

# FEC FORM 3

## REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

Brad Morris for Congress

ADDRESS (number and street) ▼

PO Box 2136

Check if different than previously reported. (ACC)

Oxford

MS

38655

2. **FEC IDENTIFICATION NUMBER** ▼

C C00513788

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

**OR**

AMENDED (A)

MS

01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(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

02 / 23 / 2012

through

M M / D D / Y Y Y Y

03 / 31 / 2012

D D / Y Y Y Y

2012

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

Type or Print Name of Treasurer Robert T. Gray

Signature of Treasurer Robert T. Gray

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 15 / 2012

D D / Y Y Y Y

2012

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

Office  
Use  
Only

**FEC FORM 3**  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Brad Morris for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	19615.00	29655.00
(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)).....	19615.00	29655.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	4040.23	35890.23
(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)).....	4040.23	35890.23
8. Cash on Hand at Close of Reporting Period (from Line 27).....	23814.77	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	30050.00	

**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)

Write or Type Committee Name

**Brad Morris for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 02 / 23 / 2012 To: M M / D D / Y Y Y Y 03 / 31 / 2012

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11800.00	18050.00
(ii) Unitemized.....	4315.00	8105.00
(iii) TOTAL of contributions from individuals ▶	16115.00	26155.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	3500.00	3500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	19615.00	29655.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	30050.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	30050.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	19615.00	59705.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4040.23	35890.23
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	4040.23	35890.23

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	8240.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	19615.00
25. SUBTOTAL (add Line 23 and Line 24).....	27855.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4040.23
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	23814.77

**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 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Willie Allen**

Mailing Address **PO Box 3032**

City **Tupelo** State **MS** Zip Code **38803-3032**

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

Name of Employer **Self** Occupation **Attorney**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2012**

**Transaction ID : C8060345**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jordan and Tasha Bankhead**

Mailing Address **127 Lakeway Drive**

City **Oxford** State **MS** Zip Code **38655**

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

Name of Employer **Self** Occupation **Attorney**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2012**

**Transaction ID : C7979737**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jamie Barnett**

Mailing Address **2406 S Arlington Ridge Rd**

City **Arlington** State **VA** Zip Code **22202-2234**

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

Name of Employer **Potomac Institute** Occupation **Sr Research Fellow**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 12 / 2012**

**Transaction ID : C7983955**

Amount of Each Receipt this Period  
**250.00**

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

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

**750.00**

**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 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dustin Childers**

Mailing Address 201 Hidden Hills

City Booneville State MS Zip Code 38829

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2012

**Transaction ID : C8080560**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Wilbur O. Colom**

Mailing Address PO Box 866  
200 Sixth Street North, Suite 700

City Columbus State MS Zip Code 39703-0866

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

Name of Employer The Colom Law Firm LLC Occupation Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2012

**Transaction ID : C7983482**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**David Culpepper**

Mailing Address 802 Hunters Bay

City Brandon State MS Zip Code 39047

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

Name of Employer Millsaps College Occupation Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2012

**Transaction ID : C8080563**

Amount of Each Receipt this Period  
 300.00

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jack Dunbar**

Mailing Address **PO Box 707**

City **Oxford** State **MS** Zip Code **38655-0707**

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

Name of Employer **Holcomb Dunbar Law Firm** Occupation **Attorney**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2012**

**Transaction ID : C7978467**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Victor I. Fleitas**

Mailing Address **452 N. Spring St.**

City **Tupelo** State **MS** Zip Code **38804**

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

Name of Employer **Self** Occupation **Attorney**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2012**

**Transaction ID : C8060344**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kevin W. Frye**

Mailing Address **P O Box 2456**

City **Oxford** State **MS** Zip Code **38655**

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

Name of Employer **Self** Occupation **Attorney**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2012**

**Transaction ID : C7979739**

Amount of Each Receipt this Period  
**300.00**

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

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

**800.00**

**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 8 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**W Howard Gunn**

Mailing Address 310 S Hickory St

City Aberdeen State MS Zip Code 39730

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : C8080650**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Larry Hellring**

Mailing Address 10 Edgewater Dr., Apt. 7F

City Miami State FL Zip Code 33133

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

Name of Employer Superior Window Occupation Businessman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2012

**Transaction ID : C8061201**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Sylva Lin**

Mailing Address 1419 Hollins St

City Baltimore State MD Zip Code 21223-2417

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

Name of Employer self Occupation artist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2012

**Transaction ID : C7979353**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jonathan F. McBride**

Mailing Address 7697 Eureka Rd.

City Courtland State MS Zip Code 38620

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

Name of Employer McBrideCo LLC Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2012

**Transaction ID : C7979738**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Christi McCoy Smith**

Mailing Address 301 Cullen Rd

City Oxford State MS Zip Code 38655-2205

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2012

**Transaction ID : C8061955**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**William A Percy II**

Mailing Address 134 Bayou Rd

City Greenville State MS Zip Code 38701-7725

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

Name of Employer Greenville Compress Co. Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2012

**Transaction ID : C8008172**

Amount of Each Receipt this Period  
 500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Florencio Rendon**

Mailing Address 827 N Tanchahua St

City Corpus Christi State TX Zip Code 78401-2223

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

Name of Employer LR Global Occupation Principal

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2012

**Transaction ID : C7955319**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 3630 Kings Hwy

City Jackson State MS Zip Code 39216-3321

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

Name of Employer Retired Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2012

**Transaction ID : C8063953**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jason Lee Shelton**

Mailing Address P.O. Box 1362

City Tupelo State MS Zip Code 38802-1362

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2012

**Transaction ID : C7979711**

Amount of Each Receipt this Period  
 2500.00

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

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

3250.00

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

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

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NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rhea Tannehill**

Mailing Address 1407 Greenway Cove

City Oxford State MS Zip Code 38655

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

Name of Employer Tannehill Carmean & McKenzie, PLLC Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 09 / 2012

**Transaction ID : C7983483**

Amount of Each Receipt this Period  
 400.00

**B.** Full Name (Last, First, Middle Initial)  
**Edward A. Williamson**

Mailing Address 509 A South Church Ave  
P.O. Box 588

City Philadelphia State MS Zip Code 39350

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

Name of Employer Self employed Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2012

**Transaction ID : C8083531**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Kenneth L. Wooten**

Mailing Address 38 County Rd 452

City Water Valley State MS Zip Code 38965

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

Name of Employer n/a Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 28 / 2012

**Transaction ID : C7979735**

Amount of Each Receipt this Period  
 300.00

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

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

1700.00

11800.00

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

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

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NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL C**

Mailing Address 501 3rd St NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012

**Transaction ID : C8080562**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 Massachusetts Ave., NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2012

**Transaction ID : C8010230**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

3500.00

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 18		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

Full Name (Last, First, Middle Initial) <b>A. Alpha Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 3165 Terry Road		Amount of Each Disbursement this Period 180.92 <b>Transaction ID : D384858</b>
City Jackson	State MS	
Zip Code 39212	Purpose of Disbursement Fundraiser Expenses	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Barnes &amp; Noble Booksellers</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2012
Mailing Address 1001 Barnes Crossing Road #104		Amount of Each Disbursement this Period 6.58 <b>Transaction ID : D384845</b>
City Tupelo	State MS	
Zip Code 38801	Purpose of Disbursement Coffee during meeting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Best Buy</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 3040 N Gloster St		Amount of Each Disbursement this Period 829.26 <b>Transaction ID : D384863</b>
City Tupelo	State MS	
Zip Code 38804-9742	Purpose of Disbursement Campaign Equipment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1016.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

Full Name (Last, First, Middle Initial)

**A. Deluxe Checks**

Mailing Address 3680 Victoria Street North

City Saint Paul State MN Zip Code 55126

Purpose of Disbursement Campaign checks

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 23 / 2012

Amount of Each Disbursement this Period: 16.50

Transaction ID : D384852

Category/Type

Full Name (Last, First, Middle Initial)

**B. Fred's Super Dollar**

Mailing Address 1409 Adams Street

City Fulton State MS Zip Code 38843

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 13 / 2012

Amount of Each Disbursement this Period: 4.07

Transaction ID : D384846

Category/Type

Full Name (Last, First, Middle Initial)

**C. McAfee, Inc**

Mailing Address 2821 Mission College Blvd.

City Santa Clara State CA Zip Code 95054

Purpose of Disbursement Campaign Software

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 05 / 2012

Amount of Each Disbursement this Period: 69.54

Transaction ID : D384867

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... 90.11

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

Full Name (Last, First, Middle Initial) <b>A. David McDowell</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address 15 County Road 305		Amount of Each Disbursement this Period 896.74 <b>Transaction ID : D384868</b>
City Oxford	State MS Zip Code 38655-9301	
Purpose of Disbursement General Consulting Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. David McDowell</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address 15 County Road 305		Amount of Each Disbursement this Period 1100.00 <b>Transaction ID : D384856</b>
City Oxford	State MS Zip Code 38655-9301	
Purpose of Disbursement General Consulting Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Shorter Productions</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 12 Lakeland Circle Suite A		Amount of Each Disbursement this Period 770.00 <b>Transaction ID : D384860</b>
City Jackson	State MS Zip Code 39216	
Purpose of Disbursement Media Production		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2766.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sneed's Ace Hardware, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2012
Mailing Address 1400 University Avenue		Amount of Each Disbursement this Period 26.89 <b>Transaction ID : D384840</b>
City Oxford State MS Zip Code 38655	Purpose of Disbursement Supplies for Office	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2012
Mailing Address 505 JACKSON AVE E		Amount of Each Disbursement this Period 9.00 <b>Transaction ID : D384854</b>
City Oxford State MS Zip Code 38655	Purpose of Disbursement Postage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2012
Mailing Address 2530 Jackson Avenue W		Amount of Each Disbursement this Period 5.39 <b>Transaction ID : D384841</b>
City Oxford State MS Zip Code 38655	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	26.48
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

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NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address 2530 Jackson Avenue W		Amount of Each Disbursement this Period 76.14 <b>Transaction ID : D384848</b>
City Oxford	State MS Zip Code 38655	
Purpose of Disbursement Fundraiser Expenses	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. West Jackson Wine &amp; Spirits</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address 2570 West Jackson Avenue		Amount of Each Disbursement this Period 43.15 <b>Transaction ID : D384850</b>
City Oxford	State MS Zip Code 38655	
Purpose of Disbursement Fundraiser Expenses	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Wild Bills</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2012
Mailing Address 460 Third Avenue		Amount of Each Disbursement this Period 20.85 <b>Transaction ID : D384842</b>
City Sherman	State MS Zip Code 38869	
Purpose of Disbursement Fundraising lunch	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	140.14
<b>TOTAL</b> This Period (last page this line number only).....	4040.23

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Brad Morris for Congress**

Transaction ID : L791

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

**[PERSONAL FUNDS]**

Election: 2012

**Bradford K Morris PERS FUNDS**

Primary  
 General  
 Other (specify) ▼

Mailing Address  
PO Box 2136

City State ZIP Code  
Oxford MS 38655-7136

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30050.00	0.00	30050.00

**TERMS**

Date Incurred: M 02 / D 21 / Y 2012  
 Date Due: M / D / Y none  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	30050.00
<b>TOTALS</b> This Period (last page in this line only).....	30050.00

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