

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 06 01 2006 through 06 30 2006

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 Tom Butchart
Signature of Treasurer Electronically Filed by Tom Butchart Date 09 07 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Mississippi Republican Party

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		27103.08
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	151405.20									
(c) Total Receipts (from Line 19)	137236.81	559815.01								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	288642.01	586918.09								
7. Total Disbursements (from Line 31)	79430.94	377707.02								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	209211.07	209211.07								
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)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Mississippi Republican Party

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	84075.00	296960.00
(i) Itemized (use Schedule A)	30795.50	206957.24
(ii) Unitemized	114870.50	503917.24
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10.00	360.00
(b) Political Party Committees	21708.33	44608.33
(c) Other Political Committees (such as PACs)	136588.83	548885.57
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	10269.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	645.21	645.21
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	2.77	15.23
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	137236.81	559815.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	137236.81	559815.01

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	29283.29	81912.24
(ii) Non-Federal Share.....	16226.49	105402.02
(b) Other Federal Operating Expenditures.....	12044.42	85322.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	57554.20	272636.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	200.00	200.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	5000.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	5200.00	5200.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	16676.74	94870.24
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	16676.74	94870.24
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	79430.94	377707.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	63204.45	272305.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	136588.83	548885.57
34. Total Contribution Refunds (from Line 28(d))	5200.00	5200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	131388.83	543685.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	41327.71	167234.76
37. Offsets to Operating Expenditures (from Line 15, page 3)	645.21	645.21
38. Net Operating Expenditures (subtract Line 37 from Line 36)	40682.50	166589.55

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Liles Williams		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6	
Mailing Address 1760 Seaton Rd.		Transaction ID: 60620.C173422	
City State Zip Code Raymond MS 39154		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation Stuart Irby Co. Electrical Cont		Aggregate Year-to-Date ▼ 150.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Liles Williams		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6	
Mailing Address 1760 Seaton Rd.		Transaction ID: 60620.C173421	
City State Zip Code Raymond MS 39154		Amount of Each Receipt this Period 180.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation Stuart Irby Co. Electrical Cont		Aggregate Year-to-Date ▼ 330.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Andrew Martinolich		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6	
Mailing Address 599 Suebe Street		Transaction ID: 60620.C173435	
City State Zip Code Bay Saint Louis MS 39520-2426		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation Self Physician		Aggregate Year-to-Date ▼ 120.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address 599 Suebe Street

City State Zip Code
Bay Saint Louis MS 39520-2426

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

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 6

Transaction ID: 60717.C174392

Amount of Each Receipt this Period
80.00

Receipt

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

Mailing Address 599 Suebe Street

City State Zip Code
Bay Saint Louis MS 39520-2426

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

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 6

Transaction ID: 60717.C174535

Amount of Each Receipt this Period
50.00

Receipt

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

Mailing Address 5418 Meadow Oaks Park Drive

City State Zip Code
Jackson MS 39211-4345

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

Name of Employer Hull Clinic Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 6

Transaction ID: 60717.C174269

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 230.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Janeiro Cranage

Mailing Address 106 Robin Lane

City State Zip Code
Union MS 39365-9703

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

Name of Employer Occupation
Winsteads Logging Bookkeeper

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 6

Transaction ID: 60620.C173336

Amount of Each Receipt this Period
110.00

Receipt

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

Mailing Address 127 Halstead Road

City State Zip Code
Ocean Springs MS 39564-5316

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

Name of Employer Occupation
N/A Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 6

Transaction ID: 60717.C174368

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 200 E. Capitol Street, #1601

City State Zip Code
Jackson MS 39201

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

Name of Employer Occupation
Self Investor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5060.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 0 6

Transaction ID: 60620.C173444

Amount of Each Receipt this Period
10.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	220.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address 200 E. Capitol Street, #1601

City State Zip Code
Jackson MS 39201

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

Name of Employer Self Occupation Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5140.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2006

Transaction ID: 60717.C174382

Amount of Each Receipt this Period
80.00

Receipt

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

Mailing Address P. O. Box 700

City State Zip Code
Brandon MS 39043-0700

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

Name of Employer Rankin County Occupation Chancery Clerk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173445

Amount of Each Receipt this Period
20.00

Receipt

C. Full Name (Last, First, Middle Initial)
Richard Clark, Jr.

Mailing Address #3 Cherokee Circle

City State Zip Code
Hattiesburg MS 39401

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173488

Amount of Each Receipt this Period
10.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	110.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Harry Collins Mailing Address P. O. Box 215		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6 Transaction ID: 60620.C173492
City State Zip Code Scott MS 38772		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Delta & Pine Land Company	Occupation V.P. Operation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

B. Full Name (Last, First, Middle Initial) Irvin Cronin Mailing Address 1609 Linda Drive		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6 Transaction ID: 60620.C173497
City State Zip Code Clinton MS 39056		Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C. Full Name (Last, First, Middle Initial) Henry Damon Mailing Address 3811 29th Ave.		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6 Transaction ID: 60620.C173498
City State Zip Code Meridian MS 39305		Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer AES Ltd. Engineers	Occupation Engr/surveyor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 180.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address 3811 29th Ave.

City State Zip Code
Meridian MS 39305

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

Name of Employer Occupation
AES Ltd. Engineers Engr/surveyor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2006

Transaction ID: 60620.C174174

Amount of Each Receipt this Period
80.00

Receipt

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

Mailing Address 145 Saint Jude Street

City State Zip Code
Biloxi MS 39530-3602

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

Name of Employer Occupation
Self Architect

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5150.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173528

Amount of Each Receipt this Period
25.00

Receipt

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

Mailing Address P. O. Box 690

City State Zip Code
Indianola MS 38751-0690

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

Name of Employer Occupation
Gresham Petroleum Merchant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173537

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	130.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
G. O. Griffith, Jr.

Mailing Address 625 Oakland Terrace

City State Zip Code
Alexandria VA 22302

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

Name of Employer Occupation
Barbour, Griffith & Rogers Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 0 6

Transaction ID: 60620.C173539

Amount of Each Receipt this Period
25.00

Receipt

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

Mailing Address 104 Dampeer Street

City State Zip Code
Crystal Springs MS 39059-2561

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

Name of Employer Occupation
Self Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 0 6

Transaction ID: 60620.C173540

Amount of Each Receipt this Period
40.00

Receipt

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

Mailing Address 2701 - 24th Avenue

City State Zip Code
Gulfport MS 39501

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

Name of Employer Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 2 / 2 0 0 6

Transaction ID: 60601.C173162

Amount of Each Receipt this Period
1250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1315.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Alben Hopkins		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 6
Mailing Address 2701 - 24th Avenue		Transaction ID: 60620.C173558
City Gulfport	State MS	Zip Code 39501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Self	Occupation Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1310.00	

Full Name (Last, First, Middle Initial) B. Alben Hopkins		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address 2701 - 24th Avenue		Transaction ID: 60620.C174164
City Gulfport	State MS	Zip Code 39501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00
Name of Employer Self	Occupation Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2110.00	

Full Name (Last, First, Middle Initial) C. Boyce Keating		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 6
Mailing Address 119 Faith Drive		Transaction ID: 60620.C173564
City Batesville	State MS	Zip Code 38606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer N/A	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	830.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
James Moreton

Mailing Address P. O. Box 537

City State Zip Code
Brookhaven MS 39601-0537

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
06 / 08 / 2006

Transaction ID: 60620.C173606

Amount of Each Receipt this Period
40.00

Receipt

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

Mailing Address P. O. Box 537

City State Zip Code
Brookhaven MS 39601-0537

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
06 / 09 / 2006

Transaction ID: 60620.C174016

Amount of Each Receipt this Period
75.00

Receipt

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

Mailing Address P. O. Box 823

City State Zip Code
Ridgeland MS 39158-0823

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

Name of Employer Self Employed Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
06 / 08 / 2006

Transaction ID: 60620.C173621

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 215.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Clarke Reed		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 6	
Mailing Address 139 Bayou Road		Transaction ID: 60620.C173629	
City Greenville	State MS	Zip Code 38701-7702	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Self Employed	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2090.00		

Full Name (Last, First, Middle Initial) B. Clarke Reed		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 0 / 2 0 0 6	
Mailing Address 139 Bayou Road		Transaction ID: 60620.C174158	
City Greenville	State MS	Zip Code 38701-7702	Amount of Each Receipt this Period 1250.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Self Employed	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3340.00		

Full Name (Last, First, Middle Initial) C. Michael Retzer		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 6	
Mailing Address P. O. Box 4457		Transaction ID: 60620.C173630	
City Greenville	State MS	Zip Code 38704-4457	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer U. S. Government	Occupation Ambassador		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5060.00		

SUBTOTAL of Receipts This Page (optional) ▶	1275.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
F. L. Sellers

Mailing Address 1502 Tanglewood Drive

City State Zip Code
Clinton MS 39056-3648

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 0 6

Transaction ID: 60620.C173650

Amount of Each Receipt this Period
25.00

Receipt

B. Full Name (Last, First, Middle Initial)
F. L. Sellers

Mailing Address 1502 Tanglewood Drive

City State Zip Code
Clinton MS 39056-3648

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: 60620.C174043

Amount of Each Receipt this Period
160.00

Receipt

C. Full Name (Last, First, Middle Initial)
William Van Devender

Mailing Address P. O. Box 5327

City State Zip Code
Jackson MS 39296-5327

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

Name of Employer Southern Timber Venture Occupation Owner/manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 180.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 0 6

Transaction ID: 60620.C173677

Amount of Each Receipt this Period
30.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 215.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
William Van Devender

Mailing Address P. O. Box 5327

City State Zip Code
Jackson MS 39296-5327

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

Name of Employer Occupation
Southern Timber Venture Owner/manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1430.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2006

Transaction ID: 60620.C174037

Amount of Each Receipt this Period
1250.00

Receipt

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

Mailing Address 318 Hillview Drive

City State Zip Code
Ridgeland MS 39157

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

Name of Employer Occupation
Phelps, Dunbar, Etc. Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173681

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 318 Hillview Drive

City State Zip Code
Ridgeland MS 39157

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

Name of Employer Occupation
Phelps, Dunbar, Etc. Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2006

Transaction ID: 60717.C174391

Amount of Each Receipt this Period
80.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1350.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Dick Hall

Mailing Address 219 Northwind Drive

City State Zip Code
Brandon MS 39047

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

Name of Employer Miss. Dept. Of Transportation
Occupation Commissioner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 6

Transaction ID: 60620.C173423

Amount of Each Receipt this Period
150.00

Receipt

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

Mailing Address 219 Northwind Drive

City State Zip Code
Brandon MS 39047

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

Name of Employer Miss. Dept. Of Transportation
Occupation Commissioner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 6

Transaction ID: 60717.C174380

Amount of Each Receipt this Period
120.00

Receipt

C. Full Name (Last, First, Middle Initial)
Armin Moeller, Jr.

Mailing Address 346 Saint Andrews Drive

City State Zip Code
Jackson MS 39211-2521

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

Name of Employer Phelps Dunbar
Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 2 / 2 0 0 6

Transaction ID: 60620.C173173

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **520.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Julius King

Mailing Address 541 Central Ave., Suite B

City State Zip Code
Laurel MS 39440

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

Name of Employer Self Occupation Oil And Gas

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2006

Transaction ID: 60620.C174030

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Mrs. W. J. Feltus, III

Mailing Address 200 Devereaux Drive

City State Zip Code
Natchez MS 39120-3752

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

Name of Employer N/A Occupation Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2006

Transaction ID: 60620.C174021

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address P. O. Box 16667

City State Zip Code
Jackson MS 39236-6667

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

Name of Employer Self Occupation Oil & Gas

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2006

Transaction ID: 60620.C174014

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Terrell Wise

Mailing Address P. O. Box 12424

City State Zip Code
Jackson MS 39211-6302

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173714

Amount of Each Receipt this Period
10.00

Receipt

B. Full Name (Last, First, Middle Initial)
J. Barthell Joseph, Jr.

Mailing Address 800 Main Street

City State Zip Code
Greenville MS 38701-4037

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

Name of Employer Self Occupation Distributor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2006

Transaction ID: 60620.C174013

Amount of Each Receipt this Period
150.00

Receipt

C. Full Name (Last, First, Middle Initial)
Theo Costas, Jr.

Mailing Address P. O. Box 1349

City State Zip Code
Jackson MS 39215-1349

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

Name of Employer So. Beverage Co. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 6000.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2006

Transaction ID: 60620.C174153

Amount of Each Receipt this Period
6000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	6160.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Theo Costas, Jr.
Mailing Address P. O. Box 1349
City State Zip Code
Jackson MS 39215-1349
FEC ID number of contributing federal political committee. **C**
Name of Employer So. Beverage Co. Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 7000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 6
Transaction ID: 60620.C174154
Amount of Each Receipt this Period
1000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Helen Beeman
Mailing Address 115 Pecan Circle
City State Zip Code
Quitman MS 39355-2653
FEC ID number of contributing federal political committee. **C**
Name of Employer Quitman Schools Occupation Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 0 6
Transaction ID: 60620.C173717
Amount of Each Receipt this Period
20.00
Receipt

C. Full Name (Last, First, Middle Initial)
Andrew Townes
Mailing Address P. O. Box 819
City State Zip Code
Grenada MS 38902-0819
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 2 / 2 0 0 6
Transaction ID: 60620.C173206
Amount of Each Receipt this Period
200.00
Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1220.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Nancy Durham

Mailing Address 1208 E. Lakeshore Drive

City State Zip Code
Carriere MS 39426-7718

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

Name of Employer Federal Employee Occupation
Technical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
06 / 22 / 2006

Transaction ID: 60717.C174281

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address P. O. Box 22728

City State Zip Code
Jackson MS 39225-2728

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

Name of Employer MDA Occupation
Exec. Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
06 / 22 / 2006

Transaction ID: 60717.C174393

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 1304 Bayou Drive

City State Zip Code
Indianola MS 38751-2937

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

Name of Employer STAPLCOTN Occupation
Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
06 / 09 / 2006

Transaction ID: 60620.C174040

Amount of Each Receipt this Period
1250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Mark Garriga

Mailing Address 121 Golden Pond Drive

City	State	Zip Code
Madison	MS	39110

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

Name of Employer Self	Occupation Attorney
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	8	/	2	0	0	6

Transaction ID: 60620.C173731

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 121 Golden Pond Drive

City	State	Zip Code
Madison	MS	39110

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

Name of Employer Self	Occupation Attorney
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	4	/	2	0	0	6

Transaction ID: 60620.C174069

Amount of Each Receipt this Period
150.00

Receipt

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

Mailing Address 1845 Highway 27

City	State	Zip Code
Vicksburg	MS	39180-8655

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	8	/	2	0	0	6

Transaction ID: 60620.C173738

Amount of Each Receipt this Period
140.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	310.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Paul McMullan		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2006	
Mailing Address P. O. Box 16868		Transaction ID: 60601.C173159	
City Hattiesburg	State MS	Zip Code 39404-6868	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A	Occupation Retired	Aggregate Year-to-Date ▼ 1200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Tom Flinn		Date of Receipt M M / D D / Y Y Y Y 06 / 08 / 2006	
Mailing Address P. O. Box 384		Transaction ID: 60620.C173742	
City Hernando	State MS	Zip Code 38632-0384	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Self	Occupation Investor	Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. David Makey		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2006	
Mailing Address 4930 Country Club Place		Transaction ID: 60620.C173169	
City Meridian	State MS	Zip Code 39305-1907	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Self	Occupation Physician	Aggregate Year-to-Date ▼ 200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1135.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Cornelia McGee		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6	
Mailing Address P. O. Box 93		Transaction ID: 60620.C173429	
City State Zip Code Fulton MS 38843-0093		Amount of Each Receipt this Period 190.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation Retired		Aggregate Year-to-Date ▼ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Frank Cannon		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6	
Mailing Address 528 Mockingbird Drive		Transaction ID: 60620.C173425	
City State Zip Code Long Beach MS 39560-3118		Amount of Each Receipt this Period 160.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation N/A Retired		Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Frank Cannon		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6	
Mailing Address 528 Mockingbird Drive		Transaction ID: 60620.C173747	
City State Zip Code Long Beach MS 39560-3118		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation N/A Retired		Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	360.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Thomas Milam

Mailing Address P. O. Box 1247

City State Zip Code
Madison MS 39130-1247

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
06 / 02 / 2006

Transaction ID: 60620.C173234

Amount of Each Receipt this Period
150.00

Receipt

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

Mailing Address 1316 Father Ryan Avenue

City State Zip Code
Biloxi MS 39530

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

Name of Employer Mississippi Power Co. Occupation Comptroller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
06 / 22 / 2006

Transaction ID: 60717.C174342

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 102 Raymond Street

City State Zip Code
Starkville MS 39759-2851

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

Name of Employer Starkville Bus Tours Occupation Bus Tours

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt
06 / 08 / 2006

Transaction ID: 60620.C173750

Amount of Each Receipt this Period
15.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	265.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address 102 Raymond Street

City Starkville State MS Zip Code 39759-2851

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

Name of Employer Starkville Bus Tours Occupation Bus Tours

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 0 / 2 0 0 6

Transaction ID: 60620.C174152

Amount of Each Receipt this Period
 40.00

Receipt

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

Mailing Address 109 Glen Eagle Road

City Oxford State MS Zip Code 38655-2611

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

Name of Employer Radiance Technology Occupation Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 3 / 2 0 0 6

Transaction ID: 60620.C173372

Amount of Each Receipt this Period
 200.00

Receipt

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

Mailing Address 109 Glen Eagle Road

City Oxford State MS Zip Code 38655-2611

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

Name of Employer Radiance Technology Occupation Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 8 / 2 0 0 6

Transaction ID: 60620.C173756

Amount of Each Receipt this Period
 20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	260.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Margaret Hall

Mailing Address 109 Glen Eagle Road

City State Zip Code
Oxford MS 38655-2611

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

Name of Employer Occupation
Radiance Technology Business Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1670.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: 60620.C174020

Amount of Each Receipt this Period
1250.00

Receipt

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

Mailing Address 2060 Spillway Road

City State Zip Code
Brandon MS 39042

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

Name of Employer Occupation
Self Real Estate Appraise

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 14 / 2006

Transaction ID: 60620.C174085

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
William D. Dennis

Mailing Address P. O. Box 6181

City State Zip Code
Gulfport MS 39506-6181

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

Name of Employer Occupation
Specialty Contractors Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 120.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 08 / 2006

Transaction ID: 60620.C173765

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1470.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
William D. Dennis

Mailing Address P. O. Box 6181

City State Zip Code
Gulfport MS 39506-6181

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

Name of Employer Specialty Contractors Occupation Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1370.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2006

Transaction ID: 60620.C174061

Amount of Each Receipt this Period
1250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Dan Hughes, Jr.

Mailing Address P. O. Box 5628

City State Zip Code
Brandon MS 39047-5628

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

Name of Employer Self Occupation Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2006

Transaction ID: 60620.C174041

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 5203 Bradwood

City State Zip Code
Springfield VA 22151

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

Name of Employer Postal Rate Comm. Occupation Commissioner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 160.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173768

Amount of Each Receipt this Period
10.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2260.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Danny Covington

Mailing Address 5203 Bradwood

City State Zip Code
Springfield VA 22151

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

Name of Employer Postal Rate Comm. Occupation Commissioner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2006

Transaction ID: 60620.C174173

Amount of Each Receipt this Period
75.00

Receipt

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

Mailing Address P. O. Box 362

City State Zip Code
Hernando MS 38632-0362

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

Name of Employer North MS Utility Co. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2006

Transaction ID: 60620.C174071

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
A. C. Tipton, Jr.

Mailing Address 971 Lakeland Drive, Suite 557

City State Zip Code
Jackson MS 39216-4609

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

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2006

Transaction ID: 60620.C174067

Amount of Each Receipt this Period
80.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	655.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Sherman Muths, Jr.		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2006	
Mailing Address P. O. Box 1630		Transaction ID: 60601.C173160	
City Gulfport	State MS	Amount of Each Receipt this Period 1250.00	
Zip Code 39502-1630		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00		

Full Name (Last, First, Middle Initial) B. Sherman Muths, Jr.		Date of Receipt M M / D D / Y Y Y Y 06 / 20 / 2006	
Mailing Address P. O. Box 1630		Transaction ID: 60620.C174168	
City Gulfport	State MS	Amount of Each Receipt this Period 400.00	
Zip Code 39502-1630		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00		

Full Name (Last, First, Middle Initial) C. H. Hester Plauche, Jr.		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2006	
Mailing Address 330 Poindexter Dr.		Transaction ID: 60717.C174189	
City Pass Christian	State MS	Amount of Each Receipt this Period 1250.00	
Zip Code 39571		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00		

SUBTOTAL of Receipts This Page (optional) ▶	2900.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
H. Hester Plauche, Jr.
Mailing Address 330 Poindexter Dr.
City State Zip Code
Pass Christian MS 39571
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2650.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 6
Transaction ID: 60717.C174511
Amount of Each Receipt this Period
400.00
Receipt

B. Full Name (Last, First, Middle Initial)
Deanna Wilbourn
Mailing Address 431 Windover Cir
City State Zip Code
Meridian MS 39305
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 0 6
Transaction ID: 60620.C174119
Amount of Each Receipt this Period
100.00
Receipt

C. Full Name (Last, First, Middle Initial)
Jill Holleman
Mailing Address 528 Noel Street
City State Zip Code
Wiggins MS 39577-2643
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 6
Transaction ID: 60620.C174162
Amount of Each Receipt this Period
120.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **620.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address 636 Mt. Leopard Road

City State Zip Code
Flora MS 39071

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

Name of Employer Harco Exploration Occupation President - Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2006

Transaction ID: 60601.C173152

Amount of Each Receipt this Period
1200.00

Receipt

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

Mailing Address 1610 Mt. Pleasant Road

City State Zip Code
Hernando MS 38632

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

Name of Employer Hernando Occupation Alderman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 120.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173788

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 1610 Mt. Pleasant Road

City State Zip Code
Hernando MS 38632

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

Name of Employer Hernando Occupation Alderman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2006

Transaction ID: 60717.C174384

Amount of Each Receipt this Period
150.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1370.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 / 111
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Gary Harkins Mailing Address 205 Sunrise Point Drive City State Zip Code Brandon MS 39042-6525 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 Transaction ID: 60620.C174025 Amount of Each Receipt this Period 120.00 Receipt
Name of Employer Self Occupation Self Investments Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 120.00		

B. Full Name (Last, First, Middle Initial) Gary Harkins Mailing Address 205 Sunrise Point Drive City State Zip Code Brandon MS 39042-6525 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 Transaction ID: 60620.C174026 Amount of Each Receipt this Period 150.00 Receipt
Name of Employer Self Occupation Self Investments Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00		

C. Full Name (Last, First, Middle Initial) Geneva Box Mailing Address 103 Janell dr. City State Zip Code Gulfport MS 39503 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 6 Transaction ID: 60620.C173992 Amount of Each Receipt this Period 100.00 Receipt
Name of Employer N/A Occupation N/A Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		

SUBTOTAL of Receipts This Page (optional)	370.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 / 111
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Geneva Box Mailing Address 103 Janell dr. City State Zip Code Gulfport MS 39503 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 Transaction ID: 60620.C174047 Amount of Each Receipt this Period 100.00 Receipt
Name of Employer Occupation N/A Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Geneva Box Mailing Address 103 Janell dr. City State Zip Code Gulfport MS 39503 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 Transaction ID: 60620.C174051 Amount of Each Receipt this Period 75.00 Receipt
Name of Employer Occupation N/A Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 375.00		

C. Full Name (Last, First, Middle Initial) Geneva Box Mailing Address 103 Janell dr. City State Zip Code Gulfport MS 39503 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 Transaction ID: 60620.C174046 Amount of Each Receipt this Period 20.00 Receipt
Name of Employer Occupation N/A Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 395.00		

SUBTOTAL of Receipts This Page (optional)	▶	195.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 / 111
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Karl Hatten Mailing Address 530 School St. City Clarksdale State MS Zip Code 38614 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6 Transaction ID: 60620.C173805 Amount of Each Receipt this Period 20.00 Receipt
Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 170.00		

B. Full Name (Last, First, Middle Initial) Karl Hatten Mailing Address 530 School St. City Clarksdale State MS Zip Code 38614 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6 Transaction ID: 60717.C174365 Amount of Each Receipt this Period 50.00 Receipt
Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		

C. Full Name (Last, First, Middle Initial) Charles Tyler Mailing Address 1033 Northpointe Drive City Jackson State MS Zip Code 39211-2918 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6 Transaction ID: 60620.C173257 Amount of Each Receipt this Period 100.00 Receipt
Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		

SUBTOTAL of Receipts This Page (optional)	▶	170.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address 104 Hidden Heights

City State Zip Code
Ridgeland MS 39157

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

Name of Employer Occupation
JOAMCA Chemical Products Manufacturer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
06 / 08 / 2006

Transaction ID: 60620.C173811

Amount of Each Receipt this Period
40.00

Receipt

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

Mailing Address 4730 W. Cheryl Drive

City State Zip Code
Jackson MS 39211-5812

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

Name of Employer Occupation
Browning & Welch Inc Geologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
06 / 02 / 2006

Transaction ID: 60620.C173258

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Paul Eubanks, Jr.

Mailing Address 4140 Beaver Dam Road

City State Zip Code
Lucedale MS 39452-8669

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

Name of Employer Occupation
N/A Disabled

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
06 / 22 / 2006

Transaction ID: 60717.C174351

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **340.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Dudley Maples		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address P. O. Box 292		Transaction ID: 60620.C174036	
City State Zip Code Meridian MS 39302-0292	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Margaret Barger		Date of Receipt M M / D D / Y Y Y Y 06 / 06 / 2006	
Mailing Address 408 MacArthur Street		Transaction ID: 60620.C173407	
City State Zip Code Greenwood MS 38930-2324	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Jane Heidelberg		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2006	
Mailing Address 801 S. 18th Avenue		Transaction ID: 60620.C173199	
City State Zip Code Hattiesburg MS 39401-7508	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A Occupation Homemaker	Aggregate Year-to-Date ▼ 700.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Kathryn Arant Mailing Address 3731 Highway 8 City Ruleville State MS Zip Code 38771 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6 Transaction ID: 60620.C173823 Amount of Each Receipt this Period 10.00 Receipt
Name of Employer Self Occupation Farmer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00		

B. Full Name (Last, First, Middle Initial) Ben Allen Mailing Address 2517 Meadowbrook Road City Jackson State MS Zip Code 39211 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 Transaction ID: 60620.C174024 Amount of Each Receipt this Period 1250.00 Receipt
Name of Employer City of Jackson Occupation Councilman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		

C. Full Name (Last, First, Middle Initial) Ike D. Hopper Mailing Address Route 1, Box 145 City Porterville State MS Zip Code 39352-9739 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6 Transaction ID: 60620.C173428 Amount of Each Receipt this Period 80.00 Receipt
Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 305.00		

SUBTOTAL of Receipts This Page (optional)	▶	1340.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address Route 1, Box 145

City State Zip Code
Porterville MS 39352-9739

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173832

Amount of Each Receipt this Period
25.00

Receipt

B. Full Name (Last, First, Middle Initial)
Walter C. Scott

Mailing Address 159 Meadowview Street

City State Zip Code
Jackson MS 39209-3206

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

Name of Employer Self Occupation Business Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2006

Transaction ID: 60717.C174379

Amount of Each Receipt this Period
50.00

Receipt

C. Full Name (Last, First, Middle Initial)
James Furrh, Jr.

Mailing Address 4015 Boxwood Circle

City State Zip Code
Jackson MS 39211-5539

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

Name of Employer Self Occupation Oil And Gas

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 03 / 2006

Transaction ID: 60620.C173355

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	325.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 / 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Dudley J. Hughes		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6
Mailing Address 2829 Lakeland Drive, Suite 1101		Transaction ID: 60717.C174290
City State Zip Code Flowood MS 39208	Amount of Each Receipt this Period 180.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Hughes Oil, Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5280.00	

Full Name (Last, First, Middle Initial) B. Danny L. Dilworth		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6
Mailing Address 275 County Road 514		Transaction ID: 60620.C173843
City State Zip Code Rienzi MS 38865	Amount of Each Receipt this Period 120.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Self	Occupation Tree Farmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

Full Name (Last, First, Middle Initial) C. John K. Dottley		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 1438 Wisteria Drive		Transaction ID: 60620.C173171
City State Zip Code Vicksburg MS 39180-4757	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Dottley Spice Mart	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address 1110 Friar Tuck Rd.

City Starkville State MS Zip Code 39759

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 6 / 2 0 0 6

Transaction ID: 60620.C173395

Amount of Each Receipt this Period
 100.00

Receipt

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

Mailing Address 8705 Northwest Drive

City Southaven State MS Zip Code 38671-0346

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

Name of Employer Pointer Ins. Occupation Insurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 5 / 2 0 0 6

Transaction ID: 60620.C173319

Amount of Each Receipt this Period
 100.00

Receipt

C. Full Name (Last, First, Middle Initial)
C. P. Owen, Jr.

Mailing Address P. O. Box 98

City Robinsonville State MS Zip Code 38664

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

Name of Employer Self Occupation Farmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 2 / 2 0 0 6

Transaction ID: 60717.C174389

Amount of Each Receipt this Period
 500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	700.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Brian Perry Mailing Address 1316 St. Mary St. City State Zip Code Jackson MS 39202 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6 Transaction ID: 60620.C173284 Amount of Each Receipt this Period 80.00 Receipt
Name of Employer Congressman Pickering Occupation Communications Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 80.00		

B. Full Name (Last, First, Middle Initial) Brian Perry Mailing Address 1316 St. Mary St. City State Zip Code Jackson MS 39202 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6 Transaction ID: 60620.C173283 Amount of Each Receipt this Period 120.00 Receipt
Name of Employer Congressman Pickering Occupation Communications Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		

C. Full Name (Last, First, Middle Initial) Nancy Burrow Mailing Address 100 Hillview Court City State Zip Code Brandon MS 39042 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 Transaction ID: 60620.C174002 Amount of Each Receipt this Period 100.00 Receipt
Name of Employer Self Occupation Medical Doctor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00		

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Nancy Burrow

Mailing Address 100 Hillview Court

City State Zip Code
Brandon MS 39042

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

Name of Employer Self Occupation
Medical Doctor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2006

Transaction ID: 60717.C174238

Amount of Each Receipt this Period
205.00

Receipt

B. Full Name (Last, First, Middle Initial)
W. E. Phillips

Mailing Address 9402 Miss 149

City State Zip Code
Yazoo City MS 39194

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

Name of Employer Self Occupation
Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2006

Transaction ID: 60620.C174050

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Harry Simmons, Jr.

Mailing Address 2628 Erickson Road

City State Zip Code
Yazoo City MS 39194-9457

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

Name of Employer Farmer Occupation
Self

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2006

Transaction ID: 60601.C173161

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1455.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Harry Simmons, Jr.
Mailing Address 2628 Erickson Road
City State Zip Code
Yazoo City MS 39194-9457
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Farmer Self
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6
Transaction ID: 60620.C174045
Amount of Each Receipt this Period
500.00
Receipt

B. Full Name (Last, First, Middle Initial)
Betty Anderson
Mailing Address 279 Pat Holifield Road
City State Zip Code
Soso MS 39480-5020
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
N/A Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 0 6
Transaction ID: 60620.C173868
Amount of Each Receipt this Period
10.00
Receipt

C. Full Name (Last, First, Middle Initial)
A. M. Zeidman
Mailing Address P.O. Box 1004
City State Zip Code
Calhoun City MS 38916-1004
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Lincoln Financial Advisors Registered Representative
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
160.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 0 6
Transaction ID: 60620.C173871
Amount of Each Receipt this Period
10.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **520.00**
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
A. M. Zeidman

Mailing Address P.O. Box 1004

City State Zip Code
Calhoun City MS 38916-1004

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

Name of Employer Occupation
Lincoln Financial Advisors Registered Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: 60620.C174027

Amount of Each Receipt this Period
40.00

Receipt

B. Full Name (Last, First, Middle Initial)
John M. Schroff

Mailing Address P. O. Box 560

City State Zip Code
Waynesboro MS 39367-0560

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

Name of Employer Occupation
Self Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 6

Transaction ID: 60717.C174512

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address 453 Carmargue Ln.

City State Zip Code
Biloxi MS 39531

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

Name of Employer Occupation
Bancorp South Bank Insurance Rep.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 0 6

Transaction ID: 60620.C173885

Amount of Each Receipt this Period
10.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 250.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Wilda Butler		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 5746 Parker Road		Transaction ID: 60620.C173177	
City State Zip Code Smithdale MS 39664-7227	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A Occupation Homemaker	Aggregate Year-to-Date ▼ 240.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Shirley Hall		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 269 Monterey Road		Transaction ID: 60620.C174028	
City State Zip Code Jackson MS 39218	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Self Occupation Semi-Retired	Aggregate Year-to-Date ▼ 550.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Tommy Dulaney		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6	
Mailing Address 5805 Windsor Circle		Transaction ID: 60620.C174062	
City State Zip Code Meridian MS 39305	Amount of Each Receipt this Period 8000.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Structural Steel Occupation Executive	Aggregate Year-to-Date ▼ 8300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	8420.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Sue Tate Mailing Address P. O. Drawer B City State Zip Code Tupelo MS 38802-1240 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 3 / 2 0 0 6 Transaction ID: 60620.C173373 Amount of Each Receipt this Period 150.00 Receipt
Name of Employer Occupation Tate Properties Owner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 225.00		

B. Full Name (Last, First, Middle Initial) David Ford Mailing Address 411 Cove Drive City State Zip Code Biloxi MS 39531-2001 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 6 Transaction ID: 60620.C174121 Amount of Each Receipt this Period 100.00 Receipt
Name of Employer Occupation Mississippi Power Co. Director Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

C. Full Name (Last, First, Middle Initial) Daphne Williamson Mailing Address P. O. Box 2268 City State Zip Code Columbus MS 39704-2268 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 6 Transaction ID: 60717.C174302 Amount of Each Receipt this Period 500.00 Receipt
Name of Employer Occupation N/A Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 / 111
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Charles Pittman

Mailing Address P.O. Box 211

City State Zip Code
Raymond MS 39154

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

Name of Employer
State Of Mississippi

Occupation
Constituent Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173920

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address P.O. Box 629

City State Zip Code
Canton MS 39046

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

Name of Employer
Butchart, Ellzey

Occupation
CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2006

Transaction ID: 60620.C174166

Amount of Each Receipt this Period
150.00

Receipt

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

Mailing Address 9114 Victoria Circle

City State Zip Code
Gulfport MS 39503

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

Name of Employer
Hancock Bank

Occupation
Banker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7000.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2006

Transaction ID: 60717.C174396

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	5170.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 / 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Dennis Coulter

Mailing Address 3300 Drummond Street

City State Zip Code
Vicksburg MS 39180

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

Name of Employer Occupation
Entergy Corporation Health Physist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2006

Transaction ID: 60717.C174343

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Larry L. Johnson

Mailing Address P. O. Box 12004

City State Zip Code
Jackson MS 39236

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

Name of Employer Occupation
Landmark Development Inc Real Estate Develop.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 6250.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2006

Transaction ID: 60620.C174167

Amount of Each Receipt this Period
1250.00

Receipt

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

Mailing Address 2508 Savery Drive

City State Zip Code
Tupelo MS 38801

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

Name of Employer Occupation
Peoples Bank Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173927

Amount of Each Receipt this Period
10.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 1360.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Max Phillips		Date of Receipt M M / D D / Y Y Y Y 06 / 08 / 2006	
Mailing Address P.O. Box 335		Transaction ID: 60620.C173928	
City State Zip Code Taylorsville MS 39168		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Joe Tatum		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 2600 Mimosa Ln.		Transaction ID: 60620.C174031	
City State Zip Code Hattiesburg MS 39402		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Tatum DQV Occupation Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Donna Roberts		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 503 N. Lamar Blvd.		Transaction ID: 60620.C174012	
City State Zip Code Oxford MS 38655		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	360.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 / 111
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Cheryl Sparkman Mailing Address P.O. Box 26 City State Zip Code Scooba MS 39358 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60620.C174118 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Receipt	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	4		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		1	4		2	0	0	6														
50.00																							
Name of Employer MS. Dept. of Human Services Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>150.00</td> </tr> </table>		150.00																					
150.00																							

B. Full Name (Last, First, Middle Initial) Cheryl Sparkman Mailing Address P.O. Box 26 City State Zip Code Scooba MS 39358 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60717.C174381 Amount of Each Receipt this Period <table border="1"> <tr> <td>150.00</td> </tr> </table> Receipt	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	0	6	150.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	2		2	0	0	6														
150.00																							
Name of Employer MS. Dept. of Human Services Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>300.00</td> </tr> </table>		300.00																					
300.00																							

C. Full Name (Last, First, Middle Initial) Quinton Dickerson, III Mailing Address 112 Lakeview Court City State Zip Code Madison MS 39110 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60620.C173941 Amount of Each Receipt this Period <table border="1"> <tr> <td>20.00</td> </tr> </table> Receipt	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	8		2	0	0	6	20.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		0	8		2	0	0	6														
20.00																							
Name of Employer Self Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>120.00</td> </tr> </table>		120.00																					
120.00																							

SUBTOTAL of Receipts This Page (optional)	220.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Quinton Dickerson, III

Mailing Address 112 Lakeview Court

City State Zip Code
Madison MS 39110

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

Name of Employer Self Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2006

Transaction ID: 60620.C174048

Amount of Each Receipt this Period
125.00

Receipt

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

Mailing Address P.O. Box 1031

City State Zip Code
Starkville MS 39760

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2006

Transaction ID: 60717.C174388

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address P.O. Box 1506

City State Zip Code
Oxford MS 38655

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

Name of Employer N/A Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 635.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2006

Transaction ID: 60620.C174032

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	575.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Anita Thompson

Mailing Address Route 1, Box 259

City State Zip Code
Bailey MS 39320

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173948

Amount of Each Receipt this Period
10.00

Receipt

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

Mailing Address P.O. Box 700

City State Zip Code
Prentiss MS 39474

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

Name of Employer Self Occupation Dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173952

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address Wilsons Termite
206 A E. Government St.

City State Zip Code
Brandon MS 39042

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

Name of Employer Wilsons Termite Occupation Pest Control

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173956

Amount of Each Receipt this Period
80.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	290.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Bill Brooks

Mailing Address 2227 Country Club Dr.

City State Zip Code
Yazoo City MS 39194

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
06 / 22 / 2006

Transaction ID: 60717.C174358

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address P.O. Box 1458

City State Zip Code
Biloxi MS 39533

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

Name of Employer Self Occupation Seafood Factory

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1225.00

Date of Receipt
06 / 02 / 2006

Transaction ID: 60601.C173158

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address P.O. Box 1199

City State Zip Code
Cleveland MS 38732

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

Name of Employer N/A Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
06 / 08 / 2006

Transaction ID: 60620.C173963

Amount of Each Receipt this Period
40.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 1240.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
David Young

Mailing Address 4414 Hwy. 178 West

City State Zip Code
Red Banks MS 38661

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

Name of Employer Occupation
D & B Transport Owner/manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2006

Transaction ID: 60620.C173965

Amount of Each Receipt this Period
30.00

Receipt

B. Full Name (Last, First, Middle Initial)
Bobby Lee Graham, Jr.

Mailing Address 2306 Twin Lakes Circle

City State Zip Code
Jackson MS 39211-6757

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

Name of Employer Occupation
Self Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2006

Transaction ID: 60717.C174398

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 6360 I 55 North Ste. 210

City State Zip Code
Jackson MS 39211-2075

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

Name of Employer Occupation
Self Investments

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2006

Transaction ID: 60601.C173154

Amount of Each Receipt this Period
10000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	10280.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
W. Raiford Hancock

Mailing Address 537 Hwy 433 South

City State Zip Code
Bentonia MS 39040

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

Name of Employer
Self Employed

Occupation
Oil Field Const.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2006

Transaction ID: 60620.C174019

Amount of Each Receipt this Period
1250.00

Receipt

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

Mailing Address 548 Hwy 468

City State Zip Code
Brandon MS 39042

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

Name of Employer
N/A

Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2006

Transaction ID: 60620.C173237

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 18 Sleepy Hollow Path

City State Zip Code
Carriere MS 39426

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

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
06 / 05 / 2006

Transaction ID: 60620.C173331

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1550.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Lester Spell

Mailing Address 1 Tram Rd.

City State Zip Code
Jackson MS 39218

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

Name of Employer State Of Mississippi Occupation Commissioner of Agriculture

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 80.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2006

Transaction ID: 60620.C174150

Amount of Each Receipt this Period
80.00

Receipt

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

Mailing Address 1 Tram Rd.

City State Zip Code
Jackson MS 39218

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

Name of Employer State Of Mississippi Occupation Commissioner of Agriculture

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2006

Transaction ID: 60620.C174149

Amount of Each Receipt this Period
120.00

Receipt

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

Mailing Address 127 Victoria Lane

City State Zip Code
Pass Christian MS 39571

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2006

Transaction ID: 60620.C173228

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
David New

Mailing Address P.O. Box 1487

City State Zip Code
Natchez MS 39121-1487

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

Name of Employer Occupation
New Oil Company President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5200.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2006

Transaction ID: 60620.C174038

Amount of Each Receipt this Period
5000.00

Receipt

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

Mailing Address 4900 Country Club Drive

City State Zip Code
Meridian MS 39305

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

Name of Employer Occupation
Rush Foundation Hospital Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2006

Transaction ID: 60620.C173307

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
J.D. Hankins II

Mailing Address P.O. Box 517

City State Zip Code
Ripley MS 38663-0517

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt
MM / DD / YYYY
06 / 03 / 2006

Transaction ID: 60620.C173358

Amount of Each Receipt this Period
195.00

Receipt

SUBTOTAL of Receipts This Page (optional)	5295.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Charles Bass

Mailing Address 69 Spell Drive

City State Zip Code
Columbia MS 39429-9172

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

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
06 / 06 / 2006

Transaction ID: 60620.C173405

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
John E. Vaughn

Mailing Address 7410 Vaiden Rd. #RT 3

City State Zip Code
Hernando MS 38632

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2006

Transaction ID: 60717.C174356

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 810 Westerly Drive

City State Zip Code
Brandon MS 39042

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

Name of Employer Duggan & Coxwell, PLLC Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2006

Transaction ID: 60717.C174405

Amount of Each Receipt this Period
80.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	280.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address P.O. Box 60

City Amory State MS Zip Code 38821

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

Name of Employer The Wax Company Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
06 / 05 / 2006

Transaction ID: 60620.C173344

Amount of Each Receipt this Period
1250.00

Receipt

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

Mailing Address 328 Westview Drive

City Biloxi State MS Zip Code 39531

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

Name of Employer Self Occupation Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
06 / 05 / 2006

Transaction ID: 60620.C173349

Amount of Each Receipt this Period
1250.00

Receipt

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

Mailing Address 328 Westview Drive

City Biloxi State MS Zip Code 39531

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

Name of Employer Self Occupation Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2050.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2006

Transaction ID: 60620.C174169

Amount of Each Receipt this Period
800.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	3300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

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

Mailing Address 200 E. Capitol Street, #1601

City State Zip Code
Jackson MS 39201

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

Name of Employer N/A Occupation Home Maker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
06 / 05 / 2006

Transaction ID: 60620.C173351

Amount of Each Receipt this Period
5000.00

Receipt

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

Mailing Address 100 Burnham Court

City State Zip Code
Clinton MS 39056

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

Name of Employer Vanguard Strategies Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 03 / 2006

Transaction ID: 60620.C173369

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 100 Burnham Court

City State Zip Code
Clinton MS 39056

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

Name of Employer Vanguard Strategies Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2006

Transaction ID: 60717.C174383

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	5500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Mark Jordan

Mailing Address P.O. Box 328

City State Zip Code
Madison MS 39130

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

Name of Employer Self Occupation Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
06 / 09 / 2006

Transaction ID: 60620.C174029

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address P.O. Box 16883

City State Zip Code
Jackson MS 39236

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

Name of Employer Brunini Law Firm Occupation Legal Assistant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
06 / 09 / 2006

Transaction ID: 60620.C174039

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address P.O. Box 119

City State Zip Code
Jackson MS 39205

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
06 / 09 / 2006

Transaction ID: 60620.C174052

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Eloise Pugar-Thomson

Mailing Address 6740-202 Huntington Lakes Circle

City State Zip Code
Naples FL 34119

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

Name of Employer
Self Employed

Occupation
Aerospace Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2006

Transaction ID: 60620.C174064

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 161 Overlook Pointe Drive

City State Zip Code
Ridgeland MS 39157

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

Name of Employer
Regions Bank

Occupation
Banker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2006

Transaction ID: 60620.C174073

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 161 Overlook Pointe Drive

City State Zip Code
Ridgeland MS 39157

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

Name of Employer
Regions Bank

Occupation
Banker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2006

Transaction ID: 60620.C174146

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	520.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Jennie Simmons

Mailing Address P.O. Box 206

City State Zip Code
Lake MS 39092

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

Name of Employer
Simmons Erosion Control, Inc.

Occupation
Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2006

Transaction ID: 60620.C174165

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 467 Old Sawmill Road

City State Zip Code
Lake MS 39092

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

Name of Employer
Joe McGee Construction

Occupation
Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2006

Transaction ID: 60620.C174170

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 730 Adkins Blvd.

City State Zip Code
Jackson MS 39211

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

Name of Employer
Bank Plus

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2006

Transaction ID: 60717.C174208

Amount of Each Receipt this Period
1250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 66 / 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Andy Gipson		Date of Receipt MM / DD / YYYY 06 / 22 / 2006
Mailing Address 414 Holly Grove Circle		Transaction ID: 60717.C174397
City Braxton	State MS	Zip Code 39044-2921
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer Watkins Ludlam Attorneys	Occupation Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Patricia Thompson		Date of Receipt MM / DD / YYYY 06 / 27 / 2006
Mailing Address 1739 University Ave. PMV144		Transaction ID: 60717.C174520
City Oxford	State MS	Zip Code 38655
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 205.00
Name of Employer Self	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

SUBTOTAL of Receipts This Page (optional)	▶	445.00
TOTAL This Period (last page this line number only)	▶	84075.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 111
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Friends Of Roger Wicker		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2006	
Mailing Address P. O. Box 874		Transaction ID: 60620.C174143	
City State Zip Code Tupelo MS 38802		Amount of Each Receipt this Period 8800.00	
FEC ID number of contributing federal political committee. C C00364380		Receipt	
Name of Employer U. S. House Of Representatives		Occupation Congressman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) B. Pickering For Congress		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2006	
Mailing Address PO Box 4297		Transaction ID: 60620.C173350	
City State Zip Code Brandon MS 39047-4297		Amount of Each Receipt this Period 10000.00	
FEC ID number of contributing federal political committee. C C00308577		Receipt	
Name of Employer N/A		Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) C. BancorpSouth Bank PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 20 / 2006	
Mailing Address Attn: Aubrey Patterson P.O. Box 789		Transaction ID: 60620.C174147	
City State Zip Code Tupelo MS 38802-0789		Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. C C00183962		Receipt	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional) ▶	20050.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 68 / 111
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Irby Political Action Committee

Mailing Address Attn: Stuart Irby
P.O. Box 1819

City State Zip Code
Jackson MS 39215

FEC ID number of contributing federal political committee. **C** C00104364

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1658.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	0	6

Transaction ID: 60717.C174525

Amount of Each Receipt this Period
1658.33

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1658.33
TOTAL This Period (last page this line number only)	▶	21708.33

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 69 / 111	
	(check only one)			
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full) Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Friends of Phil Bryant	
Mailing Address P. O. Box 5141	
City Brandon	State MS
Zip Code 39047	
FEC ID number of contributing federal political committee.	C
Name of Employer N/A	Occupation N/A
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00

Date of Receipt MM / DD / YYYY 06 / 08 / 2006
Transaction ID: 60620.C173846
Amount of Each Receipt this Period 10.00
Receipt

SUBTOTAL of Receipts This Page (optional)	10.00
TOTAL This Period (last page this line number only)	10.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 70 / 111	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
James Herring

Mailing Address 232 E. Semmes Street

City State Zip Code
Canton MS 39046-4530

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

Name of Employer Occupation
Herring Long and Crews Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
645.21

Date of Receipt
MM / DD / YYYY
06 / 02 / 2006

Transaction ID: 60601.C173157

Amount of Each Receipt this Period
645.21

Offsets to Operating Expenditure

SUBTOTAL of Receipts This Page (optional)	▶	645.21
TOTAL This Period (last page this line number only)	▶	645.21

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 71 / 111

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Whitney Warrington		Transaction ID: 60620.E11468 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1701 N. State St. P.O. Box 151519		Amount of Each Disbursement this Period 253.50
City Jackson State MS Zip Code 39210-	Category/ Type 001 -CONTRACT LABOR	
Purpose of Disbursement -Contract Labor		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nathan Wells		Transaction ID: 60620.E11461 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 790 Highpoint Drive		Amount of Each Disbursement this Period 553.02
City Byram State MS Zip Code 39272-	Category/ Type REIMBURSEMENT: SEE BELOW	
Purpose of Disbursement REIMBURSEMENT: SEE BELOW		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Blue Cross & Blue Shield of MS		Transaction ID: 60620.E11462 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address P. O. Box 23082		Amount of Each Disbursement this Period 553.02
City Jackson State MS Zip Code 39225-3082	Category/ Type 001 [MEMO ITEM] MEMO: -HEALTH INSURANCE	
Purpose of Disbursement -Health Insurance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	806.52
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 72 / 111

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

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Whitney Warrington		Transaction ID: 60717.E11541 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1701 N. State St. P.O. Box 151519		Amount of Each Disbursement this Period 302.70
City Jackson State MS Zip Code 39210-	Category/ Type 001 -CONTRACT LABOR	
Purpose of Disbursement -Contract Labor		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mississippi Employment Security Comm.		Transaction ID: 60620.E11521 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address P O Box 22781		Amount of Each Disbursement this Period 64.40
City Jackson State MS Zip Code 39225-2781	Category/ Type 001 -PAYROLL TAXES	
Purpose of Disbursement -Payroll Taxes		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mississippi State Tax Commission		Transaction ID: 60620.E11520 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address P. O. Box 960		Amount of Each Disbursement this Period 368.98
City Jackson State MS Zip Code 39205-	Category/ Type 001 -PAYROLL TAXES	
Purpose of Disbursement -Payroll Taxes		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	736.08
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Mamie C. Taylor		Transaction ID: 60601.E11456 Date of Disbursement 06 / 01 / 2006	
Mailing Address 408 Timber Ridge Way		Amount of Each Disbursement this Period 114.56	
City Brandon	State MS	Zip Code 39047-	REIMBURSEMENT: SEE BELOW
Purpose of Disbursement REIMBURSEMENT: SEE BELOW		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Blue Cross Blue Shield of TN		Transaction ID: 60601.E11457 Date of Disbursement 06 / 01 / 2006	
Mailing Address 85 N. Danny Thomas Blvd.		Amount of Each Disbursement this Period 114.56	
City Memphis	State TN	Zip Code 38103-2398	[MEMO ITEM] MEMO: -HEALTH INSURANCE
Purpose of Disbursement -Health Insurance		Category/ Type 001	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Carl Woods, III		Transaction ID: 60717.E11540 Date of Disbursement 06 / 23 / 2006	
Mailing Address 1701 North State Street P.O. Box 151588		Amount of Each Disbursement this Period 362.10	
City Jackson	State MS	Zip Code 39210-	-CONTRACT LABOR
Purpose of Disbursement -Contract Labor		Category/ Type 001	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	476.66
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 74 / 111

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Blue Cross & Blue Shield of MS		Transaction ID: 60717.E11553 Date of Disbursement 06 / 30 / 2006	
Mailing Address P. O. Box 23082		Amount of Each Disbursement this Period 1649.57	
City Jackson State MS Zip Code 39225-3082	Purpose of Disbursement -Health Insurance Candidate Name Category/Type: 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ -HEALTH INSURANCE		

Full Name (Last, First, Middle Initial) B. Bluebonnet Life Insurance Company		Transaction ID: 60717.E11557 Date of Disbursement 06 / 30 / 2006	
Mailing Address P. O. Box 22867		Amount of Each Disbursement this Period 42.75	
City Jackson State MS Zip Code 39225-2867	Purpose of Disbursement -Insurance Candidate Name Category/Type: 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ -INSURANCE		

Full Name (Last, First, Middle Initial) C. Butchart, Ellzey & Assoc., PC		Transaction ID: 60717.E11559 Date of Disbursement 06 / 30 / 2006	
Mailing Address P. O. Box 629		Amount of Each Disbursement this Period 977.00	
City Canton State MS Zip Code 39046-0629	Purpose of Disbursement -Accounting Fees Candidate Name Category/Type: 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ -ACCOUNTING FEES		

SUBTOTAL of Disbursements This Page (optional) ▶	2669.32
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 75 / 111

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. ADP, Inc.		Transaction ID: 60717.E11591 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 73.51
City Atlanta State GA Zip Code 30328-	Category/ Type 001 -PAYROLL PROCESSING FEES	
Purpose of Disbursement -Payroll Processing Fees Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. ADP, Inc.		Transaction ID: 60620.E11511 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 73.51
City Atlanta State GA Zip Code 30328-	Category/ Type 001 -PAYROLL PROCESSING FEES	
Purpose of Disbursement -Payroll Processing Fees Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Fred Dunlap		Transaction ID: 60717.E11545 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 126 Morrow Road		Amount of Each Disbursement this Period 252.00
City Brandon State MS Zip Code 39042-	Category/ Type 001 -CONTRACT EMPLOYEE	
Purpose of Disbursement -Contract Employee Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	399.02
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 76 / 111

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Carl Woods, III		Transaction ID: 60620.E11469 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1701 North State Street P.O. Box 151588		Amount of Each Disbursement this Period 170.70
City Jackson State MS Zip Code 39210-	-CONTRACT LABOR	
Purpose of Disbursement -Contract Labor		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Butchart, Ellzey & Assoc., PC		Transaction ID: 60620.E11492 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address P. O. Box 629		Amount of Each Disbursement this Period 1138.00
City Canton State MS Zip Code 39046-0629	-ACCOUNTING FEES	
Purpose of Disbursement -Accounting Fees		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Mississippi State Tax Commission		Transaction ID: 60717.E11593 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address P. O. Box 960		Amount of Each Disbursement this Period 365.78
City Jackson State MS Zip Code 39205-	-PAYROLL TAXES	
Purpose of Disbursement -Payroll Taxes		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1674.48
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 77 / 111

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Transaction ID: 60717.E11592 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address P. O. Box 70503		Amount of Each Disbursement this Period 2597.99
City Charlotte State NC Zip Code 28272-0503	-PAYROLL TAXES	
Purpose of Disbursement -Payroll Taxes Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Transaction ID: 60620.E11519 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address P. O. Box 70503		Amount of Each Disbursement this Period 2622.83
City Charlotte State NC Zip Code 28272-0503	-PAYROLL TAXES	
Purpose of Disbursement -Payroll Taxes Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Mississippi Employment Security Comm.		Transaction ID: 60717.E11594 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address P O Box 22781		Amount of Each Disbursement this Period 61.52
City Jackson State MS Zip Code 39225-2781	-PAYROLL TAXES	
Purpose of Disbursement -Payroll Taxes Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	5282.34
TOTAL This Period (last page this line number only) ▶	12044.42

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 78 / 111

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Eloise Pugar-Thomson

Mailing Address 6740-202 Huntington Lakes Circle

City Naples State FL Zip Code 34119-

Purpose of Disbursement
Refund of Contribution Refund of Contrib

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 60620.E11525

Date of Disbursement

^M 0	^M 6	/	^D 2	^D 0	/	^Y 2	^Y 0	^Y 0	^Y 6
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

Amount of Each Disbursement this Period

200.00

010
Category/ Type

SUBTOTAL of Disbursements This Page (optional)	200.00
TOTAL This Period (last page this line number only)	200.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 79 / 111

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. The Senate Victory Fund

Mailing Address P. O. Box 7274

City State Zip Code
Tupelo MS 38802-

Purpose of Disbursement
Refund of Contribution Contribution Refu

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 60620.E11509

Date of Disbursement

06 / 19 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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

5000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Arnold S. Hederman		Transaction ID: 60620.E11515 Date of Disbursement MM / DD / YYYY 06 / 15 / 2006	
Mailing Address 2240 Bellingrath Rd.		Amount of Each Disbursement this Period 2308.62	
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) B. Arnold S. Hederman		Transaction ID: 60717.E11587 Date of Disbursement MM / DD / YYYY 06 / 30 / 2006	
Mailing Address 2240 Bellingrath Rd.		Amount of Each Disbursement this Period 2308.62	
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) C. Natalie Cole		Transaction ID: 60717.E11585 Date of Disbursement MM / DD / YYYY 06 / 30 / 2006	
Mailing Address 250 Jacks Place		Amount of Each Disbursement this Period 496.79	
City Brandon State MS Zip Code 39047-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

SUBTOTAL of Disbursements This Page (optional) ▶	5114.03
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 81 / 111

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Edna K. Apostle		Transaction ID: 60620.E11512 Date of Disbursement MM / DD / YYYY 06 / 15 / 2006	
Mailing Address 974 Bayridge Drive		Amount of Each Disbursement this Period 1131.14	
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) B. T.J. Harvey		Transaction ID: 60717.E11586 Date of Disbursement MM / DD / YYYY 06 / 30 / 2006	
Mailing Address 5 Stanford Court		Amount of Each Disbursement this Period 889.98	
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) C. Mamie C. Taylor		Transaction ID: 60620.E11517 Date of Disbursement MM / DD / YYYY 06 / 15 / 2006	
Mailing Address 408 Timber Ridge Way		Amount of Each Disbursement this Period 1091.69	
City Brandon State MS Zip Code 39047-	Purpose of Disbursement FEA SALARY Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

SUBTOTAL of Disbursements This Page (optional) ▶	3112.81
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 82 / 111

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Edna K. Apostle		Transaction ID: 60717.E11584 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 974 Bayridge Drive		Amount of Each Disbursement this Period 1131.13
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY

Full Name (Last, First, Middle Initial) B. Mamie C. Taylor		Transaction ID: 60717.E11589 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 408 Timber Ridge Way		Amount of Each Disbursement this Period 1091.68
City Brandon State MS Zip Code 39047-	Purpose of Disbursement FEA SALARY Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY

Full Name (Last, First, Middle Initial) C. Natalie Cole		Transaction ID: 60620.E11513 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 250 Jacks Place		Amount of Each Disbursement this Period 555.46
City Brandon State MS Zip Code 39047-	Purpose of Disbursement FEA SALARY Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY

SUBTOTAL of Disbursements This Page (optional) ▶	2778.27
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Richard C. Lacey		Transaction ID: 60717.E11588 Date of Disbursement 06 / 30 / 2006	
Mailing Address 120 North Congress St. Apt. 1102		Amount of Each Disbursement this Period 1197.60	
City Jackson State MS Zip Code 39201-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) B. Nathan Wells		Transaction ID: 60717.E11590 Date of Disbursement 06 / 30 / 2006	
Mailing Address 790 Highpoint Drive		Amount of Each Disbursement this Period 1193.22	
City Byram State MS Zip Code 39272-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

Full Name (Last, First, Middle Initial) C. T.J. Harvey		Transaction ID: 60620.E11514 Date of Disbursement 06 / 15 / 2006	
Mailing Address 5 Stanford Court		Amount of Each Disbursement this Period 889.97	
City Jackson State MS Zip Code 39211-	Purpose of Disbursement FEA SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA SALARY	

SUBTOTAL of Disbursements This Page (optional) ▶	3280.79
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Mississippi Republican Party

Full Name (Last, First, Middle Initial) A. Richard C. Lacey		Transaction ID: 60620.E11516	
Mailing Address 120 North Congress St. Apt. 1102		Date of Disbursement 06 / 15 / 2006	
City Jackson	State MS	Zip Code 39201-	Amount of Each Disbursement this Period 1197.61
Purpose of Disbursement FEA SALARY		Category/ Type	
Candidate Name			
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) ▼		FEA SALARY
State: District:			

Full Name (Last, First, Middle Initial) B. Nathan Wells		Transaction ID: 60620.E11518	
Mailing Address 790 Highpoint Drive		Date of Disbursement 06 / 15 / 2006	
City Byram	State MS	Zip Code 39272-	Amount of Each Disbursement this Period 1193.23
Purpose of Disbursement FEA SALARY		Category/ Type	
Candidate Name			
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) ▼		FEA SALARY
State: District:			

SUBTOTAL of Disbursements This Page (optional)	2390.84
TOTAL This Period (last page this line number only)	16676.74

METHOD OF ALLOCATION FOR:

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

NAME OF COMMITTEE (In Full)
 Mississippi Republican Party

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

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

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

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

or

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

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

- Administrative Generic Voter Drive Public Communications Referencing Party Only

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE 86 / 111

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

2006 SUSTAINING MEMBERSHIP

ACTIVITY IS:

 Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

 New Revised Same as Previously Reported

FEDERAL %

98.00 %

NONFEDERAL %

2.00 %Transaction ID:
H2160106.J18

ACTIVITY OR EVENT IDENTIFIER

2006 URF ANNUAL DINNER

ACTIVITY IS:

 Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

 New Revised Same as Previously Reported

FEDERAL %

86.00 %

NONFEDERAL %

14.00 %Transaction ID:
H2260717.J23

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

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

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

Mailing Address
6628 Lake Glen

City State Zip Code
Jackson MS 39213-

001

Purpose of Disbursement:
001-Janitorial

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

112665.67

Activity or Event Identifier:
ADMINISTRATION B 3

Date / /

Transaction ID: H460601.E11458

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

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

Mailing Address
P.O. Box 1775

City State Zip Code
Brandon MS 39043-

001

Purpose of Disbursement:
001-Lawn Care

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

112415.67

Activity or Event Identifier:
ADMINISTRATION B 3

Date / /

Transaction ID: H460601.E11459

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

C. Full Name (Last, First, Middle Initial)
Pennington & Trim Alarm

Mailing Address
4374 Mangum Drive Suite C

City State Zip Code
Jackson MS 39232-2111

001

Purpose of Disbursement:
001-Building Security System

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

112315.67

Activity or Event Identifier:
ADMINISTRATION B 3

Date / /

Transaction ID: H460601.E11460

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.53		65.93		83.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.03		342.43		433.46

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Platinum Plus for Business

Mailing Address
P.O. Box 15469

City State Zip Code
Wilmington DE 19886-5469

Purpose of Disbursement:
Credit Card: See Below

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

112892.62

Date 06 / 06 / 2006

Transaction ID: H460620.E11463

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.66		179.29		226.95

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

Mailing Address
Trustmark Park One Braves Way

City State Zip Code
Pearl MS 39208-

Purpose of Disbursement:
001-Promotional

001
Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]001-Promotional

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150.00

Date 06 / 06 / 2006

Transaction ID: H460620.E11470

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.50		118.50		150.00

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

Mailing Address
5100 North State

City State Zip Code
Jackson MS 39206-

Purpose of Disbursement:
002-Gasoline

002
Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]002-Gasoline

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

53.15

Date 06 / 06 / 2006

Transaction ID: H460620.E11471

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.16		41.99		53.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.66		179.29		226.95

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Shelaine Restuarant

Mailing Address
202 Hwy 45 North

City Aberdeen	State MS	Zip Code 39730-	001
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Purpose of Disbursement:
001-Luncheon

Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]001-Luncheon

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

Allocated Activity or Event Year-To-Date
23.80

Date 06 / 06 / 2006
Transaction ID: H460620.E11472

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.00		18.80		23.80

B. Full Name (Last, First, Middle Initial)
Platinum Plus for Business

Mailing Address
P.O. Box 15469

City Wilmington	State DE	Zip Code 19886-5469	
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Purpose of Disbursement:
Credit Card: See Below

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
112937.62

Date 06 / 06 / 2006
Transaction ID: H460620.E11464

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.45		35.55		45.00

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

Mailing Address
602 South State Street

City Jackson	State MS	Zip Code 39201-	002
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Purpose of Disbursement:
002-Gasoline

Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]002-Gasoline

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

Allocated Activity or Event Year-To-Date
45.00

Date 06 / 06 / 2006
Transaction ID: H460620.E11473

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.45		35.55		45.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.45		35.55		45.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Platinum Plus for Business			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 15469			Allocated Activity or Event Year-To-Date 115262.94	
City Wilmington	State DE	Zip Code 19886-5469	Date MM / DD / YYYY 06 / 06 / 2006	
Purpose of Disbursement: Credit Card: See Below			Category/Type 	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H460620.E11465	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.71		1044.72		1322.43

B. Full Name (Last, First, Middle Initial) Walgreen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 955 North State Street			Allocated Activity or Event Year-To-Date 16.02	
City Jackson	State MS	Zip Code 39201-	Date MM / DD / YYYY 06 / 06 / 2006	
Purpose of Disbursement: 001-Office Supplies/Light Bulbs			Category/Type 001	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]001-Office Supplies/Light Bulbs			Transaction ID: H460620.E11482	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.36		12.66		16.02

C. Full Name (Last, First, Middle Initial) Texaco, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1264 High Street			Allocated Activity or Event Year-To-Date 43.00	
City Jackson	State MS	Zip Code 39202-	Date MM / DD / YYYY 06 / 06 / 2006	
Purpose of Disbursement: 002-Gasoline			Category/Type 002	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]002-Gasoline			Transaction ID: H460620.E11476	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.03		33.97		43.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.71		1044.72		1322.43

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Shell Station			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address No. 57525881207 1263 High Street			Allocated Activity or Event Year-To-Date _____ 21.58																		
City State Zip Code Jackson MS 39211-	_____ 002		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>6</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>6</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	0	6	D	D	0	6	Y	Y	Y	Y	2	0	0	6
M	M																				
0	6																				
D	D																				
0	6																				
Y	Y	Y	Y																		
2	0	0	6																		
Purpose of Disbursement: 002-Gasoline			Category/ Type																		
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]002-Gasoline			Transaction ID: H460620.E11475																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 4.53		_____ 17.05		_____ 21.58

B. Full Name (Last, First, Middle Initial) Cellular South			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 5260 I-55 North			Allocated Activity or Event Year-To-Date _____ 26.74																		
City State Zip Code Jackson MS 39211-	_____ 001		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>6</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>6</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	0	6	D	D	0	6	Y	Y	Y	Y	2	0	0	6
M	M																				
0	6																				
D	D																				
0	6																				
Y	Y	Y	Y																		
2	0	0	6																		
Purpose of Disbursement: 001-Office Equipment/Phone			Category/ Type																		
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]001-Office Equipment/Phone			Transaction ID: H460620.E11480																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 5.62		_____ 21.12		_____ 26.74

C. Full Name (Last, First, Middle Initial) Elite Restaurant			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 141 E. Capitol St.			Allocated Activity or Event Year-To-Date _____ 27.31																		
City State Zip Code Jackson MS 39201-	_____ 001		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>6</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>6</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	0	6	D	D	0	6	Y	Y	Y	Y	2	0	0	6
M	M																				
0	6																				
D	D																				
0	6																				
Y	Y	Y	Y																		
2	0	0	6																		
Purpose of Disbursement: 001-Luncheon			Category/ Type																		
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]001-Luncheon			Transaction ID: H460620.E11481																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 5.74		_____ 21.57		_____ 27.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 0.00		_____ 0.00		_____ 0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Harveys			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 200 Main St.			Allocated Activity or Event Year-To-Date 40.53	
City Columbus	State MS	Zip Code 39701-	Date <input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 001-Luncheon			Transaction ID: H460620.E11484	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]001-Luncheon			Category/ Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.51		32.02		40.53

B. Full Name (Last, First, Middle Initial) Harveys			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 200 Main St.			Allocated Activity or Event Year-To-Date 47.00	
City Columbus	State MS	Zip Code 39701-	Date <input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 001-Luncheon			Transaction ID: H460620.E11474	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]001-Luncheon			Category/ Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.87		37.13		47.00

C. Full Name (Last, First, Middle Initial) International Buisness Cafe			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1300 Nicollet Mall Ste. 2090			Allocated Activity or Event Year-To-Date 6.99	
City Minneapolis	State MN	Zip Code 55406-	Date <input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: 001-Luncheon			Transaction ID: H460620.E11477	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]001-Luncheon			Category/ Type 001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.47		5.52		6.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Hyatt Regency Minneapolis

Mailing Address
1300 Nicollet Mall

City	State	Zip Code	002
Minneapolis	MN	55403-	

Purpose of Disbursement:
002-Hotel

Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]002-Hotel

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

Allocated Activity or Event Year-To-Date
799.41

Date / /
Transaction ID: H460620.E11478

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
167.88		631.53		799.41

B. Full Name (Last, First, Middle Initial)
Creative Host Services

Mailing Address
Stage Deli 4300 Glumack Drive

City	State	Zip Code	001
Saint Paul	MN	55111-	

Purpose of Disbursement:
001-Luncheon

Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]001-Luncheon

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

Allocated Activity or Event Year-To-Date
8.29

Date / /
Transaction ID: H460620.E11479

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.74		6.55		8.29

C. Full Name (Last, First, Middle Initial)
Adobe Systems Inc.

Mailing Address
345 Park Avenue

City	State	Zip Code	001
San Jose	CA	95110-2704	

Purpose of Disbursement:
001-Computer Software

Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]001-Computer Software

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

Allocated Activity or Event Year-To-Date
174.95

Date / /
Transaction ID: H460620.E11483

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.74		138.21		174.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Super Stop

Mailing Address
9733 Old Hwy 45 North

City State Zip Code
Lauderdale MS 39335-002

Purpose of Disbursement:
002-Gasoline Category/Type

Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]002-Gasoline

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

Allocated Activity or Event Year-To-Date
30.36

Date 06 / 06 / 2006

Transaction ID: H460620.E11485

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.38		23.98		30.36

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

Mailing Address
401 Walthall St.

City State Zip Code
Greenwood MS 38930-001

Purpose of Disbursement:
001-Flowers Category/Type

Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]001-Flowers

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

Allocated Activity or Event Year-To-Date
80.25

Date 06 / 06 / 2006

Transaction ID: H460620.E11486

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.85		63.40		80.25

C. Full Name (Last, First, Middle Initial)
Platinum Plus for Business

Mailing Address
P.O. Box 15469

City State Zip Code
Wilmington DE 19886-5469

Purpose of Disbursement:
Credit Card: See Below Category/Type

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
113940.51

Date 06 / 06 / 2006

Transaction ID: H460620.E11466

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.61		792.28		1002.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.61		792.28		1002.89

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Hilton Hotel

Mailing Address
1001 East County Line Road

City	State	Zip Code	Category/Type
Jackson	MS	39211-	001

Purpose of Disbursement: 001-Luncheon	Category/Type
	22.66

Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]001-Luncheon

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

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	0	6

Transaction ID: H460620.E11487

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.76		17.90		22.66

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

Mailing Address
1 Lake Avenue P.O. Box 1439

City	State	Zip Code	Category/Type
Colorado Springs	CO	80901-	002

Purpose of Disbursement: 002-Hotel	Category/Type
	980.23

Activity or Event Identifier:
ADMINISTRATION B 3
[MEMO ITEM]002-Hotel

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

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	0	6

Transaction ID: H460620.E11488

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
205.85		774.38		980.23

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

Mailing Address
790 Highpoint Drive

City	State	Zip Code	Category/Type
Byram	MS	39272-	002

Purpose of Disbursement: 002-Mileage	Category/Type
	115357.34

Activity or Event Identifier:
ADMINISTRATION B 3

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

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	9	/	2	0	0	6

Transaction ID: H460620.E11467

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.82		74.58		94.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.82		74.58		94.40

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Entergy

Mailing Address
P. O. Box 8105

City State Zip Code
Baton Rouge LA 70891-8105

001

Purpose of Disbursement:
001-Electricity

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

116225.08

Date 06 / 12 / 2006

Transaction ID: H460620.E11493

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
182.23		685.51		867.74

B. Full Name (Last, First, Middle Initial)
Brads Green Machine

Mailing Address
P.O. Box 41

City State Zip Code
Star MS 39167-

001

Purpose of Disbursement:
001-Lawn Maintenance

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

116574.47

Date 06 / 12 / 2006

Transaction ID: H460620.E11494

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.85		67.15		85.00

C. Full Name (Last, First, Middle Initial)
Allied Waste Service

Mailing Address
Jackson 1035 Old Brandon Road

City State Zip Code
Flowood MS 39232-

001

Purpose of Disbursement:
001-Garbage Pickup

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

116675.52

Date 06 / 12 / 2006

Transaction ID: H460620.E11495

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.22		79.83		101.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
221.30		832.49		1053.79

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address
P. O. Box 94515

City State Zip Code
Palatine IL 60094-4515

001

Purpose of Disbursement:
001-Postage/Shipping

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

116435.97

Activity or Event Identifier:
ADMINISTRATION B 3

Date 06 / 12 / 2006

Transaction ID: H460620.E11496

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.29		166.60		210.89

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

Mailing Address
108 Office Park Drive

City State Zip Code
Brandon MS 39042-

001

Purpose of Disbursement:
001-Pest Control

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

116489.47

Activity or Event Identifier:
ADMINISTRATION B 3

Date 06 / 12 / 2006

Transaction ID: H460620.E11497

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.24		42.26		53.50

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

Mailing Address
681 South Pear Orchard Road

City State Zip Code
Ridgeland MS 39157-

001

Purpose of Disbursement:
001-Luncheon

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

116750.83

Activity or Event Identifier:
ADMINISTRATION B 3

Date 06 / 16 / 2006

Transaction ID: H460620.E11501

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.82		59.49		75.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
71.35		268.35		339.70

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
T.J. Harvey

Mailing Address
5 Stanford Court

City State Zip Code
Jackson MS 39211-

002

Purpose of Disbursement:
002-Taxi

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

117439.60

Date 06 / 19 / 2006

Transaction ID: H460620.E11502

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.80		59.45		75.25

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

Mailing Address
P.O. Box 105262

City State Zip Code
Atlanta GA 30348-5262

001

Purpose of Disbursement:
001-Telephone

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

121407.45

Date 06 / 19 / 2006

Transaction ID: H460620.E11503

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
106.58		400.96		507.54

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

Mailing Address
Dept. 56-4600055510 P.O. Box 689020

City State Zip Code
Des Moines IA 50368-9020

001

Purpose of Disbursement:
001-Office Supplies

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

116964.53

Date 06 / 19 / 2006

Transaction ID: H460620.E11504

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.88		168.82		213.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
167.26		629.23		796.49

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Pitney Bowes Credit Corp.

Mailing Address
P. O. Box 856460

City State Zip Code
Louisville KY 40285-6460

001

Purpose of Disbursement:
001-Postage Meter Equipment

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

117029.23

Activity or Event Identifier:
ADMINISTRATION B 3

Date 06 / 19 / 2006

Transaction ID: H460620.E11505

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.19		177.51		224.70

B. Full Name (Last, First, Middle Initial)
Regions Commercial Loans

Mailing Address
Department 2521 P.O. Box 2153

City State Zip Code
Birmingham AL 35287-

001

Purpose of Disbursement:
001-Building Mortgage

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

120899.91

Activity or Event Identifier:
ADMINISTRATION B 3

Date 06 / 19 / 2006

Transaction ID: H460620.E11506

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
726.67		2733.64		3460.31

C. Full Name (Last, First, Middle Initial)
Marlin Leasing Corp.

Mailing Address
P.O. Box 13604

City State Zip Code
Philadelphia PA 19101-3604

001

Purpose of Disbursement:
001-Postage Meter Equipment

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

117364.35

Activity or Event Identifier:
ADMINISTRATION B 3

Date 06 / 19 / 2006

Transaction ID: H460620.E11507

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.38		264.74		335.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
844.24		3175.89		4020.13

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
U. S. Postmaster

Mailing Address
General Mail Facility

City	State	Zip Code
Jackson	MS	39201-

Purpose of Disbursement:
Void Check No. 12186 Postage Permit

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
116804.53

Date / /
Transaction ID: H460620.E11522

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-33.60		-126.40		-160.00

B. Full Name (Last, First, Middle Initial)
Key Merchant Services LLC

Mailing Address
7207 Chapman Highway

City	State	Zip Code
Knoxville	TN	37920-6609

Purpose of Disbursement:
001-Merchant Fees

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
112232.21

Date / /
Transaction ID: H460620.E11523

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.62		81.33		102.95

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

Mailing Address
790 Highpoint Drive

City	State	Zip Code
Byram	MS	39272-

Purpose of Disbursement:
002-Mileage

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
123470.63

Date / /
Transaction ID: H460717.E11529

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.56		107.44		136.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.58		62.37		78.95

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Edna K. Apostle			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 974 Bayridge Drive			Allocated Activity or Event Year-To-Date 123631.13		
City State Zip Code Jackson MS 39211-	Category/ Type		Date M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6		
Purpose of Disbursement: Reimbursement: See Below			Transaction ID: H460717.E11530		
Activity or Event Identifier: ADMINISTRATION B 3					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.71		47.79		60.50

B. Full Name (Last, First, Middle Initial) Hickory Pit			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1491 Canton Mart Road			Allocated Activity or Event Year-To-Date 60.50		
City State Zip Code Jackson MS 39211-	Category/ Type		Date M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6		
Purpose of Disbursement: 001-Luncheon			Transaction ID: H460717.E11531		
Activity or Event Identifier: ADMINISTRATION B 3 (MEMO ITEM) 001-Luncheon					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.71		47.79		60.50

C. Full Name (Last, First, Middle Initial) Amerimail Direct			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 39			Allocated Activity or Event Year-To-Date 123114.63		
City State Zip Code Jackson MS 39205-0039	Category/ Type		Date M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6		
Purpose of Disbursement: 001-Office Supplies			Transaction ID: H460717.E11532		
Activity or Event Identifier: ADMINISTRATION B 3					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.98		165.47		209.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.69		213.26		269.95

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Amerimail Direct			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 39			Allocated Activity or Event Year-To-Date 122905.18	
City Jackson	State MS	Zip Code 39205-0039	Date M M / D D / Y Y Y Y 06 / 23 / 2006	
Purpose of Disbursement: 001-Office Supplies			Transaction ID: H460717.E11533	
Activity or Event Identifier: ADMINISTRATION B 3				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.45		250.00		316.45

B. Full Name (Last, First, Middle Initial) Bowie Audio Visual Enterprises, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 290 Highpoint Drive			Allocated Activity or Event Year-To-Date 122588.73	
City Ridgeland	State MS	Zip Code 39157-	Date M M / D D / Y Y Y Y 06 / 23 / 2006	
Purpose of Disbursement: 001-Meeting Supplies/Screens			Transaction ID: H460717.E11534	
Activity or Event Identifier: ADMINISTRATION B 3				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
248.07		933.21		1181.28

C. Full Name (Last, First, Middle Initial) Roll Call			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 50 F Street NW, Ste. 700			Allocated Activity or Event Year-To-Date 123836.13	
City Washington	State DC	Zip Code 20001-	Date M M / D D / Y Y Y Y 06 / 23 / 2006	
Purpose of Disbursement: 001-Subsription			Transaction ID: H460717.E11536	
Activity or Event Identifier: ADMINISTRATION B 3				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.05		161.95		205.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
357.57		1345.16		1702.73

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
StorageMax Downtown

Mailing Address
304 South State Street

City	State	Zip Code	001
Jackson	MS	39201-	

Purpose of Disbursement:
001-Storage

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
123334.63

Date 06 / 23 / 2006
Transaction ID: H460717.E11538

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.20		173.80		220.00

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

Mailing Address
P.O. Box 1775

City	State	Zip Code	001
Brandon	MS	39043-	

Purpose of Disbursement:
001-Lawn Care

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
123570.63

Date 06 / 23 / 2006
Transaction ID: H460717.E11539

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

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

Mailing Address
126 Morrow Road

City	State	Zip Code	002
Brandon	MS	39042-	

Purpose of Disbursement:
002-Mileage

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
124248.89

Date 06 / 28 / 2006
Transaction ID: H460717.E11544

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
86.68		326.08		412.76

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
153.88		578.88		732.76

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Fred Dunlap			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 126 Morrow Road			Allocated Activity or Event Year-To-Date 124362.79	
City Brandon	State MS	Zip Code 39042-	Date MM / DD / YYYY 06 / 28 / 2006	
Purpose of Disbursement: Reimbursement: See Below			Category/Type 	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H460717.E11546	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.92		89.98		113.90

B. Full Name (Last, First, Middle Initial) Pantry			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 320 W Government			Allocated Activity or Event Year-To-Date 97.10	
City Brandon	State MS	Zip Code 39042-	Date MM / DD / YYYY 06 / 28 / 2006	
Purpose of Disbursement: 002-Gasoline			Category/Type 002	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]002-Gasoline			Transaction ID: H460717.E11629	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.39		76.71		97.10

C. Full Name (Last, First, Middle Initial) Great Southern			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 206 E. Government			Allocated Activity or Event Year-To-Date 16.80	
City Brandon	State MS	Zip Code 39042-	Date MM / DD / YYYY 06 / 28 / 2006	
Purpose of Disbursement: 002-Gasoline			Category/Type 002	
Activity or Event Identifier: ADMINISTRATION B 3 [MEMO ITEM]002-Gasoline			Transaction ID: H460717.E11630	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.53		13.27		16.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.92		89.98		113.90

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Cingular Wireless

Mailing Address
P.O. Box 31488

City State Zip Code
Tampa FL 33631-

001

Purpose of Disbursement:
001-Cell Phone

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

125803.51

Date MM / DD / YYYY
06 / 30 / 2006

Transaction ID: H460717.E11547

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.37		69.09		87.46

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

Mailing Address
P.O. Box 31488

City State Zip Code
Tampa FL 33631-

001

Purpose of Disbursement:
001-Cell Phone

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

125890.29

Date MM / DD / YYYY
06 / 30 / 2006

Transaction ID: H460717.E11548

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.22		68.56		86.78

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

Mailing Address
P. O. Box 740597

City State Zip Code
Atlanta GA 30374-0597

001

Purpose of Disbursement:
001-Long Distance

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 3

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

126358.27

Date MM / DD / YYYY
06 / 30 / 2006

Transaction ID: H460717.E11549

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.28		369.70		467.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
134.87		507.35		642.22

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) ThyssenKrupp Elevator Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 933004			Allocated Activity or Event Year-To-Date 127437.24	
City Atlanta	State GA	Zip Code 31193-3004	Date MM / DD / YYYY 06 / 30 / 2006	
Purpose of Disbursement: 001-Building Repairs			Category/Type 001	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H460717.E11551	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
201.61		758.45		960.06

B. Full Name (Last, First, Middle Initial) Central Mississippi Telephone Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 107 Shadia Drive			Allocated Activity or Event Year-To-Date 126477.18	
City Clinton	State MS	Zip Code 39056-	Date MM / DD / YYYY 06 / 30 / 2006	
Purpose of Disbursement: 001-Telephone Repairs			Category/Type 001	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H460717.E11552	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.91		82.42		104.33

C. Full Name (Last, First, Middle Initial) Cellular South			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 519			Allocated Activity or Event Year-To-Date 125300.37	
City Meadville	State MS	Zip Code 39653-0519	Date MM / DD / YYYY 06 / 30 / 2006	
Purpose of Disbursement: 001-Cell Phone			Category/Type 001	
Activity or Event Identifier: ADMINISTRATION B 3			Transaction ID: H460717.E11554	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
114.67		431.36		546.03

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
338.19		1272.23		1610.42

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
City Services Center

Mailing Address
Payment Processing Center P.O. Box 1595

City	State	Zip Code	Category/Type
Jackson	MS	39215-1595	001

Purpose of Disbursement:
001-Water/Sewer

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
125716.05

Date / /
Transaction ID: H460717.E11555

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.30		275.76		349.06

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

Mailing Address
P.O. Box 39

City	State	Zip Code	Category/Type
Jackson	MS	39205-0039	001

Purpose of Disbursement:
001-Office Supplies

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
124664.47

Date / /
Transaction ID: H460717.E11556

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.36		46.49		58.85

C. Full Name (Last, First, Middle Initial)
Senator Daniel Webster

Mailing Address
315 S Dillard St.

City	State	Zip Code	Category/Type
Winter Garden	FL	34787-	002

Purpose of Disbursement:
002-Travel Reimbursement

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
127741.19

Date / /
Transaction ID: H460717.E11558

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.83		240.12		303.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
149.49		562.37		711.86

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Cellular South

Mailing Address
P. O. Box 519

City	State	Zip Code	Category/ Type
Meadville	MS	39653-0519	001

Purpose of Disbursement:
001-Cell Phone

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
125366.99

Date / /
Transaction ID: H460717.E11560

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.99		52.63		66.62

B. Full Name (Last, First, Middle Initial)
Discover Business Services

Mailing Address
P. O. Box 52145

City	State	Zip Code	Category/ Type
Phoenix	AZ	85072-	001

Purpose of Disbursement:
001-Merchant Fees

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
126372.85

Date / /
Transaction ID: H460717.E11627

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.06		11.52		14.58

C. Full Name (Last, First, Middle Initial)
Key Merchant Services LLC

Mailing Address
7207 Chapman Highway

City	State	Zip Code	Category/ Type
Knoxville	TN	37920-6609	001

Purpose of Disbursement:
001-Merchant Fees

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
124605.62

Date / /
Transaction ID: H460717.E11628

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.99		191.84		242.83

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.04		255.99		324.03

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Community Bank - Brandon

Mailing Address
P. O. Box 1869

City	State	Zip Code	001
Brandon	MS	39042-	

Purpose of Disbursement:
001-Bank Charges

Activity or Event Identifier:
ADMINISTRATION B 3

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

Allocated Activity or Event Year-To-Date
124754.34

Date 06 / 30 / 2006
Transaction ID: H460717.E11631

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.87		71.00		89.87

B. Full Name (Last, First, Middle Initial)
FLS-DCI

Mailing Address
2401 W. Brehrend Drive Suite 7

City	State	Zip Code	003
Phoenix	AZ	85027-	

Purpose of Disbursement:
003-Phone Bank Sustaining Membershi

Activity or Event Identifier:
2006 SUSTAINING MEMBERSHIP

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

Allocated Activity or Event Year-To-Date
32113.62

Date 06 / 19 / 2006
Transaction ID: H460620.E11508

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2389.63		48.77		2438.40

C. Full Name (Last, First, Middle Initial)
Alpha Printing Company

Mailing Address
P. O. Box 7106

City	State	Zip Code	003
Jackson	MS	39282-7106	

Purpose of Disbursement:
003-Invitation Printing

Activity or Event Identifier:
2006 URF ANNUAL DINNER

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

Allocated Activity or Event Year-To-Date
27459.45

Date 06 / 12 / 2006
Transaction ID: H460620.E11491

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
995.82		162.11		1157.93

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3404.32		281.88		3686.20

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Elwin J. Williams

Mailing Address
1434 Mossline Drive

City	State	Zip Code	003
Jackson	MS	39211-	

Purpose of Disbursement:
003-Photography

Activity or Event Identifier:
2006 URF ANNUAL DINNER

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

Allocated Activity or Event Year-To-Date
27459.45

Date / /
Transaction ID: H460620.E11500

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
215.00		35.00		250.00

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

Mailing Address
940 Buckley Drive

City	State	Zip Code	003
Jackson	MS	39206-	

Purpose of Disbursement:
003-Entertainment URF Dinner

Activity or Event Identifier:
2006 URF ANNUAL DINNER

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

Allocated Activity or Event Year-To-Date
27459.45

Date / /
Transaction ID: H460717.E11526

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
215.00		35.00		250.00

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

Mailing Address
200 East Amite St.

City	State	Zip Code	003
Jackson	MS	39201-	

Purpose of Disbursement:
003-URF Annual Dinner

Activity or Event Identifier:
2006 URF ANNUAL DINNER

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

Allocated Activity or Event Year-To-Date
27459.45

Date / /
Transaction ID: H460717.E11528

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21380.30		3480.51		24860.81

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21810.30		3550.51		25360.81

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Mississippi Republican Party

A. Full Name (Last, First, Middle Initial)
Alpha Printing Company

Mailing Address
P. O. Box 7106

City	State	Zip Code	
Jackson	MS	39282-7106	003

Purpose of Disbursement:
003-Program Printing

Activity or Event Identifier:
2006 URF ANNUAL DINNER

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

Allocated Activity or Event Year-To-Date
27459.45

Date 06 / 23 / 2006
Transaction ID: H460717.E11537

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
434.91		70.80		505.71

B. Full Name (Last, First, Middle Initial)
Brian Daniel Photography

Mailing Address
324 Crestview Drive

City	State	Zip Code	
Clinton	MS	39056-	003

Purpose of Disbursement:
003-Photography

Activity or Event Identifier:
2006 URF ANNUAL DINNER

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

Allocated Activity or Event Year-To-Date
27459.45

Date 06 / 30 / 2006
Transaction ID: H460717.E11561

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
374.10		60.90		435.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
809.01		131.70		940.71

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
29283.29		16226.49		45509.78