

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
SOUTHERN STATES PAC

ADDRESS (number and street) **POST OFFICE BOX 905**
 Check if different than previously reported. (ACC) **TUPELO MS 38802**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00778308 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / 2021 through / / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
SOILEAU, JACQUE, , ,
Type or Print Name of Treasurer

Signature of Treasurer SOILEAU, JACQUE, , , [Electronically Filed] Date / / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

SOUTHERN STATES PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="10000.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="26208.34"/>	<input type="text" value="36208.34"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="36208.34"/>	<input type="text" value="36208.34"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15071.35"/>	<input type="text" value="15071.35"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="21136.99"/>	<input type="text" value="21136.99"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

SOUTHERN STATES PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20000.00	20000.00
(ii) Unitemized	208.34	208.34
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	20208.34	20208.34
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	6000.00	16000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	26208.34	36208.34
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	26208.34	36208.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	26208.34	36208.34

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	15071.35	15071.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15071.35	15071.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15071.35	15071.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15071.35	15071.35

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	26208.34	36208.34
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26208.34	36208.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	15071.35	15071.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15071.35	15071.35

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 16
	(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

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)
SOUTHERN STATES PAC

A. ADCOCK, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 KINGSLEY ROAD SOUTHEAST
 City VIENNA State VA Zip Code 22180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROSSROADS STRATEGIES Occupation (for Individual) EVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 03 / 2021
Transaction ID : SA11AI.4154
 Amount of Each Receipt this Period 1000.00
 Memo Item
EARMARKED THROUGH WINRED

B. BARBOUR, HALEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 DOGWOOD DRIVE
 City YAZOO CITY State MS Zip Code 39194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BGR GROUP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 12 / 28 / 2021
Transaction ID : SA11AI.4169
 Amount of Each Receipt this Period 2000.00
 Memo Item

C. BEDWELL, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 NEW YORK AVENUE
 City WASHINGTON State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BGR GROUP Occupation (for Individual) ASSOCIATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 13 / 2021
Transaction ID : SA11AI.4166
 Amount of Each Receipt this Period 1000.00
 Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....▶	4000.00
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 OF 16
	<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)
SOUTHERN STATES PAC

A. BLUM, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2939 VAN NESS STREET NW #221
 City WASHINGTON State DC Zip Code 20008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRATEGIC COALITIONS AND INITI Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 03 / 2021
Transaction ID : SA11AI.4157
 Amount of Each Receipt this Period 2000.00
 Memo Item

B. BROOKS, B JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5625 JAMES GUNNELL LANE
 City ALEXANDRIA State VA Zip Code 22310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS AND REESE LP Occupation (for Individual) CHAIR EXECUTIVE COMMITTEE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 03 / 2021
Transaction ID : SA11AI.4159
 Amount of Each Receipt this Period 2000.00
 Memo Item

C. GREEN, JOHNSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 432 TURNBERRY COURT
 City OXFORD State MS Zip Code 38655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROSSROADS STRATEGIES Occupation (for Individual) CONSULTING AND GOVT RELATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 23 / 2021
Transaction ID : SA11AI.4155
 Amount of Each Receipt this Period 1000.00
 Memo Item
 EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 5000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
	<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)
SOUTHERN STATES PAC

A. GRIFFITH, G O, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 OAKLAND TERRACE
 City ALEXANDRIA State VA Zip Code 22302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BGR GROUP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2021
Transaction ID : SA11AI.4167
 Amount of Each Receipt this Period
 2000.00
 Memo Item

B. HERSON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8709 BURNING TREE ROAD
 City BETHESDA State MD Zip Code 20817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN DEFENSE INTERNATIONAL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2021
Transaction ID : SA11AI.4161
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 EARMARKED THROUGH WINRED

C. HIPP JR, VON D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 809 N QUAKER LANE
 City ALEXANDRIA State VA Zip Code 22302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN DEFENSE INTERNATIONAL Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2021
Transaction ID : SA11AI.4168
 Amount of Each Receipt this Period
 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SOUTHERN STATES PAC

A. RAWLSON, JON BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2069 COULSON ALY
 City ORLANDO State FL Zip Code 32814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARMORY HILL ADVOCATES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 03 / 2021
Transaction ID : SA11AI.4156
 Amount of Each Receipt this Period 2000.00
 Memo Item

B. RICHARDS, JAMES D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20338 CLIFTONS POINT STREET
 City POTOMAC FALLS State VA Zip Code 20165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNERSTONE GOVERNMENT AFFAIRS Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 03 / 2021
Transaction ID : SA11AI.4158
 Amount of Each Receipt this Period 2000.00
 Memo Item

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4000.00
TOTAL This Period (last page this line number only).....▶	20000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SOUTHERN STATES PAC

A. ELBIT SYSTEMS OF AMERICA LLC POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4700 MARINE CREEK PARKWAY
 City FORT WORTH State TX Zip Code 76179
 FEC ID number of contributing federal political committee. **C** C00437566
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 05 / 2021**
Transaction ID : SA11C.4162
 Amount of Each Receipt this Period 500.00
 Memo Item

B. ELBIT SYSTEMS OF AMERICA LLC POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4700 MARINE CREEK PARKWAY
 City FORT WORTH State TX Zip Code 76179
 FEC ID number of contributing federal political committee. **C** C00437566
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 05 / 2021**
Transaction ID : SA11C.4163
 Amount of Each Receipt this Period 500.00
 Memo Item

C. MISSISSIPPI FARM BUREAU FEDERATION FURTHERING AGRICULTURE FOR RURAL MISSISSIPPIANS FUND PA
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 MAINE AVE, SW 7TH FLOOR
 City WASHINGTON State DC Zip Code 20024
 FEC ID number of contributing federal political committee. **C** C00730903
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 28 / 2021**
Transaction ID : SA11C.4170
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6000.00
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 11 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SOUTHERN STATES PAC

A. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2021
Transaction ID : SA11C.4181
 Amount of Each Receipt this Period
 5708.34
 Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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

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

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

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

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	6000.00

**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)

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

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NAME OF COMMITTEE (In Full)
SOUTHERN STATES PAC

Full Name (Last, First, Middle Initial) A. FUNDRAISING INC		Date of Disbursement MM / DD / YYYY 07 / 12 / 2021
Mailing Address 800 WEST 47TH STREET STE 200		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4126
City KANSAS CITY	State MO	Zip Code 64112
Purpose of Disbursement CONSULTANT - FUNDRAISER		Amount of Each Disbursement this Period [REDACTED] 3300.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. FUNDRAISING INC		Date of Disbursement MM / DD / YYYY 07 / 15 / 2021
Mailing Address 800 WEST 47TH STREET STE 200		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4131
City KANSAS CITY	State MO	Zip Code 64112
Purpose of Disbursement CONSULTANT - FUNDRAISER		Amount of Each Disbursement this Period [REDACTED] 1828.09
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. FUNDRAISING INC		Date of Disbursement MM / DD / YYYY 08 / 04 / 2021
Mailing Address 800 WEST 47TH STREET STE 200		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4136
City KANSAS CITY	State MO	Zip Code 64112
Purpose of Disbursement CONSULTANT - FUNDRAISER		Amount of Each Disbursement this Period [REDACTED] 2402.26
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 001	

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

7530.35

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"/> 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)
SOUTHERN STATES PAC

Full Name (Last, First, Middle Initial) A. FUNDRAISING INC		Date of Disbursement MM / DD / YYYY 09 / 03 / 2021
Mailing Address 800 WEST 47TH STREET STE 200		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4138 Amount of Each Disbursement this Period [REDACTED] 1650.00
City KANSAS CITY	State MO	Zip Code 64112
Purpose of Disbursement CONSULTANT - FUNDRAISER		001 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. FUNDRAISING INC		Date of Disbursement MM / DD / YYYY 10 / 23 / 2021
Mailing Address 800 WEST 47TH STREET STE 200		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4140 Amount of Each Disbursement this Period [REDACTED] 1650.00
City KANSAS CITY	State MO	Zip Code 64112
Purpose of Disbursement CONSULTANT - FUNDRAISER		001 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. FUNDRAISING INC		Date of Disbursement MM / DD / YYYY 11 / 03 / 2021
Mailing Address 800 WEST 47TH STREET STE 200		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4148 Amount of Each Disbursement this Period [REDACTED] 1650.00
City KANSAS CITY	State MO	Zip Code 64112
Purpose of Disbursement CONSULTANT - FUNDRAISER		001 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

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

[REDACTED] 4950.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
SOUTHERN STATES PAC

Full Name (Last, First, Middle Initial) A. FUNDRAISING INC		Date of Disbursement MM / DD / YYYY 12 / 13 / 2021
Mailing Address 800 WEST 47TH STREET STE 200		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4152 Amount of Each Disbursement this Period 1650.00
City KANSAS CITY	State MO	Zip Code 64112
Purpose of Disbursement CONSULTANT - FUNDRAISER		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. SOILEAU, JACQUE, , ,		Date of Disbursement MM / DD / YYYY 08 / 04 / 2021
Mailing Address 300 OVERLOOK DRIVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4134 Amount of Each Disbursement this Period 361.25
City BRANDON	State MS	Zip Code 39042
Purpose of Disbursement ACCOUNTING SERVICES		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. SOILEAU, JACQUE, , ,		Date of Disbursement MM / DD / YYYY 11 / 03 / 2021
Mailing Address 300 OVERLOOK DRIVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4142 Amount of Each Disbursement this Period 63.75
City BRANDON	State MS	Zip Code 39042
Purpose of Disbursement ACCOUNTING SERVICES		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

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

2075.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SOUTHERN STATES PAC

Full Name (Last, First, Middle Initial) A. SOILEAU, JACQUE, , ,		Date of Disbursement MM / DD / YYYY 11 / 03 / 2021	
Mailing Address 300 OVERLOOK DRIVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4144 Amount of Each Disbursement this Period [REDACTED] 63.75	
City BRANDON	State MS	Zip Code 39042	Category/ Type 001
Purpose of Disbursement ACCOUNTING SERVICES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. SOILEAU, JACQUE, , ,		Date of Disbursement MM / DD / YYYY 11 / 03 / 2021	
Mailing Address 300 OVERLOOK DRIVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4146 Amount of Each Disbursement this Period [REDACTED] 42.50	
City BRANDON	State MS	Zip Code 39042	Category/ Type 001
Purpose of Disbursement ACCOUNTING SERVICES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. SOILEAU, JACQUE, , ,		Date of Disbursement MM / DD / YYYY 12 / 13 / 2021	
Mailing Address 300 OVERLOOK DRIVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4150 Amount of Each Disbursement this Period [REDACTED] 42.50	
City BRANDON	State MS	Zip Code 39042	Category/ Type 001
Purpose of Disbursement ACCOUNTING SERVICES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 148.75
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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)
SOUTHERN STATES PAC

A. WINRED TECHNICAL SERVICES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BOULEVARD SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PROCESSING FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2022

Primary General Other (specify) ▼

Date of Disbursement: 12 / 31 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4182

Amount of Each Disbursement this Period: 218.50

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	218.50
TOTAL This Period (last page this line number only).....▶	14922.60