

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Mississippi Republican Party

ADDRESS (number and street) P. O. Box 60  
 Check if different than previously reported. (ACC)  
Jackson MS 39205

2. **FEC IDENTIFICATION NUMBER** C00084368  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 11 01 2009 through 11 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Arnie Hederman

Signature of Treasurer Electronically Filed by Arnie Hederman Date 12 19 2009

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

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

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Mississippi Republican Party

Report Covering the Period: From: 

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		46505.59
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	30617.24									
(c) Total Receipts (from Line 19) .....	27547.69	526791.22								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	58164.93	573296.81								
7. Total Disbursements (from Line 31) .....	29295.66	544427.54								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	28869.27	28869.27								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Mississippi Republican Party

Report Covering the Period: From: 

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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) .....	4775.00	245028.50
(ii) Unitemized .....	14772.50	181996.94
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	19547.50	427025.44
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	6000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	19547.50	433025.44
12. Transfers From Affiliated/Other Party Committees .....	0.00	65000.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	763.69
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.19	2.09
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	8000.00	28000.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	8000.00	28000.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	27547.69	526791.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	19547.69	498791.22

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	1855.45	120612.31
(ii) Non-Federal Share.....	<b>10514.22</b>	<b>156343.37</b>
(b) Other Federal Operating Expenditures.....	<b>5303.20</b>	<b>106272.35</b>
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	17672.87	383228.03
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	<b>0.00</b>	<b>0.00</b>
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	<b>0.00</b>	<b>0.00</b>
26. Loan Repayments Made.....	<b>0.00</b>	<b>0.00</b>
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	370.00
(b) Political Party Committees	<b>0.00</b>	<b>0.00</b>
(c) Other Political Committees (such as PACs) .....	<b>0.00</b>	<b>0.00</b>
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	<b>0.00</b>	<b>370.00</b>
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	11622.79	160829.51
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	11622.79	160829.51
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	29295.66	544427.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18781.44	388084.17

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	19547.50	433025.44
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	370.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19547.50	432655.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7158.65	226884.66
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	763.69
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7158.65	226120.97

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 90  
(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.** Full Name (Last, First, Middle Initial)  
James Perry

Mailing Address 1218 Rosehill Circle

City State Zip Code  
Jackson MS 39202-2123

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

Name of Employer Self Occupation  
Manufacturer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1220.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2009

Transaction ID: 91117.C212027

Amount of Each Receipt this Period  
20.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Hayes Dent

Mailing Address P. O. Box 55949

City State Zip Code  
Jackson MS 39296

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

Name of Employer MS Development Authority Occupation  
Executive Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2009

Transaction ID: 91117.C212028

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address 599 Suebe Street

City State Zip Code  
Bay Saint Louis MS 39520-2426

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 ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2009

Transaction ID: 91117.C212029

Amount of Each Receipt this Period  
20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 60.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Kelly Segars	Date of Receipt MM / DD / YYYY 11 / 09 / 2009
	Mailing Address 52 County Road 150	<b>Transaction ID:</b> 91117.C212599
	City State Zip Code Iuka MS 38852	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Dr. Segars Clinic, PA Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6800.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Raymond Davis	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 511 Bay Street	<b>Transaction ID:</b> 91117.C212033
	City State Zip Code Brookhaven MS 39601-4037	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation N/A Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Sally Brown	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 3111 W. Lake Drive	<b>Transaction ID:</b> 91117.C212034
	City State Zip Code Meridian MS 39307-4144	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation N/A Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<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 8 / 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

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

Mailing Address 623 CR 105

City Holcomb State MS Zip Code 38940-9410

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 ▼ 210.00

Date of Receipt 11 / 05 / 2009

Transaction ID: 91117.C212035

Amount of Each Receipt this Period 20.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Maud Stringer

Mailing Address 1807 Ridgeover Place

City Jackson State MS Zip Code 39211-6502

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 ▼ 275.00

Date of Receipt 11 / 10 / 2009

Transaction ID: 91117.C212693

Amount of Each Receipt this Period 50.00

Receipt

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

Mailing Address 2152 S. Cla-Wood Place

City Tupelo State MS Zip Code 38801-7261

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

Name of Employer Tupelo Anesthesia Group Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 05 / 2009

Transaction ID: 91117.C212036

Amount of Each Receipt this Period 20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

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

Mailing Address 200 E. Capitol Street, #1601

City Jackson State MS Zip Code 39201

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 ▼ 5510.00

Date of Receipt 11 / 05 / 2009

Transaction ID: 91117.C212037

Amount of Each Receipt this Period 50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Murphy Adkins

Mailing Address P. O. Box 700

City Brandon State MS Zip Code 39043-0700

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

Name of Employer Rankin County Occupation Chancery Clerk

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 05 / 2009

Transaction ID: 91117.C212038

Amount of Each Receipt this Period 20.00

Receipt

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

Mailing Address 21027 Hwy 14

City Macon State MS Zip Code 39341-9533

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

Name of Employer Self Employed Occupation Bookkeeper

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt 11 / 05 / 2009

Transaction ID: 91117.C212042

Amount of Each Receipt this Period 15.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 85.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Haley Barbour		Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 648 Dogwood Drive		Transaction ID: 91117.C212047
	City Yazoo City	State MS	Zip Code 39194
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer State Of Mississippi	Occupation Governor	Receipt

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00
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<b>B.</b>	Full Name (Last, First, Middle Initial) Homer Best, Jr.		Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 2431 Lake Circle		Transaction ID: 91117.C212056
	City Jackson	State MS	Zip Code 39211-6622
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Self	Occupation Oil & Gas	Receipt

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00
---	------------------------------------

<b>C.</b>	Full Name (Last, First, Middle Initial) Edwin Brent		Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address PO Box 8		Transaction ID: 91117.C212063
	City Greenville	State MS	Zip Code 38702
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer N/A	Occupation Retired	Receipt

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	70.00
<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 11 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Sue Bush	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 807 Sioux Lane	<b>Transaction ID:</b> 91117.C212065
	City State Zip Code Hattiesburg MS 39402-2459	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Forrest Co.	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) S. F. Carlisle	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 100 Summer Place	<b>Transaction ID:</b> 91117.C212066
	City State Zip Code Hattiesburg MS 39402	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer State Farm Ins.	Occupation Agency Mgr.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Cecil Cartwright	Date of Receipt MM / DD / YYYY 11 / 04 / 2009
	Mailing Address P. O. Box 227	<b>Transaction ID:</b> 91117.C212536
	City State Zip Code Yazoo City MS 39194-0227	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	55.00
<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 12 / 90
<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Cecil Cartwright		Date of Receipt
	Mailing Address P. O. Box 227		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Yazoo City	MS	39194-0227
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer N/A		Occupation Retired	Transaction ID: 91117.C212068
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="25.00"/>
Receipt			

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard Clark, Jr.		Date of Receipt
	Mailing Address #3 Cherokee Circle		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Hattiesburg	MS	39401
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer N/A		Occupation Retired	Transaction ID: 91117.C212072
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="410.00"/>	<input type="text" value="10.00"/>
Receipt			

<b>C.</b>	Full Name (Last, First, Middle Initial) Thad Cochran		Date of Receipt
	Mailing Address 113 Dirkson Senate Office		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20510
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer United States Senate		Occupation U. S. Senator	Transaction ID: 91117.C212075
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="275.00"/>	<input type="text" value="25.00"/>
Receipt			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="60.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 90
	<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	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Harry Collins	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address P. O. Box 215	Transaction ID: 91117.C212076
	City State Zip Code Scott MS 38772	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Delta & Pine Land Company	Occupation V.P. Operation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Sandra Cooper	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 20 Cla Wood Place	Transaction ID: 91117.C212077
	City State Zip Code Tupelo MS 38801-7209	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Dist 4 Lee Co.	Occupation Election Comm.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Karl Cornwell	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 4644 East Drive	Transaction ID: 91117.C212078
	City State Zip Code Belden MS 38826-9516	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	65.00
<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 14 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Irvin Cronin		Date of Receipt
	Mailing Address 1609 Linda Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Clinton	MS	39056
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 91117.C212080
Name of Employer Self		Occupation Physician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 10.00
		<input type="text"/> 510.00	Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) John Dean, Jr.		Date of Receipt
	Mailing Address P. O. Drawer 272		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Leland	MS	38756
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 91117.C212084
Name of Employer Self		Occupation Realtor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 10.00
		<input type="text"/> 610.00	Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) Nell Frisbie		Date of Receipt
	Mailing Address P. O. Box 879		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Kiln	MS	39556-0879
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 91117.C212096
Name of Employer Self		Occupation Real Estate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 15.00
		<input type="text"/> 1165.00	Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 35.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 15 / 90  
(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

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

Mailing Address 116 Green Drive

City State Zip Code  
Jackson MS 39211

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

Name of Employer Occupation  
Morgan Keegan And Co Managing Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2009

**Transaction ID:** 91117.C212100

Amount of Each Receipt this Period  
10.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Frank Genzer

Mailing Address 145 Saint Jude Street

City State Zip Code  
Biloxi MS 39530-3602

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

Name of Employer Occupation  
Self Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2009

**Transaction ID:** 91117.C212101

Amount of Each Receipt this Period  
25.00

Receipt

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

Mailing Address P. O. Box 588

City State Zip Code  
Pontotoc MS 38863-0588

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

Name of Employer Occupation  
Pontotoc Ins. Agency Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2009

**Transaction ID:** 91117.C212107

Amount of Each Receipt this Period  
20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 55.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Bill Gresham, III	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address P. O. Box 690	Transaction ID: 91117.C212108
	City State Zip Code Indianola MS 38751-0690	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Gresham Petro, Co. Oil Merchant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas Gresham	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 105 E. Gresham Street	Transaction ID: 91117.C212109
	City State Zip Code Indianola MS 38751-2422	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Double Quick, Inc. Retailer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Lanny Griffith, Jr.	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 625 Oakland Terrace	Transaction ID: 91117.C212110
	City State Zip Code Alexandria VA 22302	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Barbour, Griffith & Rogers Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	55.00
<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 17 / 90  
(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.** Full Name (Last, First, Middle Initial)  
Jerry Gullede

Mailing Address 104 Dampeer Street

City State Zip Code  
Crystal Springs MS 39059-2561

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

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212111  
Amount of Each Receipt this Period 40.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
T. S Hayes, Jr.

Mailing Address Route 2, Box 45

City State Zip Code  
Clarksdale MS 38614

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

Name of Employer Ellendale Planting Occupation Farming/owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212115  
Amount of Each Receipt this Period 10.00  
Receipt

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

Mailing Address 321 Avalon Way

City State Zip Code  
Brandon MS 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 ▼ 265.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212119  
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: PAGE 18 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
William Hill

Mailing Address 2627 Hwy 15 S

City State Zip Code  
Woodland MS 39776

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 11 / 05 / 2009  
Transaction ID: 91117.C212121  
Amount of Each Receipt this Period 20.00  
Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Alben Hopkins

Mailing Address 2701 - 24th Avenue

City State Zip Code  
Gulfport MS 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 ▼ 1110.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212126  
Amount of Each Receipt this Period 10.00  
Receipt

**C.**

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

Mailing Address 119 Faith Drive

City State Zip Code  
Batesville MS 38606

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212130  
Amount of Each Receipt this Period 20.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 50.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Dewey Lane

Mailing Address P. O. Box 1245

City State Zip Code  
Pascagoula MS 39568-1245

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212137  
Amount of Each Receipt this Period 25.00  
Receipt

**B.**

Full Name (Last, First, Middle Initial)  
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 N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212141  
Amount of Each Receipt this Period 25.00  
Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Rita Martinson

Mailing Address 1472 Highway 51

City State Zip Code  
Madison MS 39110-9095

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

Name of Employer State Of Miss. Occupation State Rep.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212149  
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: PAGE 20 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Falton Mason, Jr.

Mailing Address P. O. Box 1491

City State Zip Code  
Oxford MS 38655-1491

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

Name of Employer Occupation  
Oxford Municipal Chair

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2009

Transaction ID: 91117.C212150

Amount of Each Receipt this Period  
20.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Mac McCarty

Mailing Address P. O. Box 1363

City State Zip Code  
Columbus MS 39703-1363

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

Name of Employer Occupation  
Self-employed Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2009

Transaction ID: 91117.C212152

Amount of Each Receipt this Period  
25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Mac McCarty

Mailing Address P. O. Box 1363

City State Zip Code  
Columbus MS 39703-1363

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

Name of Employer Occupation  
Self-employed Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
11 / 09 / 2009

Transaction ID: 91117.C212613

Amount of Each Receipt this Period  
40.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **85.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) H. T. Miller, III	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 291 W. Park Avenue	Transaction ID: 91117.C212157
	City State Zip Code Drew MS 38737-3344	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Self Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James Moreton	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address P. O. Box 537	Transaction ID: 91117.C212165
	City State Zip Code Brookhaven MS 39601-0537	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) James Moye	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 17 Glenwood Drive	Transaction ID: 91117.C212167
	City State Zip Code Laurel MS 39440	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	95.00
<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 22 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) John Palmer		Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address P. O. Box 3747		Transaction ID: 91117.C212172
	City Jackson	State MS	Zip Code 39207-3747
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
	Name of Employer Gulf South Capital	Occupation Executive	Receipt

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6110.00
---	-------------------------------------

<b>B.</b>	Full Name (Last, First, Middle Initial) C. Ray Phillips		Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 372 Sundial Road		Transaction ID: 91117.C212177
	City Madison	State MS	Zip Code 39110-8772
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer Self	Occupation Investments	Receipt

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00
---	------------------------------------

<b>C.</b>	Full Name (Last, First, Middle Initial) John Phillips, III		Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 4042 Highway 16 W		Transaction ID: 91117.C212178
	City Yazoo City	State MS	Zip Code 39194-9243
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
	Name of Employer Phillips Planting Co.	Occupation Farmer	Receipt

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00
---	------------------------------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	45.00
<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 23 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Rubel Phillips	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 258 Braeburn	<b>Transaction ID:</b> 91117.C212179
	City State Zip Code Jackson MS 39211	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) George Pickett, Jr.	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address P. O. Box 137	<b>Transaction ID:</b> 91117.C212180
	City State Zip Code Jackson MS 39205-0137	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Pickett, Bradford & Associates Occupation Insurance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) J. W. Pressler	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 807 Hickory Avenue	<b>Transaction ID:</b> 91117.C212182
	City State Zip Code Mc Comb MS 39648-2213	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Self Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00	

<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: PAGE 24 / 90  
(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.** Full Name (Last, First, Middle Initial)  
Clarke Reed

Mailing Address 139 Bayou Road

City Greenville State MS Zip Code 38701-7702

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

Name of Employer Self Employed Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5165.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212185  
Amount of Each Receipt this Period 15.00  
Receipt

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

Mailing Address P. O. Box 4457

City Greenville State MS Zip Code 38704-4457

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

Name of Employer U. S. Government Occupation Ambassador

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5490.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212186  
Amount of Each Receipt this Period 10.00  
Receipt

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

Mailing Address P. O. Box 605

City Magee State MS Zip Code 39111-0605

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 ▼ 275.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212188  
Amount of Each Receipt this Period 25.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 50.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Harry Sasser, Jr.		Date of Receipt
	Mailing Address P. O. Box 437		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Carthage	MS	39051-0437
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer The Heritage Bank		Occupation Chairman Of The Bd.	Transaction ID: 91117.C212201
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="20.00"/>
		<input type="text" value="220.00"/>	Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Jane Sides		Date of Receipt
	Mailing Address P. O. Box 37		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Dundee	MS	38626-0037
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer N/A		Occupation Retired	Transaction ID: 91117.C212207
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="20.00"/>
		<input type="text" value="210.00"/>	Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) Lloyd Spivey, Jr.		Date of Receipt
	Mailing Address 357 E. North Street		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Canton	MS	39046-3813
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self Employed		Occupation Attorney	Transaction ID: 91117.C212213
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="15.00"/>
		<input type="text" value="365.00"/>	Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="55.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Howard Stover	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 6 Water Stone Place	Transaction ID: 91117.C212215
	City State Zip Code Jackson MS 39211-5987	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Self Occupation Oil & Gas Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 460.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas Turner	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 1 Cypress Ln	Transaction ID: 91117.C212224
	City State Zip Code Jackson MS 39211	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 410.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Wallace	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 318 Hillview Drive	Transaction ID: 91117.C212228
	City State Zip Code Ridgeland MS 39157	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Wise, Carter Etc. Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	40.00
<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 27 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Bill Williamson		Date of Receipt
	Mailing Address 7676 Highway 50 E		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Columbus	MS	39702-9585
	FEC ID number of contributing federal political committee.		Transaction ID: 91117.C212242
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
		<input type="text" value="210.00"/>	Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Wirt Yerger, Jr.		Date of Receipt
	Mailing Address 129 Woodland Circle		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Jackson	MS	39216
	FEC ID number of contributing federal political committee.		Transaction ID: 91117.C212244
Name of Employer Self Employed		Occupation Insurance Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="25.00"/>
		<input type="text" value="275.00"/>	Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) Pat Newton		Date of Receipt
	Mailing Address 78 CR 130		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Burnsville	MS	38833-9521
	FEC ID number of contributing federal political committee.		Transaction ID: 91117.C212246
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
		<input type="text" value="210.00"/>	Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="55.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 28 / 90  
(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.** Full Name (Last, First, Middle Initial)  
Del Stover

Mailing Address 3900 Highway 178 W.

City State Zip Code  
Holly Springs MS 38635

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212249  
Amount of Each Receipt this Period 20.00  
Receipt

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

Mailing Address 3109 Circle Hill Road

City State Zip Code  
Alexandria VA 22305-1607

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

Name of Employer Miss State Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212250  
Amount of Each Receipt this Period 25.00  
Receipt

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

Mailing Address P. O. Box 16667

City State Zip Code  
Jackson MS 39236-6667

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

Name of Employer Self Occupation Oil & Gas

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1720.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212252  
Amount of Each Receipt this Period 30.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 75.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 90  
(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.** Full Name (Last, First, Middle Initial)  
Helen Beeman  
Mailing Address 115 Pecan Circle  
City State Zip Code  
Quitman MS 39355-2653  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Quitman Schools Teacher  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 420.00  
Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212256  
Amount of Each Receipt this Period 20.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
James Herring  
Mailing Address 232 E. Semmes Street  
City State Zip Code  
Canton MS 39046-4530  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Herring Long and Crews Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1110.00  
Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212259  
Amount of Each Receipt this Period 10.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Mark Garriga  
Mailing Address 121 Golden Pond Drive  
City State Zip Code  
Madison MS 39110  
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 ▼ 220.00  
Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212267  
Amount of Each Receipt this Period 20.00  
Receipt

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

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

Mailing Address 903 Robert E. Lee Drive

City Greenwood State MS Zip Code 38930-2434

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212269  
Amount of Each Receipt this Period 25.00  
Receipt

**B.**

Full Name (Last, First, Middle Initial)  
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 ▼ 360.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212270  
Amount of Each Receipt this Period 15.00  
Receipt

**C.**

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

Mailing Address P. O. Box 384

City Hernando State MS Zip Code 38632-0384

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

Name of Employer Self Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212276  
Amount of Each Receipt this Period 35.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Hoopy Stringer, Jr.	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 104 Boxwood Cove	<b>Transaction ID:</b> 91117.C212279
	City State Zip Code Brandon MS 39042	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer SkyTel Occupation Project Supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Frank Cannon	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 528 Mockingbird Drive	<b>Transaction ID:</b> 91117.C212280
	City State Zip Code Long Beach MS 39560-3118	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 470.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Frank Baird, Jr.	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 122 Bayou Road	<b>Transaction ID:</b> 91117.C212282
	City State Zip Code Greenville MS 38701-8573	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Baird And Company Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	90.00
<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 32 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) C. T. Carley	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 213 Windsor Road	<b>Transaction ID:</b> 91117.C212284
	City State Zip Code Starkville MS 39759-2137	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Margaret Hall	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 109 Glen Eagle Road	<b>Transaction ID:</b> 91117.C212285
	City State Zip Code Oxford MS 38655-2611	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Radiance Technology	Occupation Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) William D. Dennis	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address P. O. Box 6181	<b>Transaction ID:</b> 91117.C212292
	City State Zip Code Gulfport MS 39506-6181	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Specialty Contractors	Occupation Contractor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<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 33 / 90

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Michael Janus

Mailing Address P. O. Box 4147

City State Zip Code  
Biloxi MS 39531-2316

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

Transaction ID: 91117.C212294

Amount of Each Receipt this Period

20.00

Receipt

**B.**

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

Mailing Address 1300 Connecticut Avenue, NW, #600

City State Zip Code  
Washington DC 20036

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

Name of Employer Griffin, Johnson, Dover Occupation Public Affairs

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

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

Transaction ID: 91117.C212296

Amount of Each Receipt this Period

20.00

Receipt

**C.**

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

Mailing Address 404 Cherokee Drive

City State Zip Code  
Booneville MS 38829

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

Name of Employer Wbip Radio Station Occupation Broadcaster

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

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

Transaction ID: 91117.C212303

Amount of Each Receipt this Period

20.00

Receipt

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

60.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 90  
(check only one)

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

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.**

Full Name (Last, First, Middle Initial)  
John Perkins

Mailing Address 401 S Jackson Street

City State Zip Code  
Brookhaven MS 39601

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: 11 / 05 / 2009  
Transaction ID: 91117.C212304  
Amount of Each Receipt this Period: 25.00  
Receipt

**B.**

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

Mailing Address 253 Ridge Drive

City State Zip Code  
Jackson MS 39216

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

Name of Employer Self Employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 11 / 05 / 2009  
Transaction ID: 91117.C212311  
Amount of Each Receipt this Period: 20.00  
Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Ellen Jernigan

Mailing Address 1610 Mt. Pleasant Road

City State Zip Code  
Hernando MS 38632

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

Name of Employer Hernando Occupation Alderman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 11 / 05 / 2009  
Transaction ID: 91117.C212313  
Amount of Each Receipt this Period: 20.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 65.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 90  
(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.** Full Name (Last, First, Middle Initial)  
Walley Naylor

Mailing Address 206 Breezy Hill Drive

City State Zip Code  
Madison MS 39110

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

Name of Employer State Of Miss. Occupation Dept. of Human Services

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212321  
Amount of Each Receipt this Period 20.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Ruby Ainsworth

Mailing Address 728 Old Pinola-Braxton Road

City State Zip Code  
Braxton MS 39044

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 ▼ 210.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212323  
Amount of Each Receipt this Period 10.00  
Receipt

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

Mailing Address 530 School St.

City State Zip Code  
Clarksdale MS 38614

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212328  
Amount of Each Receipt this Period 20.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 50.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) John Taylor	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 104 Hidden Heights	<b>Transaction ID:</b> 91117.C212333
	City State Zip Code Ridgeland MS 39157	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
	Name of Employer Occupation JOAMCA Chemical Products Manufacturer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Stewart Welch	Date of Receipt MM / DD / YYYY 11 / 25 / 2009
	Mailing Address 4730 W. Cheryl Drive	<b>Transaction ID:</b> 91215.C213370
	City State Zip Code Jackson MS 39211-5812	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
	Name of Employer Occupation Browning & Welch Inc Geologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) William Sones	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address P.O. Box 889	<b>Transaction ID:</b> 91117.C212335
	City State Zip Code Brookhaven MS 39602	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
	Name of Employer Occupation State Bank & Trust Co. President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>175.00</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 37 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Phil Morris	Date of Receipt MM / DD / YYYY 11 / 17 / 2009
	Mailing Address 600 Pinecrest Cove	<b>Transaction ID:</b> 91117.C212732
	City State Zip Code New Albany MS 38652	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Morris Recycling, Inc. Occupation: President - Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 370.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ralph Germany	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 2853 Myrtlewood Drive	<b>Transaction ID:</b> 91117.C212343
	City State Zip Code Meridian MS 39307-4557	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Dist 3 Lauderdale County Occupation: Election Comm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Barbara Sanders	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 501 Pumping Station Rd.	<b>Transaction ID:</b> 91117.C212347
	City State Zip Code Daleville MS 39326	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Kemper County Occupation: Election Comm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	165.00
<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 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Ike D. Hopper

Mailing Address 9604 Firetower Rd.

City State Zip Code  
Porterville MS 39352

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 ▼ 700.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212349  
Amount of Each Receipt this Period 25.00  
Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Victor P. Smith

Mailing Address P. O. Box 6177

City State Zip Code  
Pearl MS 39288-6177

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

Name of Employer Self Occupation Oil & Gas

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt 11 / 23 / 2009  
Transaction ID: 91215.C212809  
Amount of Each Receipt this Period 10.00  
Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Dott Cannon

Mailing Address P. O. Box 1310

City State Zip Code  
Brookhaven MS 39601

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 ▼ 215.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212350  
Amount of Each Receipt this Period 20.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 55.00

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

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

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

FOR LINE NUMBER: PAGE 39 / 90  
(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.** Full Name (Last, First, Middle Initial)  
Sue Stedman  
 Mailing Address 101 Gloucester Road  
 City State Zip Code  
 Natchez MS 39120  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 5 / 2 0 0 9  
**Transaction ID:** 91117.C212358  
 Amount of Each Receipt this Period  
 25.00  
 Receipt  
 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 ▼ 1145.00

**B.** Full Name (Last, First, Middle Initial)  
Noel Coward  
 Mailing Address 10576 Cambrooke Cv  
 City State Zip Code  
 Collierville TN 38017-3600  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 5 / 2 0 0 9  
**Transaction ID:** 91117.C212359  
 Amount of Each Receipt this Period  
 30.00  
 Receipt  
 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 ▼ 330.00

**C.** Full Name (Last, First, Middle Initial)  
Greg Snowden  
 Mailing Address P. O. Box 3807  
 City State Zip Code  
 Meridian MS 39303-3807  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 5 / 2 0 0 9  
**Transaction ID:** 91117.C212360  
 Amount of Each Receipt this Period  
 30.00  
 Receipt  
 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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 85.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Delbert Hosemann, Jr.	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 2219 Heritage Hills Dr.	<b>Transaction ID:</b> 91117.C212361
	City State Zip Code Jackson MS 39211	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer State Of Mississippi      Occupation Secretary of State Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 1110.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) John P. Fullenwider	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address P. O. Box 2020	<b>Transaction ID:</b> 91117.C212363
	City State Zip Code Oxford MS 38655	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer JPB Pathology, Inc.      Occupation Medical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 5110.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph E. Stockwell	Date of Receipt MM / DD / YYYY 11 / 25 / 2009
	Mailing Address 1036 San Marcos Road	<b>Transaction ID:</b> 91215.C213402
	City State Zip Code Starkville MS 39759-9701	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer N/A      Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	170.00
<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 41 / 90  
(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.** Full Name (Last, First, Middle Initial)  
Charlie Williams  
 Mailing Address P. O. Box 946  
 City State Zip Code  
 Senatobia MS 38668  
 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 ▼ 700.00  
 Date of Receipt 11 / 05 / 2009  
**Transaction ID:** 91117.C212369  
 Amount of Each Receipt this Period 100.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Kay S. Patterson  
 Mailing Address 201 Mayson Avenue  
 City State Zip Code  
 Columbia MS 39429  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Fred Buhner Real Estate Occupation Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00  
 Date of Receipt 11 / 05 / 2009  
**Transaction ID:** 91117.C212371  
 Amount of Each Receipt this Period 20.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Jerry Bridgers  
 Mailing Address 1353 Spring Hill Road  
 City State Zip Code  
 Raymond MS 39154-8725  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00  
 Date of Receipt 11 / 10 / 2009  
**Transaction ID:** 91117.C212701  
 Amount of Each Receipt this Period 75.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 195.00  
**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 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Tony Geiger	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 1776 Plantation	<b>Transaction ID:</b> 91117.C212375
	City State Zip Code Jackson MS 39211	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation FMS Lighting Mgt. Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Nan B. Lott	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 103 Eastwood Drive	<b>Transaction ID:</b> 91117.C212396
	City State Zip Code Columbus MS 39702	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation N/A Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Hubert Ratliff	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 1092 Rolling Hills Drive	<b>Transaction ID:</b> 91117.C212397
	City State Zip Code Crystal Springs MS 39059	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation N/A Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<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 43 / 90  
(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.** Full Name (Last, First, Middle Initial)  
Scott Carmichael

Mailing Address 280 Grand Cypress Drive

City State Zip Code  
Meridian MS 39305

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

Name of Employer Occupation  
Planters Bank Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2009

Transaction ID: 91117.C212401

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address 202 Weathersby Road

City State Zip Code  
Hattiesburg MS 39402

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2009

Transaction ID: 91117.C212415

Amount of Each Receipt this Period  
30.00

Receipt

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

Mailing Address 968 Taylor Road

City State Zip Code  
Kokomo MS 39643-4966

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 ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
11 / 13 / 2009

Transaction ID: 91117.C212731

Amount of Each Receipt this Period  
200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 250.00

**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 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Ashley Skellie	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address PO Box 38	<b>Transaction ID:</b> 91117.C212418
	City State Zip Code Long Beach MS 39560	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Self	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) M. Andrea Lowrie	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 621 Water Oak Drive	<b>Transaction ID:</b> 91117.C212420
	City State Zip Code Madison MS 39110-9511	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Carol King	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 153 Carol King Road	<b>Transaction ID:</b> 91117.C212425
	City State Zip Code Mendenhall MS 39114-4908	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Self	Occupation Farmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	65.00
<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 45 / 90  
(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

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

Mailing Address 15018 New Zion Road

City State Zip Code  
Crystal Springs MS 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 ▼ 1210.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212426  
Amount of Each Receipt this Period 20.00  
Receipt

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

Mailing Address 8828 Kipapa Way

City State Zip Code  
Diamondhead MS 39525-4205

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

Name of Employer Self Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212427  
Amount of Each Receipt this Period 10.00  
Receipt

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

Mailing Address 214 Silas Trace

City State Zip Code  
Ridgeland MS 39157

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

Name of Employer Smith Reeves & Yarborough PLLC Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2009  
Transaction ID: 91117.C212429  
Amount of Each Receipt this Period 20.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 50.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Nicholas Thompson

Mailing Address 70 I St. SE Apt 325

City Washington State DC Zip Code 20003

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

Name of Employer The Tarrance Group Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt 11 / 05 / 2009

Transaction ID: 91117.C212432

Amount of Each Receipt this Period 20.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Sharon Pratt

Mailing Address P.O. Box 159

City Bailey State MS Zip Code 39320

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

Name of Employer Lauderdale Co. Schools Occupation Music Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 11 / 05 / 2009

Transaction ID: 91117.C212434

Amount of Each Receipt this Period 20.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Lenard Brown

Mailing Address 437 Eads Creek Road

City Belden State MS Zip Code 38826-9332

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 ▼ 200.00

Date of Receipt 11 / 09 / 2009

Transaction ID: 91117.C212635

Amount of Each Receipt this Period 100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 140.00

**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 47 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Lenard Brown

Mailing Address 437 Eads Creek Road

City Belden State MS Zip Code 38826-9332

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 11 / 30 / 2009

Transaction ID: 91215.C212829

Amount of Each Receipt this Period 100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
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 ▼ 5950.00

Date of Receipt 11 / 05 / 2009

Transaction ID: 91117.C212435

Amount of Each Receipt this Period 50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Jane Youell

Mailing Address 1251 Lee Dr. #H

City Clarksdale State MS Zip Code 38614

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 30 / 2009

Transaction ID: 91215.C212836

Amount of Each Receipt this Period 100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 250.00

**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 48 / 90  
(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

**A.** Full Name (Last, First, Middle Initial)  
Mike Armour

Mailing Address 2508 Savery Drive

City State Zip Code  
Tupelo MS 38801

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

Name of Employer Occupation  
Peoples Bank Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2009

**Transaction ID:** 91117.C212439

Amount of Each Receipt this Period  
10.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Nathan Wells

Mailing Address 790 Highpoint Drive

City State Zip Code  
Byram MS 39272

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

Name of Employer Occupation  
Winning Edge, LLC Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2009

**Transaction ID:** 91117.C212444

Amount of Each Receipt this Period  
10.00

Receipt

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

Mailing Address 1547 Jupiter Rd.

City State Zip Code  
Braxton MS 39044

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

Name of Employer Occupation  
Mississippi Republican Party Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2009

**Transaction ID:** 91117.C212448

Amount of Each Receipt this Period  
50.00

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 49 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Frank Rogers	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address P.O. Box 219	Transaction ID: 91117.C212451
	City State Zip Code Harrisville MS 39082	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Quinton Dickerson, III	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 112 Lakeview Court	Transaction ID: 91117.C212453
	City State Zip Code Madison MS 39110	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Self Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mike Maynard	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address P.O. Box 562	Transaction ID: 91117.C212454
	City State Zip Code Tupelo MS 38802	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Weatheralls Inc. Occupation Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 510.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	65.00
<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 50 / 90  
(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

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

Mailing Address 3908 Cambridge St.

City State Zip Code  
Jackson MS 39216

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

Name of Employer Adams & Reese, LLP      Occupation Consultant

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      870.00

Date of Receipt  

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

**Transaction ID:** 91117.C212455

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address Wilsons Termite  
206 A E. Government St.

City State Zip Code  
Brandon MS 39042

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

Name of Employer Wilsons Termite      Occupation Pest Control

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      880.00

Date of Receipt  

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

**Transaction ID:** 91117.C212462

Amount of Each Receipt this Period  
80.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
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 N/A      Occupation Homemaker

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      2030.00

Date of Receipt  

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

**Transaction ID:** 91117.C212466

Amount of Each Receipt this Period  
50.00

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: (check only one)	PAGE 51 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Francis Rullan		Date of Receipt
	Mailing Address 1613 Linden Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Jackson	MS	39202
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 91117.C212467
Name of Employer Div. of Medicaid		Occupation Director of Public Relations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 220.00	Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Jo Anne Goodgame		Date of Receipt
	Mailing Address P.O. Box 132		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Aberdeen	MS	39730
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 91117.C212472
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 360.00	Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) Rebecca Currie		Date of Receipt
	Mailing Address 407 Oliver Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Brookhaven	MS	39601
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 91117.C212475
Name of Employer State Of Mississippi		Occupation House of Representatives	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 260.00	Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 65.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Frank May

Mailing Address 410 Spike Ridge

City State Zip Code  
Canton MS 39046

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 ▼ 210.00

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

**Transaction ID:** 91117.C212565

Amount of Each Receipt this Period  
60.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Raymond Sinele

Mailing Address P.O. Box 16186

City State Zip Code  
Jackson MS 39236-6186

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

**Transaction ID:** 91117.C212656

Amount of Each Receipt this Period  
200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Pete Lowery

Mailing Address P.O. Box 40

City State Zip Code  
DLo MS 39062

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 ▼ 335.00

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

**Transaction ID:** 91117.C212479

Amount of Each Receipt this Period  
10.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **270.00**

**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 53 / 90
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Pete Lowery		Date of Receipt
	Mailing Address P.O. Box 40		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	DLo	MS	39062
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer N/A		Occupation Retired	Transaction ID: 91119.C212777
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="355.00"/>	<input type="text" value="20.00"/>
Receipt			

<b>B.</b>	Full Name (Last, First, Middle Initial) Marsha Roberts		Date of Receipt
	Mailing Address 504 CR 676		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Quitman	MS	39355
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer N/A		Occupation Homemaker	Transaction ID: 91117.C212483
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="270.00"/>	<input type="text" value="20.00"/>
Receipt			

<b>C.</b>	Full Name (Last, First, Middle Initial) Tony Palazzo		Date of Receipt
	Mailing Address 698 Mallard Cove		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Tupelo	MS	38801
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Urology		Occupation Administrator	Transaction ID: 91117.C212484
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="270.00"/>	<input type="text" value="10.00"/>
Receipt			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="50.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 / 90
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Joel Bomgar		Date of Receipt
	Mailing Address 5624 Brentwood Dr.		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Jackson	MS	39211
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Bomgar Corporation		Occupation Founder & CEO	Transaction ID: 91117.C212489
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1275.00"/>	<input type="text" value="25.00"/>
Receipt			

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeff Weill		Date of Receipt
	Mailing Address 1768 Lelia Drive		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Jackson	MS	39216-4819
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer City of Jackson		Occupation City Councilman	Transaction ID: 91117.C212491
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="410.00"/>	<input type="text" value="10.00"/>
Receipt			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary McLaurin		Date of Receipt
	Mailing Address P.O. Box 1257		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Ridgeland	MS	39158
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self Employed		Occupation Real Estate Developer	Transaction ID: 91117.C212495
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="220.00"/>	<input type="text" value="20.00"/>
Receipt			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="55.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 55 / 90  
(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

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

Mailing Address 1112 Halstead Bayou Drive

City State Zip Code  
Ocean Springs MS 39564

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

Name of Employer Occupation  
Jackson County Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

**Transaction ID:** 91117.C212497

Amount of Each Receipt this Period  
20.00

Receipt

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

Mailing Address 728 Forest Park Circle

City State Zip Code  
Philadelphia MS 39350

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

Name of Employer Occupation  
Suez Environment North America Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 3 / 2 0 0 9

**Transaction ID:** 91215.C213474

Amount of Each Receipt this Period  
25.00

Receipt

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

Mailing Address 209 McMahan Rd.

City State Zip Code  
Purvis MS 39475

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 ▼ 365.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 8 / 2 0 0 9

**Transaction ID:** 91119.C212789

Amount of Each Receipt this Period  
25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **70.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 56 / 90	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial) B.J. Canup		Date of Receipt
Mailing Address 102 Francis Drive		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
City	State	Zip Code
Fulton	MS	38843
FEC ID number of contributing federal political committee.		Transaction ID: 91117.C212531
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer Tremont	Occupation Wholesaler/Importer	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		<input type="text" value="250.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="250.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="4775.00"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 57 / 90

<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

<b>A.</b>	Full Name (Last, First, Middle Initial) 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: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91215.E21894 Date of Disbursement 11 / 30 / 2009  Amount of Each Disbursement this Period 1918.99  -PAYROLL TAXES
<b>B.</b>	Full Name (Last, First, Middle Initial) ADP, Inc.  Mailing Address 5680 New Northside Drive  City Atlanta State GA Zip Code 30328-  Purpose of Disbursement -Payroll Processing Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91119.E21854 Date of Disbursement 11 / 15 / 2009  Amount of Each Disbursement this Period 80.84  -PAYROLL PROCESSING FEES
<b>C.</b>	Full Name (Last, First, Middle Initial) 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: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91119.E21860 Date of Disbursement 11 / 15 / 2009  Amount of Each Disbursement this Period 261.00  -PAYROLL TAXES

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

2260.83

**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

**A.** Full Name (Last, First, Middle Initial)  
Mississippi Employment Security Comm.

Mailing Address P O Box 22781

City Jackson State MS Zip Code 39225-2781

Purpose of Disbursement  
-Payroll Taxes

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 91119.E21861  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

-PAYROLL TAXES

**B.** Full Name (Last, First, Middle Initial)  
Mississippi Employment Security Comm.

Mailing Address P O Box 22781

City Jackson State MS Zip Code 39225-2781

Purpose of Disbursement  
-Payroll Taxes

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 91215.E21896  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

-PAYROLL TAXES

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

Mailing Address P. O. Box 70503

City Charlotte State NC Zip Code 28272-0503

Purpose of Disbursement  
-Payroll Taxes

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 91119.E21859  
Date of Disbursement

/  /

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

<b>A.</b> Full Name (Last, First, Middle Initial) 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: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 91215.E21895 Date of Disbursement 11 / 30 / 2009
	Amount of Each Disbursement this Period 261.00 Category/Type: 001 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ -PAYROLL TAXES

<b>B.</b> Full Name (Last, First, Middle Initial) Mamie C. Taylor Mailing Address 408 Timber Ridge Way City Brandon State MS Zip Code 39047- Purpose of Disbursement REIMBURSEMENT: SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 91117.E21814 Date of Disbursement 11 / 10 / 2009
	Amount of Each Disbursement this Period 124.88 Category/Type: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ REIMBURSEMENT: SEE BELOW

<b>C.</b> Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of TN Mailing Address 85 N. Danny Thomas Blvd. City Memphis State TN Zip Code 38103-2398 Purpose of Disbursement -Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 91117.E21815 Date of Disbursement 11 / 10 / 2009
	Amount of Each Disbursement this Period 124.88 Category/Type: 001 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ [MEMO ITEM] MEMO: -HEALTH INSURANCE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	385.88
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 60 / 90

<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

A.	Full Name (Last, First, Middle Initial) ADP, Inc.	Transaction ID: 91215.E21887 Date of Disbursement 11 / 30 / 2009
	Mailing Address 5680 New Northside Drive	Amount of Each Disbursement this Period 80.84
	City Atlanta State GA Zip Code 30328-	
	Purpose of Disbursement -Payroll Processing Fees Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-PAYROLL PROCESSING FEES

B.	Full Name (Last, First, Middle Initial) Fish & Richardson P.C.	Transaction ID: 91215.E21879 Date of Disbursement 11 / 20 / 2009
	Mailing Address P.O. Box 3295	Amount of Each Disbursement this Period 247.50
	City Boston State MA Zip Code 02241-3295	
	Purpose of Disbursement -FEC Compliance Firm Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-FEC COMPLIANCE FIRM

C.	Full Name (Last, First, Middle Initial) Blue Cross & Blue Shield of MS	Transaction ID: 91215.E21953 Date of Disbursement 11 / 02 / 2009
	Mailing Address P. O. Box 23082	Amount of Each Disbursement this Period 346.74
	City Jackson State MS Zip Code 39225-3082	
	Purpose of Disbursement -Health Insurance Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-HEALTH INSURANCE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>675.08</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>5303.20</b>

# 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) William Craft</p> <p>Mailing Address 714 Circle Drive</p> <p>City Mendenhall State MS Zip Code 39114-</p> <p>Purpose of Disbursement FEA Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 91215.E21881 <b>Date of Disbursement</b> 11 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 64.00</p> <p>FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Thomas Joe Harvey</p> <p>Mailing Address 5 Stanford Court</p> <p>City Jackson State MS Zip Code 39211-</p> <p>Purpose of Disbursement FEA Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 91215.E21891 <b>Date of Disbursement</b> 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 808.90</p> <p>FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Wells Griffith</p> <p>Mailing Address 1732 Devine St.</p> <p>City Jackson State MS Zip Code 39202-</p> <p>Purpose of Disbursement FEA Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 91119.E21855 <b>Date of Disbursement</b> 11 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 1098.30</p> <p>FEA SALARY</p>

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

1971.20

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

A.	Full Name (Last, First, Middle Initial) Brad White	Transaction ID: 91215.E21893 Date of Disbursement 11 / 30 / 2009
	Mailing Address 1547 Jupiter Rd.	Amount of Each Disbursement this Period 2131.66
	City Braxton State MS Zip Code 39044-	
	Purpose of Disbursement FEA Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA SALARY

B.	Full Name (Last, First, Middle Initial) Mamie C. Taylor	Transaction ID: 91215.E21892 Date of Disbursement 11 / 30 / 2009
	Mailing Address 408 Timber Ridge Way	Amount of Each Disbursement this Period 1273.04
	City Brandon State MS Zip Code 39047-	
	Purpose of Disbursement FEA Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA SALARY

C.	Full Name (Last, First, Middle Initial) Wells Griffith	Transaction ID: 91215.E21890 Date of Disbursement 11 / 30 / 2009
	Mailing Address 1732 Devine St.	Amount of Each Disbursement this Period 1098.30
	City Jackson State MS Zip Code 39202-	
	Purpose of Disbursement FEA Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	4503.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 63 / 90

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Brad White</p> <p>Mailing Address 1547 Jupiter Rd.</p> <p>City Braxton State MS Zip Code 39044-</p> <p>Purpose of Disbursement FEA Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 91119.E21858 <b>Date of Disbursement</b> 11 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 2131.66</p> <p>FEA SALARY</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Thomas Joe Harvey</p> <p>Mailing Address 5 Stanford Court</p> <p>City Jackson State MS Zip Code 39211-</p> <p>Purpose of Disbursement FEA Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 91119.E21856 <b>Date of Disbursement</b> 11 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 808.90</p> <p>FEA SALARY</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mamie C. Taylor</p> <p>Mailing Address 408 Timber Ridge Way</p> <p>City Brandon State MS Zip Code 39047-</p> <p>Purpose of Disbursement FEA Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 91119.E21857 <b>Date of Disbursement</b> 11 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 1273.03</p> <p>FEA SALARY</p>

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

4213.59

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 64 / 90

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Amanda Wells <hr/> Mailing Address 802 Vintage Pointe <hr/> City State Zip Code Brandon MS 39042- <hr/> Purpose of Disbursement FEA Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91117.E21817 Date of Disbursement <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/>
	Amount of Each Disbursement this Period <input type="text" value="500.00"/>  FEA SALARY
<b>B.</b> Full Name (Last, First, Middle Initial) Amanda Wells <hr/> Mailing Address 802 Vintage Pointe <hr/> City State Zip Code Brandon MS 39042- <hr/> Purpose of Disbursement FEA Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91117.E21802 Date of Disbursement <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/>
	Amount of Each Disbursement this Period <input type="text" value="435.00"/>  FEA SALARY

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

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

**METHOD OF ALLOCATION FOR:**

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

NAME OF COMMITTEE (In Full)  
 Mississippi Republican Party

USE ONLY ONE SECTION, A or B

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

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

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

**Flat Minimum Federal Percentage**

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

**or**

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

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

- Administrative  Generic Voter Drive  Public Communications Referencing Party Only

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

NAME OF COMMITTEE (In Full)  
 Mississippi Republican Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Mississippi Rep P. O. Box 60	M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 9	8000.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	8000.00	Transaction ID: H391215.C212818
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		
		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	8000.00
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	8000.00

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Southern Republican Leadership Conferenc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 12232 Industriplex Blvd. Ste. 1			Allocated Activity or Event Year-To-Date 156545.61	
City Baton Rouge	State LA	Zip Code 70809-	Date M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 9	
Purpose of Disbursement: -Registration Fees			Transaction ID: H491117.E21796	
Activity or Event Identifier: ADMINISTRATION B 41				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
95.40		540.60		636.00

<b>B. Full Name (Last, First, Middle Initial)</b> Peters Real Estate			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2906 N. State Ste. 201			Allocated Activity or Event Year-To-Date 157645.61	
City Jackson	State MS	Zip Code 39216-	Date M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 9	
Purpose of Disbursement: -Building Lease			Transaction ID: H491117.E21797	
Activity or Event Identifier: ADMINISTRATION B 41				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.00		935.00		1100.00

<b>C. Full Name (Last, First, Middle Initial)</b> U. S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address General Mail Facility			Allocated Activity or Event Year-To-Date 157815.61	
City Jackson	State MS	Zip Code 39201-	Date M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 9	
Purpose of Disbursement: -Postage			Transaction ID: H491117.E21798	
Activity or Event Identifier: ADMINISTRATION B 41				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.50		144.50		170.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
285.90		1620.10		1906.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Wilbur Stuckey

Mailing Address  
6628 Lake Glen Dr.

City	State	Zip Code
Jackson	MS	39213-

Purpose of Disbursement:  
REIMBURSEMENT: SEE BELOW

Activity or Event Identifier:  
ADMINISTRATION B 41

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

Allocated Activity or Event Year-To-Date  
158006.29

Date   /   /

Transaction ID: H491117.E21803

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.50		93.50		110.00

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

Mailing Address  
815 South Wheatley

City	State	Zip Code
Ridgeland	MS	39157-

Purpose of Disbursement:  
-Office Supplies/Vacuum

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]** 001-Office Supplies/Vacuum

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

Allocated Activity or Event Year-To-Date  
110.00

Date   /   /

Transaction ID: H491117.E21804

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.50		93.50		110.00

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

Mailing Address  
P.O. Box 15710

City	State	Zip Code
Wilmington	DE	19886-5710

Purpose of Disbursement:  
CREDIT CARD: SEE BELOW

Activity or Event Identifier:  
ADMINISTRATION B 41

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

Allocated Activity or Event Year-To-Date  
165243.11

Date   /   /

Transaction ID: H491117.E21809

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
316.75		1794.94		2111.69

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
333.25		1888.44		2221.69

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Two Sisters Restaurant			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 707 N. Congress			Allocated Activity or Event Year-To-Date 25.00	
City                      State                      Zip Code Jackson                      MS                      39202-	Category/ Type 001		Date                      M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 9	
Purpose of Disbursement: -Luncheon			Transaction ID: H491216.E21990	
Activity or Event Identifier: ADMINISTRATION B 41 [MEMO ITEM]001-Luncheon				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.75		21.25		25.00

<b>B. Full Name (Last, First, Middle Initial)</b> Delta Airlines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Jackson Airport			Allocated Activity or Event Year-To-Date 378.91	
City                      State                      Zip Code Pearl                      MS                      39208-	Category/ Type 002		Date                      M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 9	
Purpose of Disbursement: -Airline Tickets			Transaction ID: H491216.E21987	
Activity or Event Identifier: ADMINISTRATION B 41 [MEMO ITEM]002-Airline Tickets				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.84		322.07		378.91

<b>C. Full Name (Last, First, Middle Initial)</b> Texaco, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1264 High Street			Allocated Activity or Event Year-To-Date 34.83	
City                      State                      Zip Code Jackson                      MS                      39202-	Category/ Type 002		Date                      M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 9	
Purpose of Disbursement: -Gasoline			Transaction ID: H491216.E21995	
Activity or Event Identifier: ADMINISTRATION B 41 [MEMO ITEM]002-Gasoline				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.22		29.61		34.83

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Hal & Mals

Mailing Address

200 South Commerce Street

City	State	Zip Code
Jackson	MS	39201-

001

Purpose of Disbursement:  
-Luncheon

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

42.50

Activity or Event Identifier:  
ADMINISTRATION B 41

[MEMO ITEM]001-Luncheon

Date 11 / 09 / 2009

Transaction ID: H491216.E21989

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.38		36.12		42.50

**B. Full Name (Last, First, Middle Initial)**  
Hal & Mals

Mailing Address

200 South Commerce Street

City	State	Zip Code
Jackson	MS	39201-

001

Purpose of Disbursement:  
-Luncheon

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

31.50

Activity or Event Identifier:  
ADMINISTRATION B 41

[MEMO ITEM]001-Luncheon

Date 11 / 09 / 2009

Transaction ID: H491216.E21986

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.73		26.77		31.50

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

Mailing Address

No. 57525881207 1263 High Street

City	State	Zip Code
Jackson	MS	39211-

002

Purpose of Disbursement:  
-Gasoline

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

82.20

Activity or Event Identifier:  
ADMINISTRATION B 41

[MEMO ITEM]002-Gasoline

Date 11 / 09 / 2009

Transaction ID: H491216.E21994

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.33		69.87		82.20

**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)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Kats Wine Cellar

Mailing Address  
921 E. Fortification

City	State	Zip Code	001
Jackson	MS	39202-	

Purpose of Disbursement:  
-Meeting Supplies

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Meeting Supplies

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

Allocated Activity or Event Year-To-Date  
128.65

Date   /   /      
**Transaction ID:** H491216.E21985

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.30		109.35		128.65

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

Mailing Address  
120 N. Congress

City	State	Zip Code	001
Jackson	MS	39201-	

Purpose of Disbursement:  
-Luncheon

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Luncheon

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

Allocated Activity or Event Year-To-Date  
24.20

Date   /   /      
**Transaction ID:** H491216.E21981

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.63		20.57		24.20

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

Mailing Address  
2351 Passage Road

City	State	Zip Code	002
Biloxi	MS	39531-	

Purpose of Disbursement:  
-Gasoline

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**002-Gasoline

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

Allocated Activity or Event Year-To-Date  
47.97

Date   /   /      
**Transaction ID:** H491216.E21993

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.20		40.77		47.97

**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)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Walkers Drive Inn

Mailing Address  
3016 North State Street

City	State	Zip Code	Category/ Type
Jackson	MS	39216-	001

Purpose of Disbursement:  
-Luncheon

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Luncheon

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

Allocated Activity or Event Year-To-Date  
108.65

Date   /   /      
**Transaction ID:** H491216.E21992

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.30		92.35		108.65

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

Mailing Address  
6154 Old Canton

City	State	Zip Code	Category/ Type
Jackson	MS	39211-	002

Purpose of Disbursement:  
-Gasoline

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**002-Gasoline

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

Allocated Activity or Event Year-To-Date  
79.21

Date   /   /      
**Transaction ID:** H491216.E21980

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.88		67.33		79.21

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

Mailing Address  
PO Box 619612 MD 2400

City	State	Zip Code	Category/ Type
Dallas	TX	75261-	002

Purpose of Disbursement:  
-Airline Ticket

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**002-Airline Ticket

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

Allocated Activity or Event Year-To-Date  
921.40

Date   /   /      
**Transaction ID:** H491216.E21988

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
138.21		783.19		921.40

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

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

Mailing Address  
5849 Ridgewood Road

City	State	Zip Code	001
Jackson	MS	39211-	

Purpose of Disbursement: -Luncheon	Category/ Type
	001

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Luncheon

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

Allocated Activity or Event Year-To-Date  
5.86

Date 

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

Transaction ID: H491216.E21996

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.88		4.98		5.86

**B. Full Name (Last, First, Middle Initial)**  
Symantec Software

Mailing Address  
20330 Stevens Creek Blvd.

City	State	Zip Code	001
Cupertino	CA	95014-	

Purpose of Disbursement: -Office Supplies/Computer Softwa	Category/ Type
	001

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Office Supplies/Computer Softwa

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

Allocated Activity or Event Year-To-Date  
93.07

Date 

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

Transaction ID: H491216.E21991

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.96		79.11		93.07

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

Mailing Address  
Attn: Bob Crechale   3107 Hwy 80 W

City	State	Zip Code	001
Jackson	MS	39204-	

Purpose of Disbursement: -Luncheon	Category/ Type
	001

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Luncheon

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

Allocated Activity or Event Year-To-Date  
46.79

Date 

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

Transaction ID: H491216.E21982

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.02		39.77		46.79

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
McDonalds Restaurant Meridian

Mailing Address  
2104 North Hill St.

City	State	Zip Code	Category/Type
Meridian	MS	39305-	001

Purpose of Disbursement:  
-Luncheon

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Luncheon

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
 Allocated Activity or Event Year-To-Date

12.90

Date   /   /

Transaction ID: H491216.E21979

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.94		10.96		12.90

**B. Full Name (Last, First, Middle Initial)**  
Borders Books

Mailing Address  
100 Dogwood Blvd.

City	State	Zip Code	Category/Type
Flowood	MS	39232-	001

Purpose of Disbursement:  
-Office Supplies

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Office Supplies

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
 Allocated Activity or Event Year-To-Date

32.05

Date   /   /

Transaction ID: H491216.E21983

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.81		27.24		32.05

**C. Full Name (Last, First, Middle Initial)**  
Underground 119

Mailing Address  
119 South President Street

City	State	Zip Code	Category/Type
Jackson	MS	39201-	001

Purpose of Disbursement:  
-Luncheon

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Luncheon

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
 Allocated Activity or Event Year-To-Date

16.00

Date   /   /

Transaction ID: H491216.E21984

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.40		13.60		16.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
FIA Card Services

Mailing Address  
P.O. Box 15710

City	State	Zip Code
Wilmington	DE	19886-5710

Purpose of Disbursement:  
CREDIT CARD: SEE BELOW

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

163131.42

Activity or Event Identifier:  
ADMINISTRATION B 41

Date 

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

Transaction ID: H491117.E21810

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
648.23		3673.29		4321.52

**B. Full Name (Last, First, Middle Initial)**  
Chimneyville Smokehouse

Mailing Address  
970 High Street

City	State	Zip Code
Jackson	MS	39202-

Purpose of Disbursement:  
-Luncheon

001  
Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

16.09

Activity or Event Identifier:  
ADMINISTRATION B 41

[MEMO ITEM]001-Luncheon

Date 

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

Transaction ID: H491216.E21976

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.41		13.68		16.09

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

Mailing Address  
Jackson Intern. Airport

City	State	Zip Code
Pearl	MS	39208-

Purpose of Disbursement:  
-Parking

002  
Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

41.00

Activity or Event Identifier:  
ADMINISTRATION B 41

[MEMO ITEM]002-Parking

Date 

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

Transaction ID: H491216.E21970

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.15		34.85		41.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
648.23		3673.29		4321.52

**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)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
American Airlines

Mailing Address  
PO Box 619612 MD 2400

City State Zip Code  
Dallas TX 75261-

Purpose of Disbursement:  
-Baggage Fee

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**002-Baggage Fee

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

Allocated Activity or Event Year-To-Date  
30.00

Date 11 / 09 / 2009  
**Transaction ID:** H491216.E21968

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.50		25.50		30.00

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

Mailing Address  
101 Fourth Street

City State Zip Code  
San Francisco CA 94103-

Purpose of Disbursement:  
-Office Computer

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Office Computer

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

Allocated Activity or Event Year-To-Date  
1658.48

Date 11 / 09 / 2009  
**Transaction ID:** H491216.E21978

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
248.77		1409.71		1658.48

**C. Full Name (Last, First, Middle Initial)**  
1 & 1 Internet, Inc.

Mailing Address  
701 Lee Road, Suite 300

City State Zip Code  
Wayne PA 19087-

Purpose of Disbursement:  
-Office Supplies

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Office Supplies

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

Allocated Activity or Event Year-To-Date  
29.97

Date 11 / 09 / 2009  
**Transaction ID:** H491216.E21974

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.50		25.47		29.97

**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)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Infinity Box Inc.

Mailing Address  
16057 Tampla Palms Blvd. West

City State Zip Code  
Tampa FL 33647-

001

Purpose of Disbursement:  
-Office Supplies

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

24.95

Date   /   /

Transaction ID: H491216.E21975

Activity or Event Identifier:  
ADMINISTRATION B 41  
[MEMO ITEM]001-Office Supplies

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3.74

21.21

24.95

**B. Full Name (Last, First, Middle Initial)**  
Lowe's

Mailing Address  
Ridgway Drive

City State Zip Code  
Brandon MS 39042-

001

Purpose of Disbursement:  
-Office Supplies/Light Bulbs

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6.76

Date   /   /

Transaction ID: H491216.E21977

Activity or Event Identifier:  
ADMINISTRATION B 41  
[MEMO ITEM]001-Office Supplies/Light Bulbs

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.01

5.75

6.76

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

Mailing Address  
318 North State Street

City State Zip Code  
Chicago IL 60610-

001

Purpose of Disbursement:  
-Luncheon

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

203.76

Date   /   /

Transaction ID: H491216.E21966

Activity or Event Identifier:  
ADMINISTRATION B 41  
[MEMO ITEM]001-Luncheon

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

30.56

173.20

203.76

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

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

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

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Catch Thirty Five

Mailing Address  
35 West Wacker Drive

City State Zip Code  
Chicago IL 60601-001

Purpose of Disbursement:  
-Luncheon

Activity or Event Identifier:  
ADMINISTRATION B 41  
[MEMO ITEM]001-Luncheon

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
261.76

Date 11 / 09 / 2009

Transaction ID: H491216.E21967

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.26		222.50		261.76

**B. Full Name (Last, First, Middle Initial)**  
Southwest News

Mailing Address  
Dallas Fort Worth Airport

City State Zip Code  
Dallas TX 75261-001

Purpose of Disbursement:  
-Refreshments

Activity or Event Identifier:  
ADMINISTRATION B 41  
[MEMO ITEM]001-Refreshments

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
13.30

Date 11 / 09 / 2009

Transaction ID: H491216.E21969

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.00		11.30		13.30

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

Mailing Address  
Chicago Ohair Aiport

City State Zip Code  
Chicago IL 60601-001

Purpose of Disbursement:  
-Luncheon

Activity or Event Identifier:  
ADMINISTRATION B 41  
[MEMO ITEM]001-Luncheon

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
35.96

Date 11 / 09 / 2009

Transaction ID: H491216.E21971

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.39		30.57		35.96

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Yellow Cab Chicago

Mailing Address  
2230 South Michigan Ave.

City	State	Zip Code	002
Chicago	IL	60611-	

Purpose of Disbursement: -Taxi Fare	Category/ Type
	002

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**002-Taxi Fare

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

Allocated Activity or Event Year-To-Date  
43.75

Date 

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

Transaction ID: H491216.E21972

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.56		37.19		43.75

**B. Full Name (Last, First, Middle Initial)**  
Hyatt Hotels Chicago

Mailing Address  
151 East Wacker Drive

City	State	Zip Code	002
Chicago	IL	60611-	

Purpose of Disbursement: -Lodging	Category/ Type
	002

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**002-Lodging

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

Allocated Activity or Event Year-To-Date  
1955.74

Date 

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

Transaction ID: H491216.E21973

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
293.36		1662.38		1955.74

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

Mailing Address  
P.O. Box 15710

City	State	Zip Code	
Wilmington	DE	19886-5710	

Purpose of Disbursement: CREDIT CARD: SEE BELOW	Category/ Type

Activity or Event Identifier:  
ADMINISTRATION B 41

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

Allocated Activity or Event Year-To-Date  
158809.90

Date 

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

Transaction ID: H491117.E21811

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.54		258.07		303.61

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.54		258.07		303.61

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

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

Mailing Address  
955 North State Street

City	State	Zip Code
Jackson	MS	39201-

001

Purpose of Disbursement:  
-Office Supplies

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

74.73

Activity or Event Identifier:  
ADMINISTRATION B 41  
[MEMO ITEM]001-Office Supplies

Date 

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

Transaction ID: H491216.E21959

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.21		63.52		74.73

**B. Full Name (Last, First, Middle Initial)**  
McAlisters Deli

Mailing Address  
1240 E. Northside Drive

City	State	Zip Code
Jackson	MS	39211-

001

Purpose of Disbursement:  
-Luncheon

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

15.01

Activity or Event Identifier:  
ADMINISTRATION B 41  
[MEMO ITEM]001-Luncheon

Date 

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

Transaction ID: H491216.E21960

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.25		12.76		15.01

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

Mailing Address  
4910 I-55 North

City	State	Zip Code
Jackson	MS	39206-

001

Purpose of Disbursement:  
-Meeting Supplies

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

16.04

Activity or Event Identifier:  
ADMINISTRATION B 41  
[MEMO ITEM]001-Meeting Supplies

Date 

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

Transaction ID: H491216.E21962

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.41		13.63		16.04

**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)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

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

Mailing Address  
2801 North State Street

City	State	Zip Code	Category/ Type
Jackson	MS	39216-	001

Purpose of Disbursement:  
-Luncheon

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Luncheon

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
 Allocated Activity or Event Year-To-Date

48.93

Date   /   /

Transaction ID: H491216.E21961

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.34		41.59		48.93

**B. Full Name (Last, First, Middle Initial)**  
Nicks Restaurant

Mailing Address  
1501 Lakeland Drive

City	State	Zip Code	Category/ Type
Jackson	MS	39216-	001

Purpose of Disbursement:  
-Luncheon

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Luncheon

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
 Allocated Activity or Event Year-To-Date

40.06

Date   /   /

Transaction ID: H491216.E21963

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.01		34.05		40.06

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

Mailing Address  
567 West Lake Street

City	State	Zip Code	Category/ Type
Chicago	IL	60661-	002

Purpose of Disbursement:  
-Subway Train Ticket

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**002-Subway Train Ticket

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
 Allocated Activity or Event Year-To-Date

9.00

Date   /   /

Transaction ID: H491216.E21958

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.35		7.65		9.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Emarld Loop Grill

Mailing Address  
216 N. Wabash Ave.

City	State	Zip Code	Category/Type
Chicago	IL	60601-	001

Purpose of Disbursement:  
-Luncheon

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Luncheon

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
59.01

Date 

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

Transaction ID: H491216.E21964

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.85		50.16		59.01

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

Mailing Address  
111 East Wacker Drive

City	State	Zip Code	Category/Type
Chicago	IL	60601-	001

Purpose of Disbursement:  
-Luncheon

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**001-Luncheon

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
40.83

Date 

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

Transaction ID: H491216.E21965

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.12		34.71		40.83

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

Mailing Address  
1732 Devine St.

City	State	Zip Code	Category/Type
Jackson	MS	39202-	002

Purpose of Disbursement:  
-Mileage to George County

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
165416.11

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: H491117.E21819

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.95		147.05		173.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.95		147.05		173.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
All Metro Pest Services

Mailing Address  
108 Office Park Dr., Ste. A

City	State	Zip Code	001
Brandon	MS	39042-	

Purpose of Disbursement:  
-Pest Control

Activity or Event Identifier:  
ADMINISTRATION B 41

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

Allocated Activity or Event Year-To-Date  
166627.85

Date 11 / 20 / 2009  
Transaction ID: H491215.E21866

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.03		45.47		53.50

**B. Full Name (Last, First, Middle Initial)**  
FP Mailing Solutions

Mailing Address  
Dept. 4272

City	State	Zip Code	001
Elgin	IL	60122-4272	

Purpose of Disbursement:  
-Postage Reset Fee

Activity or Event Identifier:  
ADMINISTRATION B 41

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

Allocated Activity or Event Year-To-Date  
167015.41

Date 11 / 20 / 2009  
Transaction ID: H491215.E21867

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.24		7.05		8.29

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

Mailing Address  
P.O. Box 1775

City	State	Zip Code	001
Brandon	MS	39043-	

Purpose of Disbursement:  
-Lawn Care

Activity or Event Identifier:  
ADMINISTRATION B 41

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

Allocated Activity or Event Year-To-Date  
166808.28

Date 11 / 20 / 2009  
Transaction ID: H491215.E21868

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.00		85.00		100.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.27		137.52		161.79

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Brads Green Machine			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 41			Allocated Activity or Event Year-To-Date 166893.28	
City Star	State MS	Zip Code 39167-	Date <input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2009"/> Transaction ID: H491215.E21869	
Purpose of Disbursement: -Lawn Care/Weed Control			Category/Type 001	
Activity or Event Identifier: ADMINISTRATION B 41				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.75		72.25		85.00

<b>B. Full Name (Last, First, Middle Initial)</b> Amerimail Direct			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 39			Allocated Activity or Event Year-To-Date 166544.43	
City Jackson	State MS	Zip Code 39205-0039	Date <input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2009"/> Transaction ID: H491215.E21870	
Purpose of Disbursement: -Printing of Office Supplies			Category/Type 001	
Activity or Event Identifier: ADMINISTRATION B 41				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.73		236.47		278.20

<b>C. Full Name (Last, First, Middle Initial)</b> Office Depot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Dept. 56-4600055510   P.O. Box 689020			Allocated Activity or Event Year-To-Date 166266.23	
City Des Moines	State IA	Zip Code 50368-9020	Date <input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2009"/> Transaction ID: H491215.E21871	
Purpose of Disbursement: -Office Supplies			Category/Type 001	
Activity or Event Identifier: ADMINISTRATION B 41				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.07		363.06		427.13

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
118.55		671.78		790.33

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Exell Companies

Mailing Address  
P.O. Box 5393

City	State	Zip Code	001
Jackson	MS	39296-	

Purpose of Disbursement:  
-Water/Office Supplies

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

166657.00

Date 11 / 20 / 2009

Transaction ID: H491215.E21872

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.37		24.78		29.15

**B. Full Name (Last, First, Middle Initial)**  
AT&T

Mailing Address  
P.O. Box 105262

City	State	Zip Code	001
Atlanta	GA	30348-5262	

Purpose of Disbursement:  
-Telephone

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

167589.28

Date 11 / 20 / 2009

Transaction ID: H491215.E21873

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
86.08		487.79		573.87

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

Mailing Address  
PO Box 9001949

City	State	Zip Code	001
Louisville	KY	40290-1949	

Purpose of Disbursement:  
-Utilities

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

166708.28

Date 11 / 20 / 2009

Transaction ID: H491215.E21874

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.69		43.59		51.28

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.14		556.16		654.30

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Entergy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 8105			Allocated Activity or Event Year-To-Date 165790.61	
City Baton Rouge	State LA	Zip Code 70891-8105	Date <input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>	
Purpose of Disbursement: -Electricity			Transaction ID: H491215.E21875	
Activity or Event Identifier: ADMINISTRATION B 41			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.18		318.32		374.50

<b>B. Full Name (Last, First, Middle Initial)</b> Federal Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 660481			Allocated Activity or Event Year-To-Date 165839.10	
City Dallas	State TX	Zip Code 75266-0481	Date <input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>	
Purpose of Disbursement: -Postage/Shipping			Transaction ID: H491215.E21876	
Activity or Event Identifier: ADMINISTRATION B 41			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.27		41.22		48.49

<b>C. Full Name (Last, First, Middle Initial)</b> Office Products Plus, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 13827			Allocated Activity or Event Year-To-Date 166574.35	
City Jackson	State MS	Zip Code 39236-	Date <input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>	
Purpose of Disbursement: -Office Supplies			Transaction ID: H491215.E21877	
Activity or Event Identifier: ADMINISTRATION B 41			Category/Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.49		25.43		29.92

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.94		384.97		452.91

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Expo Motors, Inc.

Mailing Address  
446 Western Ave

City	State	Zip Code	
Brighton	MA	02135-	002

Purpose of Disbursement:  
- Taxi Fares

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**002- Taxi Fares

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

Allocated Activity or Event Year-To-Date  
100.00

Date   /   /      
**Transaction ID:** H491215.E21883

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.00		85.00		100.00

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

Mailing Address  
10 Park Plaza, Suite 3910

City	State	Zip Code	
Boston	MA	02116-	

Purpose of Disbursement:  
Metro Train Pass

Activity or Event Identifier:  
ADMINISTRATION B 41  
**[MEMO ITEM]**Metro Train Pass

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

Allocated Activity or Event Year-To-Date  
21.00

Date   /   /      
**Transaction ID:** H491215.E21884

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.15		17.85		21.00

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

Mailing Address  
6628 Lake Glen Dr.

City	State	Zip Code	
Jackson	MS	39213-	001

Purpose of Disbursement:  
-Building Cleaning & Maintenance

Activity or Event Identifier:  
ADMINISTRATION B 41

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

Allocated Activity or Event Year-To-Date  
168279.28

Date   /   /      
**Transaction ID:** H491215.E21888

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.50		212.50		250.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.50		212.50		250.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Key Merchant Services LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7207 Chapman Highway			Allocated Activity or Event Year-To-Date 157896.29	
City	State	Zip Code	Date <input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>	
Knoxville	TN	37920-6609	Transaction ID: H491215.E21954	
Purpose of Disbursement: -Merchant Fees			Category/Type 001	
Activity or Event Identifier: ADMINISTRATION B 41				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.10		68.58		80.68

<b>B. Full Name (Last, First, Middle Initial)</b> FP Mailing Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Dept. 4272			Allocated Activity or Event Year-To-Date 158506.29	
City	State	Zip Code	Date <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>	
Elgin	IL	60122-4272	Transaction ID: H491215.E21955	
Purpose of Disbursement: -Postage			Category/Type 001	
Activity or Event Identifier: ADMINISTRATION B 41				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

<b>C. Full Name (Last, First, Middle Initial)</b> Aristotle Publishing, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 205 Pennsylvania Avenue, SE			Allocated Activity or Event Year-To-Date 167598.28	
City	State	Zip Code	Date <input type="text" value="11"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>	
Washington	DC	20003-1164	Transaction ID: H491215.E21956	
Purpose of Disbursement: -Merchant Fees			Category/Type 001	
Activity or Event Identifier: ADMINISTRATION B 41				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.35		7.65		9.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
88.45		501.23		589.68

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.** Full Name (Last, First, Middle Initial)  
FP Mailing Solutions

Mailing Address  
Dept. 4272

City	State	Zip Code
Elgin	IL	60122-4272

001  
Category/  
Type

Purpose of Disbursement:  
-Postage

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

168029.28

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	9

Transaction ID: H491215.E21957

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.00		187.00		220.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.00		187.00		220.00

**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
1855.45	10514.22	12369.67