

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 RENASANT BANK EMPLOYEES' VOLUNTARY POLITICAL COMMITTEE

ADDRESS (number and street) 209 TROY STREET PO BOX 709 TUPELO MS 38802 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00191759 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 / 01 / 2024 through 03 / 31 / 2024

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 Wages, Colton, , ,

Signature of Treasurer Wages, Colton, , , Date 04 / 11 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**RENASANT BANK EMPLOYEES' VOLUNTARY POLITICAL COMMITTEE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2024"/>		<input type="text" value="9522.49"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9522.49"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="7166.84"/>	<input type="text" value="7166.84"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="16689.33"/>	<input type="text" value="16689.33"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="15689.33"/>	<input type="text" value="15689.33"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**RENASANT BANK EMPLOYEES' VOLUNTARY POLITICAL COMMITTEE**

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

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		
(i) Itemized (use Schedule A).....	3250.00	3250.00
(ii) Unitemized .....	3916.84	3916.84
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7166.84	7166.84
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	7166.84	7166.84
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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 Transfers (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)).....▶	7166.84	7166.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7166.84	7166.84

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 .....	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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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 .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1000.00	1000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1000.00	1000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7166.84	7166.84
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7166.84	7166.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
	<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)  
**RENASANT BANK EMPLOYEES' VOLUNTARY POLITICAL COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Butler, Gary, D., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 02 / 23 / 2024		
Mailing Address 113 Derbyshire Rd			<b>Transaction ID : SA11AI.4213</b>		
City Starkville	State MS	Zip Code 39759	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Renasant Bank		Occupation (for Individual) Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Clark, Donald, , , Jr.</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 02 / 23 / 2024		
Mailing Address 2046 Brecon Dr			<b>Transaction ID : SA11AI.4214</b>		
City Jackson	State MS	Zip Code 39211	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Renasant Bank		Occupation (for Individual) Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Creekmore, John, M., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 02 / 23 / 2024		
Mailing Address PO Box 716			<b>Transaction ID : SA11AI.4215</b>		
City Amory	State MS	Zip Code 38821	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Renasant Bank		Occupation (for Individual) Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)  
**RENASANT BANK EMPLOYEES' VOLUNTARY POLITICAL COMMITTEE**

**A. Dale, Albert, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 915 6th Ave S  
 City Nashville State TN Zip Code 37203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Renasant Bank Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 23 / 2024  
**Transaction ID : SA11AI.4216**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Deer, Jill, V., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2907 Southwood Rd  
 City Birmingham State AL Zip Code 35223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Renasant Bank Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 23 / 2024  
**Transaction ID : SA11AI.4217**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Dorminey, Oswald, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 510 North Audubon Dr  
 City Albany State GA Zip Code 31701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Renasant Bank Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 23 / 2024  
**Transaction ID : SA11AI.4218**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
<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)  
**RENASANT BANK EMPLOYEES' VOLUNTARY POLITICAL COMMITTEE**

**A. Engel, Connie, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4306 Woodland Brook Dr SE  
 City Atlanta State GA Zip Code 30339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Renasant Bank Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2024  
**Transaction ID : SA11AI.4219**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Flenorl, Rose, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8727 Stablemill Lane  
 City Cordova State TN Zip Code 38016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Renasant Bank Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2024  
**Transaction ID : SA11AI.4228**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Foy, John, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1881 N Parc Circle  
 City Tupelo State MS Zip Code 38804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Renasant Bank Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2024  
**Transaction ID : SA11AI.4220**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

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NAME OF COMMITTEE (In Full)  
**RENASANT BANK EMPLOYEES' VOLUNTARY POLITICAL COMMITTEE**

**A. Heyer, Richard, L., , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 710 Hillshire Place  
 City Tupelo State MS Zip Code 38804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Renasant Bank Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2024  
**Transaction ID : SA11AI.4221**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Holland, Neal, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1948  
 City Decatur State AL Zip Code 35602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Renasant Bank Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2024  
**Transaction ID : SA11AI.4222**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. McGraw, Edward, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 969 Debeau Dr  
 City Tupelo State MS Zip Code 38804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Renasant Bank Occupation (for Individual) Executive Chairman  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2024  
**Transaction ID : SA11AI.4224**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 10 OF 11
<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)  
**RENASANT BANK EMPLOYEES' VOLUNTARY POLITICAL COMMITTEE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Suggs, Sean, M., ,

Mailing Address 5 Postbridge Court

City Greensboro	State NC	Zip Code 27407
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Renasant Bank	Occupation (for Individual) Director
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02		23		2024

**Transaction ID : SA11AI.4223**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	3250.00

**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 checked="" type="checkbox"/> 23	<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)

**RENASANT BANK EMPLOYEES' VOLUNTARY POLITICAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KELLY FOR CONGRESS**

Mailing Address POST OFFICE BOX 7092

City  
TUPELO

State  
MS

Zip Code  
38802

Purpose of Disbursement  
contribution

Category/  
Type

Candidate Name  
KELLY, JOHN TRENT, , ,

Office Sought:  House  
 Senate  
 President  
State: MS District: 01

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB23.4212**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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