Image# 12961215642						PAGE 1 / 15
FEC FORM 3	REPOR AND DIS For An		MENTS		C	Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRIN		Example: If typin	g, type	12FE4M5	
Brad Morris for Con	aress		over the lines.			
ADDRESS (number and street) PO Box 2136					
Check if different than previously					MS 38	3655 1 1 1 1
reported. (ACC)						
2. FEC IDENTIFICATION	N NUMBER 🔻	CITY		S		ZIP CODE ▲ STATE ▼ DISTRICT
C C00513788		3. IS THIS REPORT	× NEW (N)	OR	AMENDE (A)	D MS 01
4. TYPE OF REPORT (a) Quarterly Reports: April 15 Quarter July 15 Quarter	erly Report (Q1)	(b) 12-Day PI	RE -Election Repo Primary (12P) Convention (×	Special (12	
	arterly Report (Q3)	Election of	on 11 /	06 /	Y Y Y Y 2012	in the MS State of
January 31 Yea	ar-End Report (YE)	(c) 30-Day P (DST-Election Rep General (30G		Runoff (30R	s) Special (30S)
Termination Re	port (TER)	Election of	on/	D D /	Y Y Y Y	in the State of
5. Covering Period	M M / D D 10 01	2012 Y	through		/ D D / 17	Y Y Y Y 2012
I certify that I have examine Type or Print Name of Treas		-	knowledge and i	belief it is true	e, correct and	complete.
	Robert T. Gray	<i>ω</i> γ	[Electronically]	Filed] Da	tte	/ D D / Y Y Y Y 25 2012
NOTE: Submission of false	erroneous or incompl	ete information ma	av subject the per	son signing th	is Report to the	penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

10/26/2012 14 : 43

Image# 12961215642

Ima	nage# 12961215643		
Г _	FEC Form 3 (Revised 02/2003)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 15
	Write or Type Committee Name Brad Morris for Congress		
F	Report Covering the Period: From:	M M / D D / Y Y Y Y 10 01 / 2012 To:	10 ^{DDD} / Y Y Y Y 10 ^{DDD} / 2012
		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

FEC Form 3 (Revised		ILED SUMMARY PAGE of Receipts	PAGE 3 / 15
Write or Type Committee Na	,		
Brad Morris for Cong	iress		
Report Covering the Period:	From:	D D / Y Y Y Y 01 / 2012	To: 10 / D D / Y Y Y Y 10 17 2012
I. RECEIPT	s	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other t	han Ioans) FROM:		
(a) Individuals/Persons O Political Committees (i) Itemized (use Sch		850.00	27575.01
(ii) Unitemized		2000.00	23102.48
(iii) TOTAL of contribu from individuals		2850.00	67792.49
(b) Political Party Commi	ttees	0.00	0.00
(c) Other Political Comm (such as PACs)		0.00	8750.00
(d) The Candidate		0.00	0.00
(other than loans) (add Lines 11(a)(iii), (b		2850.00	76542.49
12. TRANSFERS FROM OTHE AUTHORIZED COMMITTE		0.00	0.00
13. LOANS:			
(a) Made or Guaranteed Candidate	· ·	18473.64	116578.12
(b) All Other Loans (c) TOTAL LOANS		0.00	0.00
(add Lines 13(a) and	(b))	18473.64	116578.12
14. OFFSETS TO OPERATING EXPENDITURES	ì		
(Refunds, Rebates, etc.)		0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		0.00	0.00
16. TOTAL RECEIPTS (add L 11(e), 12, 13(c), 14, and 1 (Carry Total to Line 24, pa	5)	21323.64	193120.61

Image# 12961215644

of Disbursements PAGE 4 / 15 FEC Form 3 (Revised 02/2003) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 35436.83 189262.10 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 35436.83 189262.10 (add Lines 17, 18, 19(c), 20(d), and 21) **III. CASH SUMMARY** 17066 97

DETAILED SUMMARY PAGE

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	7 7 7
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

Image# 12961215645

				ii							
SCHEDULE A (FEC Form 3)			Lico concrete achedula(a)	FOR LINE NUMBER: PAGE 5 OF 15							
			Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	X 11a 11b 11c 11d							
		Detailed Summary Page	12 13a 13b 14 15	;							
A	ny information copied from such Reports and	Statements m	nay not be sold or used by any paddrose of any palitical association	person for the purpose of soliciting contributions							
or	· · · ·	e name and	aduress of any political committe	e to solicit contributions from such committee.							
$ \rangle$	NAME OF COMMITTEE (In Full)										
V	Brad Morris for Congress										
	Full Name (Last, First, Middle Initial)										
Α.	Martha Bergmark			Date of Receipt							
	Mailing Address 6 Montgomery Ave			10 12 2012							
	City	State	Zip Code								
	Takoma Park	MD	20912-4615	Transaction ID : C8783652							
	FEC ID number of contributing	0		Amount of Each Descipt this Deviad							
	federal political committee.	С		Amount of Each Receipt this Period	i.						
	Name of Employer	Occupation	n	250.00							
	Mississippi Center for Justice	attorney			1						
	Receipt For: 2012		ycle-to-Date	1							
	Primary X General		F00.00								
	Other (specify)		500.00								
_	Full Name (Last, First, Middle Initial)										
P	Hollaman M. Raney	Date of Receipt									
В.	Mailing Address 81 County Road 231	M M / D D / Y Y Y	M M / D D / Y Y Y Y								
	City Oxford	State MS	Zip Code 38665-5809	Transaction ID : C8896275							
		IVIO	30003-3008								
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
				100.00	Ľ						
	Name of Employer	Occupation	n	, , , , , , , , , , , , , , , , , , , ,							
	Self	Attorney									
	Receipt For: 2012	Election C	ycle-to-Date								
	Primary X General Other (specify)		250.00								
			, ,	·							
_	Full Name (Last, First, Middle Initial)				_						
C.	George Schimmel			Date of Receipt							
	Mailing Address 3630 Kings Hwy			10 05 2012							
	City	State	Zip Code	العنا لننا لعنا							
	Jackson	MS	39216-3321	Transaction ID : C8769762							
	FEC ID number of contributing	0									
	federal political committee.	С		Amount of Each Receipt this Period							
	Name of Employer	Occupation	n	100.00							
	Retired	None									
	Receipt For: 2012	Election C	cycle-to-Date	-							
	Primary X General										
	Other (specify)		1850.00								
_			, , , , , , , , , , , , , , , , , , , ,	-							
		450.00									
1	SUBTOTAL of Receipts This Page (optional)										
,	OTAL This Period (last page this line number	only)									
1'	The mist chou has page this life humber	orny,		7 7 7	1						

SCHEDULE A (FEC Form 3)			Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 6 OF 15 (check only one)						
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 11d						
				12 13a 13b 14 15						
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) Brad Morris for Congress									
<u>А</u> .	Full Name (Last, First, Middle Initial) George Schimmel			Date of Receipt						
	Mailing Address 3630 Kings Hwy			10 17 2012						
	City	State	Zip Code	Transaction ID : C8896601						
	Jackson	MS	39216-3321							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
	Name of Employer	Occupation	า	100.00						
	Retired	None								
	Receipt For: 2012	Election C	ycle-to-Date							
	Primary X General		4050.00	1						
	Other (specify)	L	1850.00							
В.	Full Name (Last, First, Middle Initial) Randy Wadkins	Date of Receipt								
5.	Mailing Address 1605 Pierce Avenue Ext	10 17 Y Y Y Y Y 10 17 2012								
	City	State	Zip Code	Transaction ID : C8896775						
	Oxford	MS	38655-4459							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
	Name of Employer	Occupation	า	- 50.00						
	Biochemist	University of	of Mississippi							
	Receipt For: 2012	Election C	ycle-to-Date							
	Primary General	1.1.1.1	250.00	1						
	Other (specify)	L	350.00							
с.	Full Name (Last, First, Middle Initial) Gloria Williamson			Date of Receipt						
С.	Mailing Address 521 Holland Ave			10 02 2012						
	City	State	Zip Code	Transaction ID : C8762274						
	Philadelphia	MS	39350-2437							
	FEC ID number of contributing									
	federal political committee.	С		Amount of Each Receipt this Period						
	Name of Employer	Occupation	1	250.00						
	retired	housewife								
		Election C	ycle-to-Date	—						
				1						
	Other (specify)	L	250.00							
	LIRTOTAL of Receipto This Reco (antional)			400.00						
F	UBTOTAL of Receipts This Page (optional)									
т	OTAL This Period (last page this line number	only)		850.00						

					i								
SCHEDULE A (FEC Form 3)			Use separate schedule(s)	-	FOR LINE NUMBER: PAGE 7 OF 15 (check only one)								
		for each category of the											
ITEMIZED RECEIPTS			Detailed Summary Page		11a			11b11c11d				/	
			Detailed Summary Fage		12	$X _1$	3a	13	b	14		15	
A	Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a		hay not be sold or used by any	person f	or the	pur	pose	of soli	citing	contri	butio	ns	
				ee 10 50		nun	JULION	IS ITOIT	i suci	T COITII	Inttee	<i>.</i>	
	NAME OF COMMITTEE (In Full) Brad Morris for Congress												
Z													
	Full Name (Last, First, Middle Initial) Bradford K Morris					-							
Α.	Mailing Address PO Box 2136				ate of	Rec	eipt	D /	Y	YY	Y		
					10		02			2012			
	City	State	Zip Code	Trar	nsactio	on IE) : C8	92836	2				
	Oxford	MS	38655-7136						-				
	FEC ID number of contributing	С		Ar	mount	of E	ach I	Receip	t this	Period	I		
	federal political committee.	U		1.0		-							
	Name of Employer	Occupatio	n	- L	_					18473	.64		
	Self	Attorney/B	usinessman										
	Receipt For: 2012	Election C	cycle-to-Date										
	Primary X General		116578.12	1									
	Other (specify)		1	4									
_	Full Name (Last, First, Middle Initial)												
В.	· · ·					Date of Receipt							
	Mailing Address				M M / D D / Y Y Y Y								
	City State Zip Code								<u> </u>	_			
	Only												
	FEC ID number of contributing						_						
	federal political committee.		Ar	Amount of Each Receipt this Period									
	Name of Employer	Occupatio	<u></u>	— F	-								
		Occupation	11			,			,				
	Receipt For:	Election C											
	Primary General												
	Other (specify)												
_				_									
	Full Name (Last, First, Middle Initial)			Da	ate of	Rec	eipt						
C.	Mailing Address								V	VVV	V		
				- IVI					M M / D D / Y Y Y Y				
	City	State	Zip Code										
	FEC ID number of contributing	_		—									
	federal political committee.	С		Ar	mount	of E	ach	Receip	t this	Period	ł		
				— Г					_				
	Name of Employer	Occupation	n							_		_	
	eceipt For: Election Cycle-to-Date												
	Primary General												
	Other (specify)												
_			, ,	-									
									_	18473	.64	٦.	
1	SUBTOTAL of Receipts This Page (optional)			_		,							
,	TOTAL This Period (last page this line number	only)			_		_	_		18473	.64		
1	THE THIS FERIOD (last page this line number	oniy)					_						

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: (check only one) PAGE 8 OF 15 X 17 18 19a 19b 20a 20b 20c 21		
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) Brad Morris for Congress					
A.	Full Name (Last, First, Middle Initial) Buying Time LLC			Date of Disbursement		
	Mailing Address 650 Massachusetts Ave, NW, Ste 210			10 09 2012		
	City State Washington DC	Zip Code 20001		Amount of Each Disbursement this Period		
	Purpose of Disbursement Advertising			15000.00 Transaction ID : D421308		
	Candidate Name		Category/ Type			
	Office Sought: House Disbursement For Senate Primary President Other (s	K General				
	State: District: Full Name (Last, First, Middle Initial)					
В.	Columbus-Lowndes League of Voters			Date of Disbursement		
	Mailing Address PO Box 721	10 10 2012				
	City State Columbus MS	Amount of Each Disbursement this Period				
	Purpose of Disbursement Advertising	· · ·	350.00			
	Candidate Name		Category/ Type			
	Office Sought: House Disbursement For Senate President Other (s State: District:	General				
	Full Name (Last, First, Middle Initial)					
C.	Envision Communications, Inc.			Date of Disbursement		
	Mailing Address 2715 M Street, NW Suite 100					
		p Code 0007		Amount of Each Disbursement this Period		
	Purpose of Disbursement Advertising			18473.64		
	Candidate Name		Category/ Type	Transaction ID : D421343		
	Office Sought: House Disbursement For Senate President Other (s State: District:	K General				
s	UBTOTAL of Disbursements This Page (optional)	33823.64				
т	OTAL This Period (last page this line number only)					

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 9 OF 15 (check only one) X 17 18 19a 19b 20a 20b 20c 21
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) Brad Morris for Congress			
Α.	Full Name (Last, First, Middle Initial) David McDowell			Date of Disbursement
	Mailing Address 15 County Road 305			10 15 2012
	City State Oxford MS Purpose of Disbursement	Zip Code 38655-9301		Amount of Each Disbursement this Period 778.83
	Candidate Name		Category/ Type	Transaction ID : D421327
	Office Sought: House Disbursement For Senate Primary President Other (s	X General		
	State: District: Full Name (Last, First, Middle Initial)			
В.				Date of Disbursement
	Mailing Address 15 County Road 305	10 02 2012		
	City State Oxford MS		Amount of Each Disbursement this Period	
	Oxford MS Purpose of Disbursement consulting		778.83 Transaction ID : D418058	
	Candidate Name		Category/ Type	
	Office Sought: House Disbursement For Senate Primary President Other (s	General		
	Full Name (Last, First, Middle Initial)			
C.	Renasant Bank			Date of Disbursement
	Mailing Address 209 Troy St.			10 03 2012
		p Code 8802		Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Fee			55.53
	Candidate Name		Category/ Type	Transaction ID : D421305
	Office Sought: House Disbursement For Senate President Other (s State: District:	K General		
s	UBTOTAL of Disbursements This Page (optional)			1613.19
	OTAL This Period (last page this line number only)			35436.83

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=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:

nage# 12961215652			_								
CHEDULE C (FEC Form 3) OANS		Use separate schedul for each category of Detailed Summary Pa			the (check only one)			15 13a 13b			
AME OF COMMITTEE (In Full) Brad Morris for Congress			I		Tra	insactio	on ID : L79	91			
LOAN SOURCE Full Name (Last, Fir Bradford K Morris PERS FU			[1	PERSONA	al fund		Election: Prima Gener	ry			
Mailing Address PO Box 2136							Other	(specify)	•		
City	State	ZIF	Code								
Oxford	MS	38	3655-7136	i							
Original Amount of Loan		ive Paymer	nt To Dat	e	-	Balanc	e Outstar	nding at (Close o	f This	Period
30050.00				0.0	0	L.,	7		30	050.00	1
TERMS Date Incurred		Date	Duo		Interest	Pata			Secu	rodi	
	M M /			ne Y	Interest	0.00	%	(apr)		reu. Yes	< No
List All Endorsers or Guarantors (if	any) to Loan So	ource							I	63	
1. Full Name (Last, First, Middle Initi	al)		Na	me of Em	nployer						
Mailing Address			Oc	cupation							
City S	tate ZIP Co	de	Gu	nount laranteed ltstanding:							
2. Full Name (Last, First, Middle Initia	l)			me of Em							
Mailing Address				cupation							
City S	tate ZIP Co	de	Gu	nount laranteed ltstanding:				,			
3. Full Name (Last, First, Middle Initia	l)		Na	me of Em	nployer						
Mailing Address			Oc	cupation							
City S	tate ZIP Co	de	Gu	nount aranteed itstanding:		,		7			
4. Full Name (Last, First, Middle Initia	l)			me of Em							
Mailing Address			Oc	cupation							
City S	tate ZIP Co	de	Gu	nount aranteed itstanding:				7			
SUBTOTALS This Period This Page (opt	ne only)				· •		7 7			050.00	

nage# 12961215653			
CHEDULE C (FEC Form 3)		Use separate schedule(s)	PAGE 12 OF 15
OANS		for each category of the Detailed Summary Page	(check only one) X 13a 13b
AME OF COMMITTEE (In Full) Brad Morris for Congress		Transactior	n ID : L841
LOAN SOURCE Full Name (Last, First, M	liddle Initial)	[PERSONAL FUNDS]	ection: 2012
Bradford K Morris PERS FUND			Primary C General
Mailing Address PO Box 2136			Other (specify)
City	State ZIP Co	de	
Oxford	MS 38655-	7136	
Original Amount of Loan	Cumulative Payment To	Date Balance	Outstanding at Close of This Period
17709.48		0.00	17709.48
TERMS Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 09 / Y 2012	M M / D D / Y	ňone v 0.00	
			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	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	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) FOTALS This Period (last page in this line on Carry outstanding balance only to LINE 3. So	ıly)	······	17709.48

nage# 12961215654			
CHEDULE C (FEC Form 3) OANS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)
IAME OF COMMITTEE (In Full) Brad Morris for Congress		Transactio	on ID : L842
LOAN SOURCE Full Name (Last, First Bradford K Morris PERS FUN		[Election: 2012 Primary X General
Mailing Address PO Box 2136			Other (specify)
City	State ZIP Co	ode	
Oxford	MS 38655	-7136	
Original Amount of Loan 9000.00	Cumulative Payment To	Date Balanc	e Outstanding at Close of This Period 9000.00
TERMS Date Incurred M 06 ^M / D21 ^D / Y Ž012 ^Y List All Endorsers or Guarantors (if a		Interest Rate	Secured: % (apr)
1. Full Name (Last, First, Middle Initial		Name of Employer	
Mailing Address	/	Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	y 1 1 1 1
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · ·
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (option TOTALS This Period (last page in this line Carry outstanding balance only to LINE 3	e only)		9000.00

nage# 12961215655			
CHEDULE C (FEC Form 3) DANS		Use separate schedule(for each category of the Detailed Summary Page	(check only one) X 13a
AME OF COMMITTEE (In Full) Brad Morris for Congress		Transact	tion ID : L865
LOAN SOURCE Full Name (Last, First, Mi Bradford K Morris PERS FUNDS	,	[PERSONAL FUNDS]	Election: 2012 Primary X General
Mailing Address PO Box 2136			Other (specify)
City	State ZIP C	Code	
Oxford	MS 3865	5-7136	
Original Amount of Loan 41345.00	Cumulative Payment	To Date Balar 0.00	nce Outstanding at Close of This Period 41345.00
TERMS			
Date Incurred	Date Du	le Interest Rate	
List All Endorsers or Guarantors (if any) t	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y
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:	y
COTALS This Period This Page (optional).	y)		41345.00

age# 12961215656				
CHEDULE C (FEC DANS	Form 3)		Use separate schedule for each category of th Detailed Summary Pag	10 (check only one) X 13a
The of Committee (in Fund Morris for Conginger			Transac	tion ID : L869
LOAN SOURCE Full Nam Bradford K Morris F			[PERSONAL FUNDS]	Election: 2012 Primary Ceneral
Mailing Address PO Box 2136				Other (specify)
City		State ZIP	Code	
Oxford		MS 386	55-7136	
Original Amount of Loan	18473.64	Cumulative Payment	To Date Bala	nce Outstanding at Close of This Perioc 18473.64
TERMS Date Incurr 10 ^M / D02 ^D / List All Endorsers or Gua	Y Ž01Ž Y		ue Interest Rate variable 0.00	
1. Full Name (Last, First,		5 Loan Source	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:	y 1 y 1 w 1
3. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	-y
4. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address		Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	g 1 1 g 1 1 m 1
UBTOTALS This Period Thi OTALS This Period (last pa	ge in this line only	()		18473.64 116578.12 vard to appropriate line of Summary.