Ridge

City	State	Zip Code
Oxford	MS	38655

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

Name of Employer	Occupation
Huron Consulting Group	Senior Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	20	/	2012

**Transaction ID : 20821.C239453**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 413 Kahler St. #8

City	State	Zip Code
Gulfport	MS	39507

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

Name of Employer	Occupation
MS Dept of Treasury	Exec. Asst

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	22	/	2012

**Transaction ID : 20909.C239457**

Amount of Each Receipt this Period  
300.00

Receipt

Full Name (Last, First, Middle Initial)  
**C. Chuck Nicholson, Jr.**

Mailing Address 321 Westminster Ct.

City	State	Zip Code
Brandon	MS	39047

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

Name of Employer	Occupation
Community Bank	Chief Operating Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	22	/	2012

**Transaction ID : 20909.C239466**

Amount of Each Receipt this Period  
250.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1050.00
<b>TOTAL</b> 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 56 OF 89  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)  
**A. Emily Carter**

Mailing Address 1378 Marathon Pointe

City State Zip Code  
 Glen Allan MS 38744

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

Name of Employer Occupation  
 State Auditors Office Assistant

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 22 / 2012  
**Transaction ID : 20909.C239476**

Amount of Each Receipt this Period  
 300.00

Receipt

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

Mailing Address 14028 Puerto Road

City State Zip Code  
 Ocean Springs MS 39564

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

Name of Employer Occupation  
 Baptist North MS Hospital Physician

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 27 / 2012  
**Transaction ID : 20909.C239514**

Amount of Each Receipt this Period  
 500.00

Receipt

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	48985.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 57 OF 89
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial) <b>A. Citizens For Cochran</b>		Date of Receipt MM / DD / YYYY 08 / 06 / 2012 <b>Transaction ID : 20817.C239164</b>
Mailing Address Attn: Senator Thad Cochran P. O. Box 7183		Amount of Each Receipt this Period 900.00
City Tupelo	State MS	Zip Code 38802-7183
FEC ID number of contributing federal political committee. C C00091892		Receipt
Name of Employer N/A	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10900.00	

Full Name (Last, First, Middle Initial) <b>B. Wicker for Senate</b>		Date of Receipt MM / DD / YYYY 08 / 23 / 2012 <b>Transaction ID : 20909.C239488</b>
Mailing Address P.O. Box 64		Amount of Each Receipt this Period 300.00
City Jackson	State MS	Zip Code 39205
FEC ID number of contributing federal political committee. C C00443218		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4300.00	

Full Name (Last, First, Middle Initial) <b>C. Wicker for Senate</b>		Date of Receipt MM / DD / YYYY 08 / 23 / 2012 <b>Transaction ID : 20909.C239487</b>
Mailing Address P.O. Box 64		Amount of Each Receipt this Period 500.00
City Jackson	State MS	Zip Code 39205
FEC ID number of contributing federal political committee. C C00443218		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1700.00
<b>TOTAL</b> 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 58 OF 89
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Bill Marcy for Congress**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 216 Pebble Beach Drive  
 City Vicksburg State MS Zip Code 39183  
 FEC ID number of contributing federal political committee. **C** C00488684  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2012  
**Transaction ID : 20817.C239166**  
 Amount of Each Receipt this Period  
 600.00  
 Receipt

**B. Palazzo for Congress**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 4634  
 City Biloxi State MS Zip Code 39535  
 FEC ID number of contributing federal political committee. **C** C00477323  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012  
**Transaction ID : 20819.C239443**  
 Amount of Each Receipt this Period  
 900.00  
 Receipt

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3200.00

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

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

FOR LINE NUMBER: PAGE 59 OF 89  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Brett Kittredge**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1906 Gloria Drive  
City Pearl State MS Zip Code 39208-  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Mississippi Republican Party Occupation Communications  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1014.54

Date of Receipt 08 / 08 / 2012  
**Transaction ID : 20817.C239349**  
Amount of Each Receipt this Period 338.18  
Offsets to Operating Expenditu  
NOTE:Reimb for Health Insuranc

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	338.18
<b>TOTAL</b> This Period (last page this line number only).....▶	338.18

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)

**A. Spalding Group**

Mailing Address 2306 Frankfort Ave.

City Louisville State KY Zip Code 40206-

Purpose of Disbursement  
FEA GOTV Yard Signs/BumperStickers

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 23 / 2012

Transaction ID : 20909.E25298

Amount of Each Disbursement this Period

887.95

FEA GOTV YARD SIGNS/BUMPERSTICKERS

Full Name (Last, First, Middle Initial)

**B. Mississippi State Tax Commission**

Mailing Address P. O. Box 960

City Jackson State MS Zip Code 39205-

Purpose of Disbursement  
-Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2012

Transaction ID : 20909.E25304

Amount of Each Disbursement this Period

154.00

-PAYROLL TAXES

Full Name (Last, First, Middle Initial)

**C. Blue Cross & Blue Shield of MS**

Mailing Address P. O. Box 23082

City Jackson State MS Zip Code 39225-3082

Purpose of Disbursement  
-Health Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2012

Transaction ID : 20909.E25306

Amount of Each Disbursement this Period

409.51

-HEALTH INSURANCE

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

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

1451.46

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)

**A. Aristotle Publishing, Inc.**

Mailing Address 205 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
-Merchant Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 20909.E25311**

Amount of Each Disbursement this Period

-MERCHANT FEE

Full Name (Last, First, Middle Initial)

**B. Gober Hilgers PLLC**

Mailing Address 2101 Cedar Springs Rd.  
Suite 1050

City Dallas State TX Zip Code 75201-

Purpose of Disbursement  
-FEC Compliance Firm

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 20817.E25254**

Amount of Each Disbursement this Period

-FEC COMPLIANCE FIRM

Full Name (Last, First, Middle Initial)

**C. PolitiCap**

Mailing Address 134 Cedar Woods

City Madison State MS Zip Code 39110-

Purpose of Disbursement  
-Fundraising Consultant

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 20817.E25233**

Amount of Each Disbursement this Period

-FUNDRAISING CONSULTANT

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)

**A. Bluebonnet Life Insurance Company**

Mailing Address P. O. Box 22867

City Jackson State MS Zip Code 39225-2867

Purpose of Disbursement  
-Insurance

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 20817.E25247**

Amount of Each Disbursement this Period

-INSURANCE

Full Name (Last, First, Middle Initial)

**B. PHS, Inc.**

Mailing Address P.O. Box 1100

City Magee State MS Zip Code 39111-

Purpose of Disbursement  
-Political Strategy Consultant

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 20817.E25234**

Amount of Each Disbursement this Period

-POLITICAL STRATEGY CONSULTANT

Full Name (Last, First, Middle Initial)

**C. Mississippi Employment Security Comm.**

Mailing Address P O Box 22781

City Jackson State MS Zip Code 39225-2781

Purpose of Disbursement  
-Payroll Taxes

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 20909.E25305**

Amount of Each Disbursement this Period

-PAYROLL TAXES

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

**A. Mississippi Employment Security Comm.**

Mailing Address P O Box 22781

City Jackson State MS Zip Code 39225-2781

Purpose of Disbursement  
-Payroll Taxes

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : 20817.E25232

Amount of Each Disbursement this Period

-PAYROLL TAXES

Full Name (Last, First, Middle Initial)

**B. ADP, Inc.**

Mailing Address 5680 New Northside Drive

City Atlanta State GA Zip Code 30328-

Purpose of Disbursement  
-Payroll Processing Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : 20909.E25299

Amount of Each Disbursement this Period

-PAYROLL PROCESSING FEES

Full Name (Last, First, Middle Initial)

**C. Aristotle Publishing, Inc.**

Mailing Address 205 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
-Merchant Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : 20909.E25317

Amount of Each Disbursement this Period

-MERCHANT FEE

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)

**A. Key Merchant Services LLC**

Mailing Address 7207 Chapman Highway

City Knoxville State TN Zip Code 37920-6609

Purpose of Disbursement  
-Merchant Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 20909.E25307**

Amount of Each Disbursement this Period

-MERCHANT FEES

Full Name (Last, First, Middle Initial)

**B. Mississippi State Tax Commission**

Mailing Address P. O. Box 960

City Jackson State MS Zip Code 39205-

Purpose of Disbursement  
-Payroll Taxes

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 20817.E25231**

Amount of Each Disbursement this Period

-PAYROLL TAXES

Full Name (Last, First, Middle Initial)

**C. Aristotle Publishing, Inc.**

Mailing Address 205 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
-Merchant Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 20821.E25292**

Amount of Each Disbursement this Period

-MERCHANT FEE

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)

**A. Aristotle Publishing, Inc.**

Mailing Address 205 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
-Merchant Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 20909.E25308**

Amount of Each Disbursement this Period

-MERCHANT FEE

Full Name (Last, First, Middle Initial)

**B. ADP, Inc.**

Mailing Address 5680 New Northside Drive

City Atlanta State GA Zip Code 30328-

Purpose of Disbursement  
-Payroll Processing Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 20817.E25226**

Amount of Each Disbursement this Period

-PAYROLL PROCESSING FEES

Full Name (Last, First, Middle Initial)

**C. Internal Revenue Service**

Mailing Address P. O. Box 70503

City Charlotte State NC Zip Code 28272-0503

Purpose of Disbursement  
-Payroll Taxes

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 20817.E25230**

Amount of Each Disbursement this Period

-PAYROLL TAXES

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)

**A. Internal Revenue Service**

Mailing Address P. O. Box 70503

City Charlotte State NC Zip Code 28272-0503

Purpose of Disbursement  
- Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	31	/	2012

**Transaction ID : 20909.E25303**

Amount of Each Disbursement this Period

<input type="text" value="1099.58"/>
--------------------------------------

- PAYROLL TAXES

Full Name (Last, First, Middle Initial)

**B. Rebekah Eckols Aldridge**

Mailing Address 3971 Berkley Drive

City Jackson State MS Zip Code 39202-

Purpose of Disbursement  
-National Convention Planner

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	14	/	2012

**Transaction ID : 20817.E25235**

Amount of Each Disbursement this Period

<input type="text" value="1500.00"/>
--------------------------------------

-NATIONAL CONVENTION PLANNER

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

<input type="text"/>
----------------------

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

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

<input type="text" value="2599.58"/>
--------------------------------------

<input type="text" value="10610.51"/>
---------------------------------------



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)

**A. Victoria Eiland**

Mailing Address 57 Woodlake Drive

City State Zip Code  
Brandon MS 39047-

Purpose of Disbursement  
FEA Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 13 / 2012

**Transaction ID : 20817.E25227**

Amount of Each Disbursement this Period

1055.49

FEA SALARY

Full Name (Last, First, Middle Initial)

**B. Mamie C. Taylor**

Mailing Address 138 Mockingbird Lane

City State Zip Code  
Ridgeland MS 39157-

Purpose of Disbursement  
FEA Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 31 / 2012

**Transaction ID : 20909.E25302**

Amount of Each Disbursement this Period

1521.68

FEA SALARY

Full Name (Last, First, Middle Initial)

**C. Brett Kittredge**

Mailing Address 1906 Gloria Drive

City State Zip Code  
Pearl MS 39208-

Purpose of Disbursement  
FEA Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 13 / 2012

**Transaction ID : 20817.E25228**

Amount of Each Disbursement this Period

1511.38

FEA SALARY

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

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

4088.55

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Mississippi Republican Party**

Full Name (Last, First, Middle Initial)

**A. Brett Kittredge**

Mailing Address 1906 Gloria Drive

City Pearl State MS Zip Code 39208-

Purpose of Disbursement  
FEA Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2012

**Transaction ID : 20909.E25301**

Amount of Each Disbursement this Period

1511.38

FEA SALARY

Full Name (Last, First, Middle Initial)

**B. Victoria Eiland**

Mailing Address 57 Woodlake Drive

City Brandon State MS Zip Code 39047-

Purpose of Disbursement  
FEA Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2012

**Transaction ID : 20909.E25300**

Amount of Each Disbursement this Period

1055.50

FEA SALARY

Full Name (Last, First, Middle Initial)

**C. Mamie C. Taylor**

Mailing Address 138 Mockingbird Lane

City Ridgeland State MS Zip Code 39157-

Purpose of Disbursement  
FEA Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2012

**Transaction ID : 20817.E25229**

Amount of Each Disbursement this Period

1521.68

FEA SALARY

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

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

4088.56

8177.11

**SCHEDULE H1 (FEC Form 3X)**

**METHOD OF ALLOCATION FOR:**

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

NAME OF COMMITTEE (In Full)  
 Mississippi Republican Party

Transaction ID : H191016.J42

**USE ONLY ONE SECTION, A or B**

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

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

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

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

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

Federal.....  %  
 Nonfederal .....  %

This ratio applies to (check all that apply):

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

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

**ALLOCATION RATIOS**

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

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

Methods of allocation:

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

ACTIVITY OR EVENT IDENTIFIER 2012 FUNDRAISING DIRECT MAIL  ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported <b>Transaction ID : H2120817.J58</b>	FEDERAL %  <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;">96.00</div> %	NONFEDERAL %  <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;">4.00</div> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %	NONFEDERAL %  <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %	NONFEDERAL %  <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %	NONFEDERAL %  <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %	NONFEDERAL %  <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %	NONFEDERAL %  <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) <b>Joe Nosef</b>		Transaction ID : H420817.E25211		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 2208 Heritage Hill Drive				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Jackson	State MS	Zip Code 39211-			
Purpose of Disbursement: - Mileage to Neshoba & Oxford		002		Allocated Activity or Event Year-To-Date 121493.19	
Activity or Event Identifier: ADMINISTRATION B 21		Category/ Type		Date 08 / 08 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
136.66			242.96		379.62

B. Full Name (Last, First, Middle Initial) <b>Joe Nosef</b>		Transaction ID : H420817.E25212		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 2208 Heritage Hill Drive				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Jackson	State MS	Zip Code 39211-			
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW				Allocated Activity or Event Year-To-Date 121113.57	
Activity or Event Identifier: ADMINISTRATION B 21		Category/ Type		Date 08 / 08 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
37.80			67.19		104.99

C. Full Name (Last, First, Middle Initial) <b>AT&amp;T</b>		Transaction ID : H420817.E25214		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P. O. Box 9001309				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Louisville	State KY	Zip Code 40290-1309			
Purpose of Disbursement: -Internet		001		Allocated Activity or Event Year-To-Date 25.00	
Activity or Event Identifier: ADMINISTRATION B 21		Category/ Type		Date 08 / 08 / 2012	
[MEMO ITEM] 001-Internet					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
9.00			16.00		25.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
174.46		310.15		484.61

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) <b>CSpire</b>		Transaction ID : <b>H420817.E25213</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 519			Allocated Activity or Event Year-To-Date 79.99	
City Meadville	State MS	Zip Code 39653-0519	Date 08 / 08 / 2012	
Purpose of Disbursement: -Cell Phone		001		
Activity or Event Identifier: <b>ADMINISTRATION B 21</b>		Category/ Type		
[MEMO ITEM] 001-Cell Phone				
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.80		51.19		79.99

B. Full Name (Last, First, Middle Initial) <b>Brett Kittredge</b>		Transaction ID : <b>H420817.E25215</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1906 Gloria Drive			Allocated Activity or Event Year-To-Date 121783.37	
City Pearl	State MS	Zip Code 39208-	Date 08 / 10 / 2012	
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW				
Activity or Event Identifier: ADMINISTRATION B 21				
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.46		25.72		40.18

C. Full Name (Last, First, Middle Initial) <b>Wendys</b>		Transaction ID : <b>H420817.E25223</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address High Street			Allocated Activity or Event Year-To-Date 6.29	
City Jackson	State MS	Zip Code 39201-	Date 08 / 10 / 2012	
Purpose of Disbursement: -Lunch		001		
Activity or Event Identifier: ADMINISTRATION B 21		Category/ Type		
[MEMO ITEM] 001-Lunch				
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.26		4.03		6.29

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.46		25.72		40.18

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Neshoba County Fair</b> Mailing Address 16800 Hwy 21 S. City Philadelphia State MS Zip Code 39350- Purpose of Disbursement: -Fair Admission Activity or Event Identifier: <b>ADMINISTRATION B 21</b> <b>[MEMO ITEM] 001-Fair Admission</b>		<b>Transaction ID : H420817.E25222</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 30.00 Date <input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2012"/> Category/Type <input type="text" value="001"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 10.80 _____ 19.20 _____ 30.00		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Pearl River Welcoming Center</b> Mailing Address Hwy 16 City Philadelphia State MS Zip Code 39350- Purpose of Disbursement: -Refreshments Activity or Event Identifier: ADMINISTRATION B 21 <b>[MEMO ITEM] 001-Refreshments</b>		<b>Transaction ID : H420817.E25224</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 3.89 Date <input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2012"/> Category/Type <input type="text" value="001"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 1.40 _____ 2.49 _____ 3.89		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Brett Kittredge</b> Mailing Address 1906 Gloria Drive City Pearl State MS Zip Code 39208- Purpose of Disbursement: -Mileage to Neshoba/Waynesboro Activity or Event Identifier: ADMINISTRATION B 21		<b>Transaction ID : H420817.E25216</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 122086.40 Date <input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2012"/> Category/Type <input type="text" value="002"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 109.09 _____ 193.94 _____ 303.03		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 109.09		_____ 193.94		_____ 303.03

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H420817.E25217</b> Victoria Eiland		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 57 Woodlake Drive		Allocated Activity or Event Year-To-Date 122256.26	
City State Zip Code Brandon MS 39047-	Category/ Type 002	Date <input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: -Mileage to Neshoba County		Allocated Activity or Event Year-To-Date 122256.26	
Activity or Event Identifier: ADMINISTRATION B 21		Date <input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="50.35"/> + <input type="text" value="89.51"/> = <input type="text" value="139.86"/>			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H420817.E25218</b> Victoria Eiland		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 57 Woodlake Drive		Allocated Activity or Event Year-To-Date 122116.40	
City State Zip Code Brandon MS 39047-	Category/ Type	Date <input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: REIMBURSEMENT:SEE BELOW		Allocated Activity or Event Year-To-Date 122116.40	
Activity or Event Identifier: ADMINISTRATION B 21		Date <input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="10.80"/> + <input type="text" value="19.20"/> = <input type="text" value="30.00"/>			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H420817.E25220</b> Neshoba County Fair		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 16800 Hwy 21 S.		Allocated Activity or Event Year-To-Date 30.00	
City State Zip Code Philadelphia MS 39350-	Category/ Type 001	Date <input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: -Fair Admission		Allocated Activity or Event Year-To-Date 30.00	
Activity or Event Identifier: ADMINISTRATION B 21		Date <input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>	
[MEMO ITEM] 001-Fair Admission			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="10.80"/> + <input type="text" value="19.20"/> = <input type="text" value="30.00"/>			

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="61.15"/>		<input type="text" value="108.71"/>		<input type="text" value="169.86"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Mississippi Republican Party**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Wilbur Stuckey</b>		<b>Transaction ID : H420817.E25219</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 6628 Lake Glen Dr.				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Jackson State MS Zip Code 39213-				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: -Building Cleaning & Maintenance		001		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>ADMINISTRATION B 21</b>		Category/ Type		<b>Allocated Activity or Event Year-To-Date</b> 121743.19	
				Date 08 / 10 / 2012	
FEDERAL SHARE		+		NONFEDERAL SHARE	
90.00		+		160.00	
=		=		TOTAL AMOUNT	
250.00					

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Annett Bus Lines</b>		<b>Transaction ID : H420817.E25236</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 130 Madrid Drive				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Sebring State FL Zip Code 33876-				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: -Travel		001		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: ADMINISTRATION B 21		Category/ Type		<b>Allocated Activity or Event Year-To-Date</b> 139279.01	
				Date 08 / 14 / 2012	
FEDERAL SHARE		+		NONFEDERAL SHARE	
4428.00		+		7872.00	
=		=		TOTAL AMOUNT	
12300.00					

<b>C. Full Name (Last, First, Middle Initial)</b> <b>AT&amp;T</b>		<b>Transaction ID : H420817.E25237</b>		<b>Allocated Activity or Event:</b>	
Mailing Address P.O. Box 105262				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Atlanta State GA Zip Code 30348-5262				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: -Telephone		001		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: ADMINISTRATION B 21		Category/ Type		<b>Allocated Activity or Event Year-To-Date</b> 126929.01	
				Date 08 / 14 / 2012	
FEDERAL SHARE		+		NONFEDERAL SHARE	
255.17		+		453.64	
=		=		TOTAL AMOUNT	
708.81					

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4773.17		8485.64		13258.81

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H420817.E25238
Entergy
Mailing Address P. O. Box 8105
City Baton Rouge State LA Zip Code 70891-8105
Purpose of Disbursement: -Electricity
Activity or Event Identifier: ADMINISTRATION B 21
Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ]
Date 08/14/2012
FEDERAL SHARE 280.59 NONFEDERAL SHARE 498.82 TOTAL AMOUNT 779.41

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H420817.E25241
Ricoh Americas Corporation
Mailing Address P.O. Box 105533
City Atlanta State GA Zip Code 30348-5533
Purpose of Disbursement: -Copier Meter Fee
Activity or Event Identifier: ADMINISTRATION B 21
Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ]
Date 08/14/2012
FEDERAL SHARE 67.63 NONFEDERAL SHARE 120.22 TOTAL AMOUNT 187.85

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H420817.E25242
Deltacom
Mailing Address P.O. Box 2252
City Birmingham State AL Zip Code 35246-1958
Purpose of Disbursement: -Long Distance
Activity or Event Identifier: ADMINISTRATION B 21
Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ]
Date 08/14/2012
FEDERAL SHARE 73.08 NONFEDERAL SHARE 129.92 TOTAL AMOUNT 203.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 421.30, 748.96, 1170.26

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [blank], [blank], [blank]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Pennington &amp; Trim Alarm</b> Mailing Address 4374 Mangum Drive Suite C		<b>Transaction ID : H420817.E25243</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;">           _____ 123781.47         </div>	
Jackson	MS	39232-2111		Date <input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: -Building Security System		<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>			
Activity or Event Identifier: <b>ADMINISTRATION B 21</b>		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		=
<div style="border: 1px solid black; padding: 2px;">           _____ 8.86         </div>			<div style="border: 1px solid black; padding: 2px;">           _____ 15.75         </div>		<div style="border: 1px solid black; padding: 2px;">           _____ 24.61         </div>

<b>B. Full Name (Last, First, Middle Initial)</b> <b>All Metro Pest Services</b> Mailing Address 108 Office Park Dr., Ste. A		<b>Transaction ID : H420817.E25244</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;">           _____ 124048.67         </div>	
Brandon	MS	39042-		Date <input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: -Pest Control		<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>			
Activity or Event Identifier: ADMINISTRATION B 21		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		=
<div style="border: 1px solid black; padding: 2px;">           _____ 23.11         </div>			<div style="border: 1px solid black; padding: 2px;">           _____ 41.09         </div>		<div style="border: 1px solid black; padding: 2px;">           _____ 64.20         </div>

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Office Depot</b> Mailing Address Dept. 56-4600055510 P.O. Box 689020		<b>Transaction ID : H420817.E25245</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;">           _____ 123310.58         </div>	
Des Moines	IA	50368-9020		Date <input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: -Office Supplies		<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>			
Activity or Event Identifier: ADMINISTRATION B 21		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		=
<div style="border: 1px solid black; padding: 2px;">           _____ 46.63         </div>			<div style="border: 1px solid black; padding: 2px;">           _____ 82.90         </div>		<div style="border: 1px solid black; padding: 2px;">           _____ 129.53         </div>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">           _____ 78.60         </div>		<div style="border: 1px solid black; padding: 2px;">           _____ 139.74         </div>		<div style="border: 1px solid black; padding: 2px;">           _____ 218.34         </div>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">           _____         </div>	<div style="border: 1px solid black; padding: 2px;">           _____         </div>	<div style="border: 1px solid black; padding: 2px;">           _____         </div>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Form A: Allied Waste Service. Transaction ID: H420817.E25246. Mailing Address: Jackson, 1035 Old Brandon Road. City: Flowood, State: MS, Zip Code: 39232. Purpose: -Garbage Pickup. Activity: ADMINISTRATION B 21. Allocated Activity or Event: Administrative. Year-To-Date: 124696.15. Date: 08/14/2012. Summary: FEDERAL SHARE 69.29, NONFEDERAL SHARE 123.19, TOTAL AMOUNT 192.48.

Form B: Federal Express. Transaction ID: H420817.E25248. Mailing Address: P. O. Box 660481. City: Dallas, State: TX, Zip Code: 75266-0481. Purpose: -Postage/Shipping. Activity: ADMINISTRATION B 21. Allocated Activity or Event: Administrative. Year-To-Date: 123181.05. Date: 08/14/2012. Summary: FEDERAL SHARE 52.34, NONFEDERAL SHARE 93.04, TOTAL AMOUNT 145.38.

Form C: Mailroom Consultants. Transaction ID: H420817.E25249. Mailing Address: 6050 Channel 16 Way. City: Jackson, State: MS, Zip Code: 39209. Purpose: -Mail Machine. Activity: ADMINISTRATION B 21. Allocated Activity or Event: Administrative. Year-To-Date: 124418.67. Date: 08/14/2012. Summary: FEDERAL SHARE 129.35, NONFEDERAL SHARE 229.95, TOTAL AMOUNT 359.30.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 250.98, 446.18, 697.16.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.



**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Mississippi Republican Party**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>CSpire</b>		<b>Transaction ID : H420817.E25253</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 519			Allocated Activity or Event Year-To-Date 123756.86	
City Meadville	State MS	Zip Code 39653-0519	Date 08 / 14 / 2012	
Purpose of Disbursement: -Cell Phone		001		
Activity or Event Identifier: <b>ADMINISTRATION B 21</b>		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
160.66			285.62	
		=	TOTAL AMOUNT	
			446.28	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>FIA Business Card Services</b>		<b>Transaction ID : H420909.E25309</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 15710			Allocated Activity or Event Year-To-Date 125261.78	
City Wilmington	State DE	Zip Code 19886-5710	Date 08 / 14 / 2012	
Purpose of Disbursement: CREDIT CARD: SEE BELOW				
Activity or Event Identifier: ADMINISTRATION B 21				
FEDERAL SHARE		+	NONFEDERAL SHARE	
203.63			362.00	
		=	TOTAL AMOUNT	
			565.63	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Clarion-Ledger</b>		<b>Transaction ID : H420909.E25387</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 23067			Allocated Activity or Event Year-To-Date 16.50	
City Jackson	State MS	Zip Code 39225-3067	Date 08 / 14 / 2012	
Purpose of Disbursement: -Newspaper Subscription		001		
Activity or Event Identifier: ADMINISTRATION B 21		Category/ Type		
[MEMO ITEM] 001-Newspaper Subscription				
FEDERAL SHARE		+	NONFEDERAL SHARE	
5.94			10.56	
		=	TOTAL AMOUNT	
			16.50	

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
364.29		647.62		1011.91

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Mississippi Republican Party**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>McDades</b>		<b>Transaction ID : H420909.E25389</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 904A East Fortification			Allocated Activity or Event Year-To-Date 107.81	
City Jackson	State MS	Zip Code 39211-	Date 08 / 14 / 2012	
Purpose of Disbursement: -Meeting Supplies		001		
Activity or Event Identifier: <b>ADMINISTRATION B 21</b>		Category/ Type		
[MEMO ITEM] 001-Meeting Supplies				
FEDERAL SHARE		+	NONFEDERAL SHARE	
=		TOTAL AMOUNT		
38.81		69.00		107.81

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Two Sisters Restaurant</b>		<b>Transaction ID : H420909.E25390</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 707 N. Congress			Allocated Activity or Event Year-To-Date 28.00	
City Jackson	State MS	Zip Code 39202-	Date 08 / 14 / 2012	
Purpose of Disbursement: -Luncheon		001		
Activity or Event Identifier: ADMINISTRATION B 21		Category/ Type		
[MEMO ITEM] 001-Luncheon				
FEDERAL SHARE		+	NONFEDERAL SHARE	
=		TOTAL AMOUNT		
10.08		17.92		28.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>McDonalds of Winona #15364</b>		<b>Transaction ID : H420909.E25379</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 4467			Allocated Activity or Event Year-To-Date 14.71	
City Greenville	State MS	Zip Code 38701-	Date 08 / 14 / 2012	
Purpose of Disbursement: -Luncheon		001		
Activity or Event Identifier: ADMINISTRATION B 21		Category/ Type		
[MEMO ITEM] 001-Luncheon				
FEDERAL SHARE		+	NONFEDERAL SHARE	
=		TOTAL AMOUNT		
5.30		9.41		14.71

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> <b>1 &amp; 1 Internet, Inc.</b> Mailing Address 701 Lee Road, Suite 300 City State Zip Code Wayne PA 19087-		<b>Transaction ID : H420909.E25378</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
Purpose of Disbursement: -Web Support Service Activity or Event Identifier: <b>ADMINISTRATION B 21</b> <b>[MEMO ITEM] 001-Web Support Service</b>		Allocated Activity or Event Year-To-Date _____ 38.97 Date <input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 14.03 + _____ 24.94 = _____ 38.97		Category/Type <input type="text" value="001"/>

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Loves Country Store</b> Mailing Address Hwy 16 City State Zip Code Canton MS 39046-		<b>Transaction ID : H420909.E25380</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
Purpose of Disbursement: -Refreshments Activity or Event Identifier: <b>ADMINISTRATION B 21</b> <b>[MEMO ITEM] 001-Refreshments</b>		Allocated Activity or Event Year-To-Date _____ 1.33 Date <input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 0.48 + _____ 0.85 = _____ 1.33		Category/Type <input type="text" value="001"/>

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Skype Technologies</b> Mailing Address 23-29 Rives de Clausen L-2165 City State Zip Code		<b>Transaction ID : H420909.E25385</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
Purpose of Disbursement: -Phone Activity or Event Identifier: <b>ADMINISTRATION B 21</b> <b>[MEMO ITEM] 001-Phone</b>		Allocated Activity or Event Year-To-Date _____ 3.08 Date <input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 1.11 + _____ 1.97 = _____ 3.08		Category/Type <input type="text" value="001"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 0.00		_____ 0.00		_____ 0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Sherweb</b> Mailing Address 740 Rue Galt Ouest Sherbrooke, QC J1H 1Z3, Canada City State Zip Code		<b>Transaction ID : H420909.E25384</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
Purpose of Disbursement: -Website Hosting	<input type="text" value="001"/> Category/ Type	Allocated Activity or Event Year-To-Date <input type="text" value="101.23"/> Date <input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
Activity or Event Identifier: <b>ADMINISTRATION B 21</b> <b>[MEMO ITEM] 001-Website Hosting</b>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		
<input type="text" value="36.44"/> + <input type="text" value="64.79"/> = <input type="text" value="101.23"/>		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Courtyard by Marriott Gulfport</b> Mailing Address 1600 East Beach Blvd. City State Zip Code Gulfport MS 39501-		<b>Transaction ID : H420909.E25377</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
Purpose of Disbursement: -Lodging	<input type="text" value="002"/> Category/ Type	Allocated Activity or Event Year-To-Date <input type="text" value="91.84"/> Date <input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
Activity or Event Identifier: ADMINISTRATION B 21 <b>[MEMO ITEM] 002-Lodging</b>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		
<input type="text" value="33.06"/> + <input type="text" value="58.78"/> = <input type="text" value="91.84"/>		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Carry On</b> Mailing Address 665 E. Commerce St. City State Zip Code Hernando MS 38632-		<b>Transaction ID : H420909.E25381</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
Purpose of Disbursement: -Refreshments	<input type="text" value="001"/> Category/ Type	Allocated Activity or Event Year-To-Date <input type="text" value="4.68"/> Date <input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
Activity or Event Identifier: ADMINISTRATION B 21 <b>[MEMO ITEM] 001-Refreshments</b>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		
<input type="text" value="1.68"/> + <input type="text" value="3.00"/> = <input type="text" value="4.68"/>		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Windy City Grille</b> Mailing Address 330 West Commerce St. City: Hernando State: MS Zip Code: 38632-		<b>Transaction ID : H420909.E25382</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
Purpose of Disbursement: -Luncheon Activity or Event Identifier: <b>ADMINISTRATION B 21</b> <b>[MEMO ITEM] 001-Luncheon</b>		Allocated Activity or Event Year-To-Date 80.60 Date: 08 / 14 / 2012
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 29.02 + 51.58 = 80.60		Category/Type: 001

<b>B. Full Name (Last, First, Middle Initial)</b> <b>FIA Business Card Services</b> Mailing Address P.O. Box 15710 City: Wilmington State: DE Zip Code: 19886-5710		<b>Transaction ID : H420909.E25310</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
Purpose of Disbursement: CREDIT CARD: SEE BELOW Activity or Event Identifier: ADMINISTRATION B 21		Allocated Activity or Event Year-To-Date 126032.35 Date: 08 / 14 / 2012
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 277.41 + 493.16 = 770.57		Category/Type:

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Dominos</b> Mailing Address 1220 North Street City: Jackson State: MS Zip Code: 39202-		<b>Transaction ID : H420909.E25374</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
Purpose of Disbursement: -Luncheon Activity or Event Identifier: ADMINISTRATION B 21 <b>[MEMO ITEM] 001-Luncheon</b>		Allocated Activity or Event Year-To-Date 16.16 Date: 08 / 14 / 2012
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 5.82 + 10.34 = 16.16		Category/Type: 001

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.41		493.16		770.57

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Mississippi Republican Party**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>McAlisters Deli</b>		<b>Transaction ID : H420909.E25375</b>	<b>Allocated Activity or Event:</b>	
Mailing Address 1240 E. Northside Drive			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Jackson State MS Zip Code 39211-			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: -Luncheon		001	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>ADMINISTRATION B 21</b>		Category/ Type	<b>Allocated Activity or Event Year-To-Date</b>	
[MEMO ITEM] 001-Luncheon			34.87	
			Date 08 / 14 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	
12.55			22.32	
		=	TOTAL AMOUNT	
34.87				

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Delta Airlines</b>		<b>Transaction ID : H420909.E25371</b>	<b>Allocated Activity or Event:</b>	
Mailing Address Jackson Airport			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Pearl State MS Zip Code 39208-			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: -Airline Travel		002	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>ADMINISTRATION B 21</b>		Category/ Type	<b>Allocated Activity or Event Year-To-Date</b>	
[MEMO ITEM] 002-Airline Travel			21.79	
			Date 08 / 14 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	
7.84			13.95	
		=	TOTAL AMOUNT	
21.79				

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Delta Airlines</b>		<b>Transaction ID : H420909.E25370</b>	<b>Allocated Activity or Event:</b>	
Mailing Address Jackson Airport			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Pearl State MS Zip Code 39208-			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: -Airline Ticket		002	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>ADMINISTRATION B 21</b>		Category/ Type	<b>Allocated Activity or Event Year-To-Date</b>	
[MEMO ITEM] 002-Airline Ticket			335.20	
			Date 08 / 14 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	
120.67			214.53	
		=	TOTAL AMOUNT	
335.20				

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
0.00	0.00	0.00

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H420909.E25372</b> <b>Ace Hardware</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Northside Drive		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">10.65</div>	
City State Zip Code Jackson MS 39211-	001 Category/ Type	Date <span style="border: 1px solid black; padding: 2px;">08</span> / <span style="border: 1px solid black; padding: 2px;">14</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>	
Purpose of Disbursement: -Keys		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">10.65</div>	
Activity or Event Identifier: <b>ADMINISTRATION B 21</b> [MEMO ITEM] 001-Keys			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
3.83		6.82	10.65

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H420909.E25376</b> <b>CVS Pharmacy</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 914 North State Street		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">40.06</div>	
City State Zip Code Jackson MS 39201-	001 Category/ Type	Date <span style="border: 1px solid black; padding: 2px;">08</span> / <span style="border: 1px solid black; padding: 2px;">14</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>	
Purpose of Disbursement: -Office Supplies		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">40.06</div>	
Activity or Event Identifier: ADMINISTRATION B 21 [MEMO ITEM] 001-Office Supplies			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
14.42		25.64	40.06

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H420909.E25373</b> <b>Nicks Restaurant</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1501 Lakeland Drive		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">184.51</div>	
City State Zip Code Jackson MS 39216-	001 Category/ Type	Date <span style="border: 1px solid black; padding: 2px;">08</span> / <span style="border: 1px solid black; padding: 2px;">14</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>	
Purpose of Disbursement: -Dinner		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">184.51</div>	
Activity or Event Identifier: ADMINISTRATION B 21 [MEMO ITEM] 001-Dinner			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
66.42		118.09	184.51

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Silver Star</b> Mailing Address Hwy 16 W City Philadelphia State MS Zip Code 39350-		<b>Transaction ID : H420909.E25369</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
Purpose of Disbursement: -Lodging Activity or Event Identifier: <b>ADMINISTRATION B 21</b> [MEMO ITEM] 002-Lodging		Allocated Activity or Event Year-To-Date _____ 127.33 Date <input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2012"/> Category/Type <input type="text" value="002"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 45.84 + _____ 81.49 = _____ 127.33		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Frontier Strategies, LLC</b> Mailing Address P.O. Box 13292 City Jackson State MS Zip Code 39236-3292		<b>Transaction ID : H420817.E25239</b> Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
Purpose of Disbursement: -Direct Mail Production Activity or Event Identifier: 2012 FUNDRAISING DIRECT MAIL		Allocated Activity or Event Year-To-Date _____ 9837.51 Date <input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2012"/> Category/Type <input type="text" value="003"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 2738.40 + _____ 114.10 = _____ 2852.50		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Hederman Brothers</b> Mailing Address P. O. Box 6100 City Ridgeland State MS Zip Code 39158-		<b>Transaction ID : H420817.E25240</b> Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
Purpose of Disbursement: -Direct Mail Printing Activity or Event Identifier: 2012 FUNDRAISING DIRECT MAIL		Allocated Activity or Event Year-To-Date _____ 9837.51 Date <input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2012"/> Category/Type <input type="text" value="003"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 5141.14 + _____ 214.21 = _____ 5355.35		

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 7879.54		_____ 328.31		_____ 8207.85

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____ 14456.90	_____ 12021.38	_____ 26478.28