

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Brad Morris for Congress

ADDRESS (number and street)

PO Box 2136

Check if different than previously reported. (ACC)

Oxford

MS

38655

2. FEC IDENTIFICATION NUMBER ▼

C C00513788

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MS

01

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)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

MM / DD / YYYY
11 / 06 / 2012

DD / YYYY

YYYY

in the State of

MS

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

DD / YYYY

YYYY

in the State of

5. Covering Period

MM / DD / YYYY
10 / 01 / 2012

DD / YYYY

YYYY

through

MM / DD / YYYY
10 / 17 / 2012

DD / YYYY

YYYY

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

Type or Print Name of Treasurer Robert T. Gray

Signature of Treasurer Robert T. Gray

[Electronically Filed]

Date

MM / DD / YYYY
10 / 25 / 2012

DD / YYYY

YYYY

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Brad Morris for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	2850.00	76542.49
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	2850.00	76542.49
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	35436.83	189262.10
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	35436.83	189262.10
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3853.68	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	116578.12	

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

Brad Morris 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).....	850.00	27575.01
(ii) Unitemized	2000.00	23102.48
(iii) TOTAL of contributions from individuals	2850.00	67792.49
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	8750.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	2850.00	76542.49
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	18473.64	116578.12
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	18473.64	116578.12
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	21323.64	193120.61

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	35436.83	189262.10
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	35436.83	189262.10

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	17966.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	21323.64
25. SUBTOTAL (add Line 23 and Line 24).....	39290.51
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35436.83
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3853.68

**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 15
	<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)
Brad Morris for Congress

A. Full Name (Last, First, Middle Initial)
Martha Bergmark

Mailing Address 6 Montgomery Ave

City Takoma Park State MD Zip Code 20912-4615

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

Name of Employer Mississippi Center for Justice Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 12 / 2012

Transaction ID : C8783652

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Hollaman M. Raney

Mailing Address 81 County Road 231

City Oxford State MS Zip Code 38665-5809

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

Name of Employer Self Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : C8896275

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
George Schimmel

Mailing Address 3630 Kings Hwy

City Jackson State MS Zip Code 39216-3321

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

Name of Employer Retired Occupation None

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1850.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2012

Transaction ID : C8769762

Amount of Each Receipt this Period
100.00

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

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

450.00

**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 15
	<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)
Brad Morris for Congress

A. Full Name (Last, First, Middle Initial)
George Schimmel

Mailing Address 3630 Kings Hwy

City Jackson State MS Zip Code 39216-3321

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

Name of Employer Retired Occupation None

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : C8896601

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Randy Wadkins

Mailing Address 1605 Pierce Avenue Ext

City Oxford State MS Zip Code 38655-4459

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

Name of Employer Biochemist Occupation University of Mississippi

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : C8896775

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Gloria Williamson

Mailing Address 521 Holland Ave

City Philadelphia State MS Zip Code 39350-2437

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

Name of Employer retired Occupation housewife

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2012

Transaction ID : C8762274

Amount of Each Receipt this Period
250.00

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

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

400.00

850.00

**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 15
	<input type="checkbox"/> 11a 12 <input checked="" 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)
Brad Morris for Congress

A. Full Name (Last, First, Middle Initial)
Bradford K Morris

Mailing Address PO Box 2136

City Oxford State MS Zip Code 38655-7136

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

Name of Employer Self Occupation Attorney/Businessman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
116578.12

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2012

Transaction ID : C8928362

Amount of Each Receipt this Period
18473.64

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

18473.64

18473.64

**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 8 OF 15			
	<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)
Brad Morris for Congress

Full Name (Last, First, Middle Initial) A. Buying Time LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address 650 Massachusetts Ave, NW, Ste 210		Amount of Each Disbursement this Period 15000.00 Transaction ID : D421308
City Washington State DC Zip Code 20001	Purpose of Disbursement Advertising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Columbus-Lowndes League of Voters		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2012
Mailing Address PO Box 721		Amount of Each Disbursement this Period 350.00 Transaction ID : D421321
City Columbus State MS Zip Code 39701	Purpose of Disbursement Advertising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Envision Communications, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address 2715 M Street, NW Suite 100		Amount of Each Disbursement this Period 18473.64 Transaction ID : D421343
City Washington State DC Zip Code 20007	Purpose of Disbursement Advertising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	33823.64
TOTAL 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 9 OF 15			
	<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)
Brad Morris for Congress

Full Name (Last, First, Middle Initial) A. David McDowell		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 15 County Road 305		Amount of Each Disbursement this Period 778.83 Transaction ID : D421327
City Oxford	State MS Zip Code 38655-9301	
Purpose of Disbursement consulting	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. David McDowell		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address 15 County Road 305		Amount of Each Disbursement this Period 778.83 Transaction ID : D418058
City Oxford	State MS Zip Code 38655-9301	
Purpose of Disbursement consulting	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Renasant Bank		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 209 Troy St.		Amount of Each Disbursement this Period 55.53 Transaction ID : D421305
City Tupelo	State MS Zip Code 38802	
Purpose of Disbursement Bank Service Fee	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1613.19
TOTAL This Period (last page this line number only).....	35436.83

: 97 `A`G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A`N5H`CB

Form/Schedule: SB17

Transaction ID : D418058

This check was issued on 9/14 but erroneously entered for 3Q report as 10/2. Date left as 10/2 to keep COH balances accurate.

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Brad Morris for Congress

Transaction ID : L791

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Bradford K Morris PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

PO Box 2136

City

State

ZIP Code

Oxford

MS

38655-7136

Original Amount of Loan

30050.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

30050.00

TERMS

Date Incurred

02

21

2012

Date Due

none

Interest Rate

0.00

% (apr)

Secured:

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

30050.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Brad Morris for Congress** Transaction ID : **L841**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
Bradford K Morris PERS FUNDS
 Primary
 General
 Other (specify) ▼

Mailing Address
 PO Box 2136
 City State ZIP Code
 Oxford MS 38655-7136

Original Amount of Loan 17709.48	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 17709.48
-------------------------------------	------------------------------------	---

TERMS
 Date Incurred: M 04 / D 09 / Y 2012
 Date Due: M M / D D / Y none
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 17709.48
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Brad Morris for Congress** Transaction ID : **L842**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
Bradford K Morris PERS FUNDS
 Primary
 General
 Other (specify) ▼

Mailing Address
PO Box 2136

City State ZIP Code
Oxford MS 38655-7136

Original Amount of Loan 9000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 9000.00
------------------------------------	------------------------------------	--

TERMS

Date Incurred M 06 / D 21 / Y 2012	Date Due M / D / Y none	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	----------------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	[] 9000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Brad Morris for Congress

Transaction ID : **L865**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Bradford K Morris PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
PO Box 2136

City State ZIP Code
Oxford MS 38655-7136

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
41345.00 0.00 41345.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 08 / D 03 / Y 2012 M M / D D / Y variable % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 41345.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Brad Morris for Congress** Transaction ID : **L869**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
Bradford K Morris PERS FUNDS
 Primary
 General
 Other (specify) ▼

Mailing Address
PO Box 2136

City State ZIP Code
Oxford MS 38655-7136

Original Amount of Loan 18473.64	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 18473.64
-------------------------------------	------------------------------------	---

TERMS

Date Incurred M 10 / D 02 / Y 2012	Date Due M M / D D / Y variable	Interest Rate 0.00 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
---------------------------------------	------------------------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	18473.64
TOTALS This Period (last page in this line only).....	▶	116578.12

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.