



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Gene Taylor for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	83040.86	83040.86
(b) Total Contribution Refunds (from Line 20(d)) .....		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	83040.86	83040.86
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	33599.27	33599.27
(b) Total Offsets to Operating Expenditures (from Line 14).....		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	33599.27	33599.27
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	49241.59	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	5503.6	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Gene Taylor for Congress**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	77701.61	77701.61
(ii) Unitemized.....	5339.25	5339.25
(iii) TOTAL of contributions from individuals ▶	83040.86	83040.86
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	83040.86	83040.86
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....		
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....		
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	83040.86	83040.86

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	33599.27	33599.27
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans .....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS .....	200	200
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	33799.27	33799.27

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	83040.86
25. SUBTOTAL (add Line 23 and Line 24).....	83040.86
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	33799.27
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	49241.59

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Gene Taylor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charles B Benvenuti**

Mailing Address 163 Felicity St

City State Zip Code  
Bay St Louis MS 39520

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

Name of Employer Occupation  
Benvenuti CPA Business Owner/CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 06 / 2014

**Transaction ID : SA11Ai-CN74**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**George R Boddie**

Mailing Address 4443 Garland Ln

City State Zip Code  
Pass Christian MS 39571-5704

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

Name of Employer Occupation  
N/A Self Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11Ai-CN146**

Amount of Each Receipt this Period  
1000

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

Mailing Address 3760 N. Upland Street

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Duetto Group President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : SA11Ai-CN116**

Amount of Each Receipt this Period  
1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

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

Mailing Address PO Box 3269

City State Zip Code  
Gulfport MS 39505

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

Name of Employer Occupation  
Health Services Inc. Health Care Worker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014

**Transaction ID : SA11Ai-CN96**

Amount of Each Receipt this Period  
2600

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

Mailing Address PO Box 3269

City State Zip Code  
Gulfport MS 39505

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

Name of Employer Occupation  
Health Services Inc. Health Care Worker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014

**Transaction ID : SA11Ai-CN95**

Amount of Each Receipt this Period  
2600

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

Mailing Address PO Box 25

City State Zip Code  
Des Allemands LA 70030

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

Name of Employer Occupation  
Otto Candies LLC President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : SA11Ai-CN131**

Amount of Each Receipt this Period  
2600

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

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

7800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

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

Mailing Address 109 Ranch St

City State Zip Code  
Bay St Louis MS 39520

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

Name of Employer Occupation  
N/A Retired Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**301.61**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2014**

**Transaction ID : SA11Ai-CN1121**

Amount of Each Receipt this Period  
**301.61**

In-Kind Received Bay St. Louis Office Space - 21-31 March 2014

**B.** Full Name (Last, First, Middle Initial)  
**James Allen Churchill**

Mailing Address 4030 Nicola Rd

City State Zip Code  
Kiln MS 39556

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 08 / 2014**

**Transaction ID : SA11Ai-CN106**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Thomas B Crowley Jr**

Mailing Address 151 Hazel Lane

City State Zip Code  
Piedmont CA 94611

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

Name of Employer Occupation  
Crowley Maritime Corporation CEO COO COB President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 26 / 2014**

**Transaction ID : SA11Ai-CN138**

Amount of Each Receipt this Period  
**1000**

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

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

**1801.61**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

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

Mailing Address 11638 Bluff Ln

City State Zip Code  
Gulfport MS 39503

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

Name of Employer Occupation  
Gulf Coast Shipyard Group CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : SA11Ai-CN123**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Paul J Delcambre Jr**

Mailing Address 18 Old Oak Ln

City State Zip Code  
Gulfport MS 39503-6210

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

Name of Employer Occupation  
Balch & Bingham LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11Ai-CN152**

Amount of Each Receipt this Period  
**300**

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

Mailing Address 37 Greenbriar Dr

City State Zip Code  
Gulfport MS 39507

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

Name of Employer Occupation  
ABC Rental Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 24 / 2014**

**Transaction ID : SA11Ai-CN12**

Amount of Each Receipt this Period  
**250**

Paypal Pro TransactionId# 94738029MA1424

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

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

**3150.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Barry T Dreyfus Jr**

Mailing Address 105 Wisteria Dr

City Pass Christian State MS Zip Code 39571

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

Name of Employer United States Marine Inc. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : SA11Ai-CN79**

Amount of Each Receipt this Period  
**2600**

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

Mailing Address 10011 Lorraine Road

City Gulfport State MS Zip Code 39503

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

Name of Employer Homemaker Occupation NA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 05 / 2014**

**Transaction ID : SA11Ai-CN94**

Amount of Each Receipt this Period  
**2600**

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

Mailing Address 11320 Roane Street  
PO Box 6091

City D'Iberville State MS Zip Code 39540

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

Name of Employer North Bay Seafood Occupation Seafood / Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : SA11Ai-CN86**

Amount of Each Receipt this Period  
**250**

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

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

**5450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

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

Mailing Address 2952 Highway 589

City Hattiesburg State MS Zip Code 39402

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

Name of Employer Presto-X Occupation District Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2014**

**Transaction ID : SA11Ai-CN114**

Amount of Each Receipt this Period  
**2600**

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

Mailing Address 4837 Alphonse Drive

City Metairie State LA Zip Code 70006

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

Name of Employer FOX Occupation Sales Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 26 / 2014**

**Transaction ID : SA11Ai-CN136**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 3102 Pike 93 North

City Summit State MS Zip Code 39666

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11Ai-CN149**

Amount of Each Receipt this Period  
**500**

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

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

**3350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Patrick Finnegan**

Mailing Address 190 Ollie Williams Rd

City Hattiesburg State MS Zip Code 39401-8717

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

Name of Employer FINLO Construction Inc. Occupation General Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 17 / 2014**

**Transaction ID : SA11Ai-CN129**

Amount of Each Receipt this Period  
**2000**

**B.** Full Name (Last, First, Middle Initial)  
**Charles T Finnegan**

Mailing Address 1200 Velma St

City Hattiesburg State MS Zip Code 39402

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

Name of Employer FINLO Construction Inc. Occupation Safety Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 17 / 2014**

**Transaction ID : SA11Ai-CN130**

Amount of Each Receipt this Period  
**2600**

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

Mailing Address 22 Nottoway Dr

City Picayune State MS Zip Code 39466

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

Name of Employer Self Employed Occupation Civil Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 16 / 2014**

**Transaction ID : SA11Ai-CN127**

Amount of Each Receipt this Period  
**500**

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

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

**5100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**George J Fowler III**

Mailing Address 919 Webster Street

City State Zip Code  
New Orleans LA 70118

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 26 / 2014**

**Transaction ID : SA11Ai-CN135**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Richard E Gallot**

Mailing Address PO Box 1458

City State Zip Code  
Biloxi MS 39533

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

Name of Employer Occupation  
Golden Gulf Coast Packing Co. Seafood Business / Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 05 / 2014**

**Transaction ID : SA11Ai-CN103**

Amount of Each Receipt this Period  
**2500**

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

Mailing Address 3627 Quave Road

City State Zip Code  
Ocean Springs MS 39564

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 06 / 2014**

**Transaction ID : SA11Ai-CN93**

Amount of Each Receipt this Period  
**1000**

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

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

**6100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Wally H Gallot**

Mailing Address **PO Box 355**

City **Biloxi** State **MS** Zip Code **39533**

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

Name of Employer **Golden Gulf Coast Packing Co.** Occupation **Seafood Business Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 06 / 2014**

**Transaction ID : SA11Ai-CN85**

Amount of Each Receipt this Period  
**2000**

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

Mailing Address **PO Box 1191**

City **Biloxi** State **MS** Zip Code **39533**

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

Name of Employer **C.F. Gallott & Sons Seafood** Occupation **Seafood Business/Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 05 / 2014**

**Transaction ID : SA11Ai-CN89**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address **PO Box 1191**

City **Biloxi** State **MS** Zip Code **39533**

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

Name of Employer **C.F. Gallott & Sons Seafood** Occupation **Seafood Business/Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 05 / 2014**

**Transaction ID : SA11Ai-CN90**

Amount of Each Receipt this Period  
**1000**

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

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

**4000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

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

Mailing Address PO Box 1191

City: Biloxi State: MS Zip Code: 39533

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

Name of Employer: C.F. Gallott & Sons Seafood Occupation: Seafood Business/Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 03 / 05 / 2014

**Transaction ID : SA11Ai-CN88**

Amount of Each Receipt this Period: 1000

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

Mailing Address PO Box 1191

City: Biloxi State: MS Zip Code: 39533

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

Name of Employer: C.F. Gallott & Sons Seafood Occupation: Seafood Business/Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 03 / 05 / 2014

**Transaction ID : SA11Ai-CN91**

Amount of Each Receipt this Period: 1000

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

Mailing Address PO Box 1191

City: Biloxi State: MS Zip Code: 39533

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

Name of Employer: C.F. Gallott & Sons Seafood Occupation: Seafood Business/Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 03 / 05 / 2014

**Transaction ID : SA11Ai-CN92**

Amount of Each Receipt this Period: 1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lucien Marion Gex III**

Mailing Address 73670 Diamondhead Dr N

City State Zip Code  
Diamondhead MS 39525

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

Name of Employer Occupation  
Hancock County Port and Harbor Gov & Relations Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 26 / 2014

**Transaction ID : SA11Ai-CN142**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Evans M Hadden**

Mailing Address 4601 Richland Ave

City State Zip Code  
Metairie LA 70002

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

Name of Employer Occupation  
Standard Crane & Hoist LLC President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : SA11Ai-CN112**

Amount of Each Receipt this Period  
1000

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

Mailing Address PO Drawer 1287

City State Zip Code  
Pascagoula MS 39568

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

Name of Employer Occupation  
Cumbest Hunter & McCormick P.A. Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 05 / 2014

**Transaction ID : SA11Ai-CN97**

Amount of Each Receipt this Period  
1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

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

Mailing Address PO Box 1437

City State Zip Code  
Ocean Spings MS 39566

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

Name of Employer Occupation  
Lane Construction Co Of MS Inc. Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 09 / 2014

**Transaction ID : SA11Ai-CN107**

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**Wendell G Lindsay Jr**

Mailing Address 6874 Chandler Dr.

City State Zip Code  
Baton Rouge LA 70808

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

Name of Employer Occupation  
Lindsay & Marcel Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 01 / 2014

**Transaction ID : SA11Ai-CN76**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Rory E Mac Dowell**

Mailing Address 204 Steiner Road

City State Zip Code  
Lafayette LA 70508

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

Name of Employer Occupation  
Safetime of Louisiana LLC Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 15 / 2014

**Transaction ID : SA11Ai-CN122**

Amount of Each Receipt this Period  
1000

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

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

Mailing Address 605 Rue Dauphine

City State Zip Code  
Ocean Springs MS 39564

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

Name of Employer Occupation  
Rex Distributing Co. President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11Ai-CN159**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**James E Marlowe**

Mailing Address 121 Waveland Ave

City State Zip Code  
Waveland MS 39576

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

Name of Employer Occupation  
JEM LLC Construction Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014

**Transaction ID : SA11Ai-CN98**

Amount of Each Receipt this Period  
2600

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

Mailing Address 121 Waveland Ave

City State Zip Code  
Waveland MS 39576

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014

**Transaction ID : SA11Ai-CN99**

Amount of Each Receipt this Period  
2600

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

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

6200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

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

Mailing Address PO Box 865668

City: Tuscaloosa State: AL Zip Code: 35486

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

Name of Employer: Oh La La Gulfshors AL Occupation: Sales Person

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **2600**

Date of Receipt: 03 / 13 / 2014

**Transaction ID : SA11Ai-CN108**

Amount of Each Receipt this Period: **2600**

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

Mailing Address 306 Kensington Dr

City: Hattiesburg State: MS Zip Code: 39402

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

Name of Employer: N/A Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: 03 / 13 / 2014

**Transaction ID : SA11Ai-CN113**

Amount of Each Receipt this Period: **500**

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

Mailing Address 100 Polymer

City: Picayune State: MS Zip Code: 39466

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

Name of Employer: Rheogistics LLC Occupation: President & COO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1000**

Date of Receipt: 03 / 06 / 2014

**Transaction ID : SA11Ai-CN133**

Amount of Each Receipt this Period: **1000**

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

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

**4100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

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

Mailing Address 5579 Diamondhead Dr E

City State Zip Code  
Diamondhead MS 39525

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

Name of Employer Occupation  
Rheogistics LLC Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 06 / 2014

**Transaction ID : SA11Ai-CN134**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Jon Benson Rivera**

Mailing Address 3227 Dijon Ave

City State Zip Code  
Ocean Springs MS 39564

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : SA11Ai-CN157**

Amount of Each Receipt this Period  
200

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James E Sablich Jr**

Mailing Address 10441 Lemoyne Blvd.

City State Zip Code  
D'Iberville MS 39540

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

Name of Employer Occupation  
Sablich Enterprises Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 06 / 2014

**Transaction ID : SA11Ai-CN87**

Amount of Each Receipt this Period  
500

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Luke Michael Scianna Sr**

Mailing Address 2074 Scianna Ln

City State Zip Code  
Bay St Louis MS 39520

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 26 / 2014

**Transaction ID : SA11Ai-CN139**

Amount of Each Receipt this Period  
1200

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

Mailing Address 353 Ave NE

City State Zip Code  
Atlanta GA 30307

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

Name of Employer Occupation  
Southern Co. Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 11 / 2014

**Transaction ID : SA11Ai-CN117**

Amount of Each Receipt this Period  
2600

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

Mailing Address 353 Ave NE

City State Zip Code  
Atlanta GA 30307

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 11 / 2014

**Transaction ID : SA11Ai-CN128**

Amount of Each Receipt this Period  
2600

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

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

6400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jerry St. Pe**

Mailing Address 806 Powells Point Drive

City State Zip Code  
Gautier MS 39553

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014

**Transaction ID : SA11Ai-CN102**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Dean E Taylor**

Mailing Address 6109 Penny Ln

City State Zip Code  
Kiln MS 39556

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

Name of Employer Occupation  
N/A Retired Businessman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014

**Transaction ID : SA11Ai-CN100**

Amount of Each Receipt this Period  
2600

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

Mailing Address 6109 Penny Ln

City State Zip Code  
Kiln MS 39556

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014

**Transaction ID : SA11Ai-CN101**

Amount of Each Receipt this Period  
2600

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

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

6200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Ann Taylor**

Mailing Address 6109 Penny Ln

City State Zip Code  
Kiln MS 39556

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

Name of Employer Occupation  
N/A Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 14 / 2014

**Transaction ID : SA11Ai-CN115**

Amount of Each Receipt this Period  
2600

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

Mailing Address 123 Pinnacle Circle

City State Zip Code  
Brandon MS 39047

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

Name of Employer Occupation  
The William Morris Group P.A. Insurance Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 21 / 2014

**Transaction ID : SA11Ai-CN7**

Amount of Each Receipt this Period  
500  
Paypal Pro TransactionId# 4P652540P39810

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Charles G Wood Sr**

Mailing Address 1007 E 2nd St

City State Zip Code  
Pass Christian MS 39571

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

Name of Employer Occupation  
Self Employed Doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : SA11Ai-CN158**

Amount of Each Receipt this Period  
250

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

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

3350.00

77701.61

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Trail Blazer Campaign Services Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address 620 Mendelssohn Avenue N Suite 186		Amount of Each Disbursement this Period 1000.00
City Minneapolis	State MN	Zip Code 55427
Purpose of Disbursement Campaign Software Expense	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX5	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Campaign Software Expense
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Peoples Bank</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2014
Mailing Address 408 Highway 90 East		Amount of Each Disbursement this Period 242.67
City Bay St. Louis	State MS	Zip Code 39520
Purpose of Disbursement Payroll Check Order	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX37	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Payroll Check Order
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Peoples Bank</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2014
Mailing Address 408 Highway 90 East		Amount of Each Disbursement this Period 52.80
City Bay St. Louis	State MS	Zip Code 39520
Purpose of Disbursement Endorsement Stamp Purchase	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX38	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Endorsement Stamp Purchase
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1295.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Peoples Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 408 Highway 90 East		Amount of Each Disbursement this Period 21.75
City Bay St. Louis	State MS	Zip Code 39520
Purpose of Disbursement Deposit Slip Book	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX39	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Deposit Slip Book
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Peoples Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 408 Highway 90 East		Amount of Each Disbursement this Period 48.00
City Bay St. Louis	State MS	Zip Code 39520
Purpose of Disbursement Check Book 7 Ring Binder	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Check Book 7 Ring Binder
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Micah Elkins</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 1 Woods Place		Amount of Each Disbursement this Period 516.24
City Bay Saint Louis	State MS	Zip Code 39520
Purpose of Disbursement Labor & Mileage	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX10	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Labor & Mileage
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	585.99
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Foster Film</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014
Mailing Address 2346 Park Place Drive		Amount of Each Disbursement this Period 16500.00
City Gulfport	State MS	
Zip Code 39507	Purpose of Disbursement Media Retainer for Productions	<b>Transaction ID : SB17-EX1</b>
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Media Retainer for Productions
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MS Secretary Of State</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014
Mailing Address PO Box 136		Amount of Each Disbursement this Period 1100.00
City Jackson	State MS	
Zip Code 39205	Purpose of Disbursement 4th Congressional District Voter Files	<b>Transaction ID : SB17-EX6</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	4th Congressional District Voter Files
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hattiesburg Intermodal Facility</b>		Date of Disbursement MM / DD / YYYY 03 / 19 / 2014
Mailing Address 308 Newman Street		Amount of Each Disbursement this Period 300.00
City Hattiesburg	State MS	
Zip Code 39401	Purpose of Disbursement Building Rental Fee	<b>Transaction ID : SB17-EX8</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Building Rental Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	17900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 30			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Biloxi Visitor's Center</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 1050 Beach Boulevard PO Box 775		Amount of Each Disbursement this Period 400.00
City Biloxi	State MS	
Zip Code 39533	Purpose of Disbursement Campaign Kickoff Building Rental Fee	<b>Transaction ID : SB17-EX9</b>
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Campaign Kickoff Building Rental Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Adair Jones</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 2036 E Pass Road		Amount of Each Disbursement this Period 500.00
City Gulfport	State MS	
Zip Code 39507	Purpose of Disbursement Web Site Ranking & Set-Up	<b>Transaction ID : SB17-EX11</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Web Site Ranking & Set-Up
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Adair Jones</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 2036 E Pass Road		Amount of Each Disbursement this Period 1000.00
City Gulfport	State MS	
Zip Code 39507	Purpose of Disbursement Web Maintenance & Service 3/16/14-3/31/14	<b>Transaction ID : SB17-EX12</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Web Maintenance & Service 3/16/14-3/31/14
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Drew Boxx</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 410 Pecan Park		Amount of Each Disbursement this Period 736.70
City State Zip Code Bay St. Louis MS 39520	Purpose of Disbursement Office Equipment Purchase	
Candidate Name	Category/Type 001	Transaction ID : SB17-EX13
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Office Equipment Purchase	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Magnolia Printing &amp; Copying</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 1829 25th Avenue		Amount of Each Disbursement this Period 791.80
City State Zip Code Gulfport MS 39501	Purpose of Disbursement Invoice 73761 - Campaign Push Cards	
Candidate Name	Category/Type 004	Transaction ID : SB17-EX15
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Invoice 73761 - Campaign Push Cards	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Southern Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address PO Box 3838		Amount of Each Disbursement this Period 531.35
City State Zip Code Bay St. Louis MS 39521	Purpose of Disbursement Invoice 3808 - Bumper Stickers	
Candidate Name	Category/Type 004	Transaction ID : SB17-EX16
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Invoice 3808 - Bumper Stickers	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2059.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Southern Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address PO Box 3838		Amount of Each Disbursement this Period 3172.76
City Bay St. Louis	State MS Zip Code 39521	
Purpose of Disbursement Invoice 3809 - Yard Signs	Category/Type 004	<b>Transaction ID : SB17-EX17</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Invoice 3809 - Yard Signs
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Southern Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address PO Box 3838		Amount of Each Disbursement this Period 6153.85
City Bay St. Louis	State MS Zip Code 39521	
Purpose of Disbursement Invoice 3810 - Yard Signs	Category/Type 004	<b>Transaction ID : SB17-EX18</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Invoice 3810 - Yard Signs
State: District:		

Full Name (Last, First, Middle Initial) <b>c. John James Chilimigras</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 109 Ranch St		Amount of Each Disbursement this Period 301.61
City Bay St Louis	State MS Zip Code 39520	
Purpose of Disbursement IN-KIND RECEIVED Bay St. Louis Office Space - 21-31 March 2014	Category/Type	<b>Transaction ID : SB17-CN1121</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	In-Kind Received Bay St. Louis Office Space - 21-31 March 2014
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9628.22
<b>TOTAL</b> This Period (last page this line number only).....	33369.53

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 30			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gene Taylor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wounded Minute Men Of Mississippi</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 14 / 2014</b>
Mailing Address PO Box 328		Amount of Each Disbursement this Period <b>200.00</b>
City Purvis State MS Zip Code 39475	Purpose of Disbursement Donation	<b>Transaction ID : SB21-EX4</b>
Candidate Name	Category/Type <b>012</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Donation
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>200.00</b>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 30 OF 30
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Gene Taylor for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Benvenuti CPA P.A.</b>	Nature of Debt (Purpose): Invoice: Post Office Box Rental Fee
Mailing Address PO Box 2639	
City State Zip Code Bay St. Louis MS 39521	

Outstanding Balance Beginning This Period [ .00 ]	<b>Transaction ID : SD10-INV19</b>	
Amount Incurred This Period [ 247.00 ]	Payment This Period [ .00 ]	Outstanding Balance at Close of This Period [ 247.00 ]

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Benvenuti CPA P.A.</b>	Nature of Debt (Purpose): Invoice: Invoice 20519 - Professional Accounting Fees
Mailing Address PO Box 2639	
City State Zip Code Bay St. Louis MS 39521	

Outstanding Balance Beginning This Period [ .00 ]	<b>Transaction ID : SD10-INV20</b>	
Amount Incurred This Period [ 4850.00 ]	Payment This Period [ .00 ]	Outstanding Balance at Close of This Period [ 4850.00 ]

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Speedy Printing</b>	Nature of Debt (Purpose): Invoice: Invoice 14675 - 8000 Election Cards
Mailing Address 9919 A Hwy 603	
City State Zip Code Bay St. Louis MS 39520	

Outstanding Balance Beginning This Period [ .00 ]	<b>Transaction ID : SD10-INV26</b>	
Amount Incurred This Period [ 406.60 ]	Payment This Period [ .00 ]	Outstanding Balance at Close of This Period [ 406.60 ]

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	[ 5503.60 ]
2) <b>TOTALS</b> This Period (last page this line number only) .....	[ 5503.60 ]
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	[ 0.00 ]
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	[ 5503.60 ]