

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

KELLY FOR CONGRESS

ADDRESS (number and street)

5221A CLIFF GOOKIN BLVD



Check if different than previously reported. (ACC)

TUPELO

MS

38801

2. FEC IDENTIFICATION NUMBER ▼

C

C00573980

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
06 / 02 / 2015

in the State of

MS

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 23 / 2015

through

M M / D D / Y Y Y Y
05 / 13 / 2015

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 FRED H PAGE

Signature of Treasurer

FRED H PAGE

[Electronically Filed]

Date

M M / D D / Y Y Y Y
05 / 21 / 2015

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

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

KELLY FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	28139.96	145843.94
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	28139.96	145843.94
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	63065.68	123618.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	63065.68	123618.81
8. Cash on Hand at Close of Reporting Period (from Line 27).....	22225.13	
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	

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 17

Write or Type Committee Name

KELLY FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

21050.00

121805.92

(ii) Unitemized.....

7089.96

14638.02

(iii) TOTAL of contributions from individuals

28139.96

136443.94

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs)

0.00

9400.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

28139.96

145843.94

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....

28139.96

145843.94

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 17

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	63065.68	123618.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	63065.68	123618.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	57150.85
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	28139.96
25. SUBTOTAL (add Line 23 and Line 24).....	85290.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	63065.68
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	22225.13

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

CARL BEVERING

Mailing Address 1602 COLUMBINE DR

City
TUPELO

State
MS

Zip Code
38801

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2015

Transaction ID : SA11AI.4535

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

CHARLES L BOATNER

Mailing Address P O BOX 307

City
BELDEN

State
MS

Zip Code
38826

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RET

RET

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

5300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11AI.4462

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

ANGELA S BROOKS

Mailing Address 113 ROBINS ST

City
TUPELO

State
MS

Zip Code
38801

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SELF

ATTORNEY

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 24 / 2015

Transaction ID : SA11AI.4452

Amount of Each Receipt this Period

250.00

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

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

3450.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) ARMON W GARNER		Date of Receipt M M / D D / Y Y Y Y Y 05 / 05 / 2015	
Mailing Address 30038 PEACELY FERRY RD		Transaction ID : SA11AI.4539	
City ABERDEEN	State MS	Zip Code 39730	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer RET	Occupation USAF		
Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00		
B. Full Name (Last, First, Middle Initial) PAUL GIBBS JR		Date of Receipt M M / D D / Y Y Y Y Y 05 / 05 / 2015	
Mailing Address 1277 S THOMAS ST		Transaction ID : SA11AI.4509	
City TUPELO	State MS	Zip Code 38801	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00		
C. Full Name (Last, First, Middle Initial) CHRIS HANNA		Date of Receipt M M / D D / Y Y Y Y Y 04 / 27 / 2015	
Mailing Address P O BOX 264		Transaction ID : SA11AI.4469	
City BOONEVILLE	State MS	Zip Code 38829	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 2500.00		
SUBTOTAL of Receipts This Page (optional).....		3500.00	
TOTAL This Period (last page this line number only).....			

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

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

FOR LINE NUMBER:

PAGE 7 OF 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

HARRY G HANNA

A.

Mailing Address P O BOX 264

City

BOONEVILLE

State

MN

Zip Code

38829

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015



Primary



General



Other (specify)

Runoff

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		27		2015

Transaction ID : SA11AI.4471

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

JIM D HENSLEY III

B.

Mailing Address 1260 CR 188

City

BLUE SPRINGS

State

MS

Zip Code

38828

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015



Primary



General



Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		05		2015

Transaction ID : SA11AI.4530

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

WAYNE HOUSLEY

C.

Mailing Address 110 ROBINS ST

City

TUPELO

State

MS

Zip Code

38804

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

ATTY

Receipt For: 2015



Primary



General



Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		27		2015

Transaction ID : SA11AI.4467

Amount of Each Receipt this Period

1000.00

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

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

3750.00

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

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

FOR LINE NUMBER:

PAGE 8 OF 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

HAROLD E LOMENICK

A.

Mailing Address P O BOX 00

City

IUKA

State

MS

Zip Code

38852

FEC ID number of contributing federal political committee.

C

Name of Employer

STATE FARM INS

Occupation

INS AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2015

Transaction ID : SA11AI.4514

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MARVIN McFADDEN

B.

Mailing Address 3734A HY 6

City

PLANTERSVILLE

State

MS

Zip Code

38862

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2015

Transaction ID : SA11AI.4503

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MARK McLARTY

C.

Mailing Address 643 CR 1409

City

MOOREVILLE

State

MS

Zip Code

38857

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : SA11AI.4477

Amount of Each Receipt this Period

1000.00

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

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

2500.00

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

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

FOR LINE NUMBER:

PAGE 9 OF 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARK NICKELS

Mailing Address P O BOX 589

City
 TUPELO

State
 MS

Zip Code
 38802

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 SELF

Occupation
 ATTORNEY

Receipt For: 2015

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 27 / 2015

Transaction ID : SA11AI.4450

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JOHN ADAM NOWLIN

Mailing Address P O BOX 96

City
 ECRU

State
 MN

Zip Code
 38841

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 27 / 2015

Transaction ID : SA11AI.4473

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

R FRED PITTS

Mailing Address

City

State

Zip Code

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 05 / 2015

Transaction ID : SA11AI.4511

Amount of Each Receipt this Period

150.00

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

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

3150.00

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

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

FOR LINE NUMBER:

PAGE 10 OF 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

LOUIS ROSA III

A.

Mailing Address 2018 HUMMINGBIRD LN

City

TUPELO

State

MN

Zip Code

38801

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2015

Transaction ID : SA11AI.4522

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

RICHIE SWINNEY

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2015

Transaction ID : SA11AI.4534

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

FRANKIE WALLACE

C.

Mailing Address P O BOX 988

City

FULTON

State

MS

Zip Code

38843

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2015

Transaction ID : SA11AI.4465

Amount of Each Receipt this Period

1000.00

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

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

2200.00

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

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

FOR LINE NUMBER:

PAGE 11 OF 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

DOUGLAS M JR WRIGHT

Mailing Address 254 S FRONT ST

#501

City

TUPELO

State

MS

Zip Code

38804

FEC ID number of contributing federal political committee.

C

Name of Employer

ZIP SCRIPTS

Occupation

CEO

Receipt For: 2015

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2015

Transaction ID : SA11Al.4518

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2500.00

21050.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 17

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. INC. BALDWIN & ASSOCAITES

Mailing Address

City State Zip Code

Purpose of Disbursement
MEDIA PLACEMENT

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		23		2015

Amount of Each Disbursement this Period

12630.00

Transaction ID : SB17.4569

B. INC. BALDWIN & ASSOCIATES

Mailing Address

City State Zip Code

Purpose of Disbursement
REIMBURSEMENT

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		23		2015

Amount of Each Disbursement this Period

2893.53

Transaction ID : SB17.4567

C. BALDWIN & ASSOCIATES, INC.

Mailing Address P O BOX 905

City State Zip Code
TUPELO MS 38802Purpose of Disbursement
MEDIA PLACEMENT

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2015

Amount of Each Disbursement this Period

13500.00

Transaction ID : SB17.4579

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

29023.53

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 17

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BALDWIN & ASSOCIATES, INC.

Mailing Address P O BOX 905

City	State	Zip Code
TUPELO	MS	38802

Purpose of Disbursement
MEDIA PLACEMENT

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		07		2015

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.4580

B. BOOSTERS, INC.

Mailing Address P O BOX 70156

City	State	Zip Code
MONTGOMERY	AL	36107

Purpose of Disbursement
SIGNS

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		23		2015

Amount of Each Disbursement this Period

15321.00

Transaction ID : SB17.4565

C. NATHAN S CALVERT

Mailing Address 7558 ENON ROAD

City	State	Zip Code
LOUISVILLE	MS	39339

Purpose of Disbursement
CONTRACT

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4586

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

21321.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FRED H PAGE & CO., LTD.

Mailing Address 5221A CLIFF GOOKIN BLVD

City	State	Zip Code
TUPELO	MS	38801

Purpose of Disbursement
ACCOUNTING FEES

001

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)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2015

Amount of Each Disbursement this Period

1670.86

Transaction ID : SB17.4577

B. JOHN MORGAN HUGHES

Mailing Address 1737 WINCHESTER ST

City	State	Zip Code
JACKSON	MS	39211

Purpose of Disbursement
CONTRACT

003

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4584

C. IUKA TV

Mailing Address P O BOX 178

City	State	Zip Code
BELMONT	MS	38827

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2015

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.4573

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

3420.86

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 17

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. IUKA TV

Mailing Address P O BOX 178

City	State	Zip Code
BELMONT	MS	38827

Purpose of Disbursement
TV PLACEMENT

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.4583

B. LEE CO COUNTY COURIER

Mailing Address 303 W MAIN ST

City	State	Zip Code
TUPELO	MS	38804

Purpose of Disbursement
ADVERTISING

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2015

Amount of Each Disbursement this Period

412.50

Transaction ID : SB17.4581

C. TYLER MORTONMailing Address 204 MAXWEWLL ST
APT 1

City	State	Zip Code
STARKVILLE	MS	39759

Purpose of Disbursement
CONTRACT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

Amount of Each Disbursement this Period

750.00

Transaction ID : SB17.4588

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

1412.50

