

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 SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

ADDRESS (number and street) 2155 HIGHWAY 42 SOUTH MCDONOUGH GA 30252 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00265546 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 (checked), July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) 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 07 / 01 / 2015 through 12 / 31 / 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 DIANA RENEE DIXON

Signature of Treasurer DIANA RENEE DIXON [Electronically Filed] Date 01 / 13 / 2016

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)

Write or Type Committee Name

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

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="2015"/>		318081.43
(b) Cash on Hand at Beginning of Reporting Period.....	189625.67	
(c) Total Receipts (from Line 19) .....	88111.22	210077.62
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	277736.89	528159.05
7. Total Disbursements (from Line 31).....	48820.66	299242.82
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	228916.23	228916.23
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) .....	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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

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).....	0.00	0.00
(ii) Unitemized .....	88111.22	210077.62
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	88111.22	210077.62
(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) .....	88111.22	210077.62
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))..... ▶	88111.22	210077.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	88111.22	210077.62

**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	241912.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	241912.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	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 .....	48820.66	57329.83
30. Federal Election Activity (2 U.S.C. §431(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)) ..	48820.66	299242.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	48820.66	299242.82

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	88111.22	210077.62
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	88111.22	210077.62
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	241912.99
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	241912.99

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. BANK OF OZARKS**

Mailing Address 1400 ZACK HINTON PKWAY

City MCDONOUGH State GA Zip Code 30253

Purpose of Disbursement  
BANK ANALYSIS FEE

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2015

Transaction ID : SB29.15557

Amount of Each Disbursement this Period

0.23

Full Name (Last, First, Middle Initial)

**B. BANNER INDEPENDENT**

Mailing Address 208 MAIN ST

City BOONEVILLE State MS Zip Code 38829

Purpose of Disbursement  
Advertisement

004

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15160

Amount of Each Disbursement this Period

42.50

Full Name (Last, First, Middle Initial)

**C. BANNER INDEPENDENT**

Mailing Address 208 MAIN ST

City BOONEVILLE State MS Zip Code 38829

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MS District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15161

Amount of Each Disbursement this Period

42.50

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

85.23

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. BANNER INDEPENDENT**

Mailing Address 208 MAIN ST

City BOONEVILLE State MS Zip Code 38829

Purpose of Disbursement  
ADVERTISEMENT

Candidate Name  
**LAUREN CHILDERS**

Office Sought:  House  
 Senate  
 President  
State: MS District: 03

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : **SB29.15162**

Amount of Each Disbursement this Period

42.50

Full Name (Last, First, Middle Initial)

**B. CAROL BELL**

Mailing Address 210 E BOLTON STREET

City SAVANNAH State GA Zip Code 31401

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**CAROL BELL**

Office Sought:  House  
 Senate  
 President  
State: GA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : **SB29.15413**

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**C. BOYSKO FOR DELEGATE**

Mailing Address PO BOX 247

City HERNDON State VA Zip Code 20172

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**JENNIFER B BOYSKO**

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2015

Transaction ID : **SB29.15314**

Amount of Each Disbursement this Period

1000.00

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

1792.50

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. BULOVA FOR BOARD OF SUPERVISORS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		01		2015

Mailing Address PO BOX 19

**Transaction ID : SB29.15275**

City State Zip Code  
FAIRFAX STATION VA 22039

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
ADVERTISEMENT

011
Category/ Type

Candidate Name

**DAVID BULOVA**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN OF BRYCE REECE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Mailing Address PO BOX 7022

**Transaction ID : SB29.15310**

City State Zip Code  
FREDERICKSBURG VA 22404

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

Candidate Name

**BRYCE E REEVES**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN OF DAN STORCK**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		02		2015

Mailing Address 8512 STABLE DRIVE

**Transaction ID : SB29.15262**

City State Zip Code  
FORT HUNT VA 22308

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

Candidate Name

**DAN STORCK**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

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

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

2500.00
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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN OF DAVID LOCKRIDGE**

Mailing Address 1013 RIDGEMERE LANE

City State Zip Code  
CULPEPER VA 22701

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**DAVID LOCKRIDGE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

Transaction ID : **SB29.15321**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN OF FRANK REAVES**

Mailing Address 1035 SPERRYVILLE PIKE

City State Zip Code  
CULPEPER VA 22701

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**FRANK REAVES Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

Transaction ID : **SB29.15295**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN OF JAMIE CLANCEY**

Mailing Address 1200 SUNSET LANE  
SUITE 2122

City State Zip Code  
CULPEPER VA 22701

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**JAMIE M D CLANCEY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

Transaction ID : **SB29.15302**

Amount of Each Disbursement this Period

500.00

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

1500.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN OF JOHN GUEVARA**

Mailing Address 3180 WHEATLAND FARMS DRIVE

City OAKTON State VA Zip Code 22124

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**JOHN GUEVARA**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	02	/	2015

**Transaction ID : SB29.15265**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN OF MEAGHAN TAYLOR**

Mailing Address 206 E PIEDMONT STREET

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**MEAGHAN E TAYLOR**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2015

**Transaction ID : SB29.15297**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN OF PATRICK COFFEY**

Mailing Address 4010 CABIN ROAD

City REVA State VA Zip Code 22735

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**PATRICK N COFFEY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2015

**Transaction ID : SB29.15304**

Amount of Each Disbursement this Period

500.00
--------

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

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

2000.00
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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN OF PAUL WALTHER**

Mailing Address PO BOX 225

City State Zip Code  
CULPEPER VA 22701

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**PAUL R WALTHER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB29.15307**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN OF SCOTT SUROVELL**

Mailing Address PO BOX 289

City State Zip Code  
MT VERNON VA 22012

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**SCOTT A SUROVELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : SB29.15274**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN OF SUE HANSOHN**

Mailing Address 12310 ROSE COTTAGE LANE

City State Zip Code  
CULPEPER VA 22701

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**SUE HANSOHN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB29.15299**

Amount of Each Disbursement this Period

500.00

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

2500.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. CENTRE VIEW CONNECTION**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**JOHN GUEVARA**

Category/  
Type

Office Sought:  House  Senate  President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : **SB29.15518**

Amount of Each Disbursement this Period

74.37

Full Name (Last, First, Middle Initial)

**B. CENTRE VIEW CONNECTION**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TIMOTHY HUGO**

Category/  
Type

Office Sought:  House  Senate  President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : **SB29.15519**

Amount of Each Disbursement this Period

74.37

Full Name (Last, First, Middle Initial)

**C. CENTRE VIEW CONNECTION**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**JOHN GUEVARA**

Category/  
Type

Office Sought:  House  Senate  President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : **SB29.15531**

Amount of Each Disbursement this Period

74.37

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

223.11

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. CENTRE VIEW CONNECTION**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TIMOTHY HUGO**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15532**

Amount of Each Disbursement this Period

74.37

Full Name (Last, First, Middle Initial)

**B. CHANTILLY CONNECTION**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**JOHN GUEVARA**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15511**

Amount of Each Disbursement this Period

74.37

Full Name (Last, First, Middle Initial)

**C. CHANTILLY CONNECTION**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**JIM LEMUNYON**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15515**

Amount of Each Disbursement this Period

74.37

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

223.11

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. CHANTILLY CONNECTION**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**JOHN GUEVARA**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15529**

Amount of Each Disbursement this Period

74.37

Full Name (Last, First, Middle Initial)

**B. CHANTILLY CONNECTION**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**JIM LEMUNYON**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15530**

Amount of Each Disbursement this Period

74.37

Full Name (Last, First, Middle Initial)

**C. CHARLOTTE OBSERVER**

Mailing Address 600 S TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**JILL SWAIN**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NC District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15433**

Amount of Each Disbursement this Period

251.80

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

400.54

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. CHARLOTTE OBSERVER**

Mailing Address 600 S TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**MELINDA BALES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : **SB29.15436**

Amount of Each Disbursement this Period

251.80

Full Name (Last, First, Middle Initial)

**B. CHARLOTTE OBSERVER**

Mailing Address 600 S TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**DAN BOONE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : **SB29.15440**

Amount of Each Disbursement this Period

251.80

Full Name (Last, First, Middle Initial)

**C. CHARLOTTE OBSERVER**

Mailing Address 600 S TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**SHARON ESKRIDGE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : **SB29.15444**

Amount of Each Disbursement this Period

251.80

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

755.40

**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)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. CHARLOTTE OBSERVER**

Mailing Address 600 S TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**ROD KIDWELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15446

Amount of Each Disbursement this Period

251.80

Full Name (Last, First, Middle Initial)

**B. CHARLOTTE OBSERVER**

Mailing Address 600 S TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**SARAH MCAULAY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15449

Amount of Each Disbursement this Period

251.80

Full Name (Last, First, Middle Initial)

**C. CHARLOTTE OBSERVER**

Mailing Address 600 S TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**DAVID GILROY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15451

Amount of Each Disbursement this Period

251.80

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

755.40

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. CHARLOTTE OBSERVER**

Mailing Address 600 S TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**JEFF NEELY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15452

Amount of Each Disbursement this Period

251.80

Full Name (Last, First, Middle Initial)

**B. CHARLOTTE OBSERVER**

Mailing Address 600 S TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**STACEY ANDERSON**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15455

Amount of Each Disbursement this Period

251.80

Full Name (Last, First, Middle Initial)

**C. CHARLOTTE OBSERVER**

Mailing Address 600 S TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**BETH CASHION**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15457

Amount of Each Disbursement this Period

251.80

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

755.40

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. JAMIE M D CLANCEY**

Mailing Address 1200 SUNSET LANE SUITE 2122

City State Zip Code  
CULPEPER VA 22701

Purpose of Disbursement  
POLITICAL WORK/FLYERS

Candidate Name

**JAMIE M D CLANCEY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2015

**Transaction ID : SB29.15612**

Amount of Each Disbursement this Period

1.35
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. CLARION LEDGER**

Mailing Address 201 SOUTH CONGRESS ST

City State Zip Code  
JACKSON MS 38205

Purpose of Disbursement  
ADVERTISEMENT

Candidate Name

**DAVID BLOUNT**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	13	/	2015

**Transaction ID : SB29.15573**

Amount of Each Disbursement this Period

427.13
--------

Full Name (Last, First, Middle Initial)

**C. CLARION LEDGER**

Mailing Address 201 SOUTH CONGRESS ST

City State Zip Code  
JACKSON MS 38205

Purpose of Disbursement  
ADVERTISEMENT

Candidate Name

**PHIL BRYANT**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	13	/	2015

**Transaction ID : SB29.15574**

Amount of Each Disbursement this Period

427.13
--------

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

854.26
--------

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

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**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)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. CLARION LEDGER**

Mailing Address 201 SOUTH CONGRESS ST

City JACKSON State MS Zip Code 38205

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2015

Transaction ID : SB29.15575

Amount of Each Disbursement this Period

427.12

Full Name (Last, First, Middle Initial)

**B. CLARION LEDGER**

Mailing Address 201 SOUTH CONGRESS ST

City JACKSON State MS Zip Code 38205

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**KATHY SYKES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2015

Transaction ID : SB29.15576

Amount of Each Disbursement this Period

427.12

Full Name (Last, First, Middle Initial)

**C. COFFEEVILLE COURIER**

Mailing Address 14259 MAIN ST

City COFFEEVILLE State MS Zip Code 38922

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**THOMAS REYNOLDS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15154

Amount of Each Disbursement this Period

23.34

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

877.58

**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)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. COFFEEVILLE COURIER**

Mailing Address 14259 MAIN ST

City COFFEVILLE State MS Zip Code 38922

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	06	/	2015

Transaction ID : SB29.15156

Amount of Each Disbursement this Period

23.33
-------

Full Name (Last, First, Middle Initial)

**B. COFFEEVILLE COURIER**

Mailing Address 14259 MAIN ST

City COFFEVILLE State MS Zip Code 38922

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	06	/	2015

Transaction ID : SB29.15158

Amount of Each Disbursement this Period

23.33
-------

Full Name (Last, First, Middle Initial)

**C. PATRICK N COFFEY**

Mailing Address 4010 CABIN ROAD

City REVA State VA Zip Code 22735

Purpose of Disbursement  
POLITICAL WORK/FLYERS

Category/  
Type

Candidate Name

**PATRICK N COFFEY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SB29.15593

Amount of Each Disbursement this Period

1.35
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[MEMO ITEM]

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

46.66
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**TOTAL** This Period (last page this line number only)..... ▶

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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. COMMITTEE TO ELECT KEN GEORGE**

Mailing Address 1312 BROOKGREEN DRIVE

City CARY State NC Zip Code 27511

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**KEN GEORGE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 25 / 2015

Transaction ID : **SB29.15246**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. COMMITTEE TO ELECT KEN GEORGE**

Mailing Address 1312 BROOKGREEN DRIVE

City CARY State NC Zip Code 27511

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**KEN GEORGE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 16 / 2015

Transaction ID : **SB29.15482**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. COMMITTEE TO RE-ELECT KEITH MCBRAYER**

Mailing Address 115 WEST RIDGE INDUSTRIAL BLVD STE

City MCDONOUGH State GA Zip Code 30253

Purpose of Disbursement  
FUNDRAISER SPONSOR-GOLF TOURNEY

012

Candidate Name

**KEITH MCBRAYER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2015

Transaction ID : **SB29.15146**

Amount of Each Disbursement this Period

100.00

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

2100.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. BRIAN CRAIG**

Mailing Address PO BOX 411

City FLOYD State VA Zip Code 24091

Purpose of Disbursement  
CONTRIBUTION

010

Candidate Name

**BRIAN CRAIG**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2015

**Transaction ID : SB29.15327**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. CULPEPER TIMES**

Mailing Address 206 S MAIN ST SUITE 301

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PAUL R WALTHER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

**Transaction ID : SB29.15277**

Amount of Each Disbursement this Period

68.58

Full Name (Last, First, Middle Initial)

**C. CULPEPER TIMES**

Mailing Address 206 S MAIN ST SUITE 301

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PATRICK N COFFEY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

**Transaction ID : SB29.15283**

Amount of Each Disbursement this Period

68.57

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

637.15

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. CULPEPER TIMES**

Mailing Address 206 S MAIN ST SUITE 301

City State Zip Code  
CULPEPER VA 22701

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**SUE HANSOHN**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

Transaction ID : **SB29.15285**

Amount of Each Disbursement this Period

68.57

Full Name (Last, First, Middle Initial)

**B. CULPEPER TIMES**

Mailing Address 206 S MAIN ST SUITE 301

City State Zip Code  
CULPEPER VA 22701

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**MEAGHAN E TAYLOR**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

Transaction ID : **SB29.15287**

Amount of Each Disbursement this Period

68.57

Full Name (Last, First, Middle Initial)

**C. CULPEPER TIMES**

Mailing Address 206 S MAIN ST SUITE 301

City State Zip Code  
CULPEPER VA 22701

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**FRANK REAVES Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

Transaction ID : **SB29.15289**

Amount of Each Disbursement this Period

68.57

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

205.71

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. CULPEPER TIMES**

Mailing Address 206 S MAIN ST SUITE 301

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**DAVID B LOCHRIDGE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

Transaction ID : SB29.15291

Amount of Each Disbursement this Period

68.57

Full Name (Last, First, Middle Initial)

**B. CULPEPER TIMES**

Mailing Address 206 S MAIN ST SUITE 301

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**JAMIE M D CLANCEY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

Transaction ID : SB29.15293

Amount of Each Disbursement this Period

68.57

Full Name (Last, First, Middle Initial)

**C. DAILY CORINTHIAN**

Mailing Address 1607 HARPER ROAD

City CORINTH State MS Zip Code 38834

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : SB29.15164

Amount of Each Disbursement this Period

71.67

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

208.81

**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)

<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. DAILY CORINTHIAN**

Mailing Address 1607 HARPER ROAD

City CORINTH State MS Zip Code 38834

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**NICK BAIN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15165**

Amount of Each Disbursement this Period

71.66

Full Name (Last, First, Middle Initial)

**B. DAILY CORINTHIAN**

Mailing Address 1607 HARPER ROAD

City CORINTH State MS Zip Code 38834

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15167**

Amount of Each Disbursement this Period

71.67

Full Name (Last, First, Middle Initial)

**C. DAILY CORINTHIAN**

Mailing Address 1607 HARPER ROAD

City CORINTH State MS Zip Code 38834

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**LAUREN CHILDERS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District: 03

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15168**

Amount of Each Disbursement this Period

71.66

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

214.99

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. DAILY CORINTHIAN**

Mailing Address 1607 HARPER ROAD

City CORINTH State MS Zip Code 38834

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**ERIC POWELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15169**

Amount of Each Disbursement this Period

71.66

Full Name (Last, First, Middle Initial)

**B. DAILY CORINTHIAN**

Mailing Address 1607 HARPER ROAD

City CORINTH State MS Zip Code 38834

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**LESTER 'BUBBA' CARPENTER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15170**

Amount of Each Disbursement this Period

71.66

Full Name (Last, First, Middle Initial)

**C. DAILY JOURNAL OR NE MISSISSIPPI JOURNAL**

Mailing Address 1242 S GREEN ST

City TUPELO State MS Zip Code 38804

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**LAUREN CHILDERS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District: 03

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15171**

Amount of Each Disbursement this Period

111.30

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

254.62

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. DAILY JOURNAL OR NE MISSISSIPPI JOURNAL**

Mailing Address 1242 S GREEN ST

City TUPELO State MS Zip Code 38804

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2015  
 Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15172**

Amount of Each Disbursement this Period

111.29

Full Name (Last, First, Middle Initial)

**B. DAILY JOURNAL OR NE MISSISSIPPI JOURNAL**

Mailing Address 1242 S GREEN ST

City TUPELO State MS Zip Code 38804

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2015  
 Primary  General  Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15173**

Amount of Each Disbursement this Period

111.29

Full Name (Last, First, Middle Initial)

**C. EDDIE DELOACH**

Mailing Address 415 EISENHOWER DRIVE  
SUITE 3

City SAVANNAH State GA Zip Code 31406

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**EDDIE DELOACH**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2015  
 Primary  General  Other (specify) ▼  
Runoff

State: GA District:

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2015

Transaction ID : **SB29.15497**

Amount of Each Disbursement this Period

1000.00

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

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

1222.58

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. DESOTO TIMES TRIBUNE**

Mailing Address 2445 HWY 51

City HERNANDO State MS Zip Code 38632

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

**Transaction ID : SB29.15174**

Amount of Each Disbursement this Period

117.50

Full Name (Last, First, Middle Initial)

**B. DESOTO TIMES TRIBUNE**

Mailing Address 2445 HWY 51

City HERNANDO State MS Zip Code 38632

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

**Transaction ID : SB29.15175**

Amount of Each Disbursement this Period

117.50

Full Name (Last, First, Middle Initial)

**C. BILL DURRENCE**

Mailing Address 516 E SAINT JULIAN STREET

City SAVANNAH State GA Zip Code 31401

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**BILL DURRENCE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

**Transaction ID : SB29.15409**

Amount of Each Disbursement this Period

500.00

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

735.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. BILL DURRENCE**

Mailing Address 516 E SAINT JULIAN STREET

City SAVANNAH State GA Zip Code 31401

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**BILL DURRENCE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
Runoff

State: GA District:

Date of Disbursement

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

Transaction ID : **SB29.15493**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. EARNIE PORTA FOR SUPERVISOR**

Mailing Address PO BOX 502

City OCCOQUAN State VA Zip Code 22125

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**EARNIE PORTA Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2015			

Transaction ID : **SB29.15355**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. FAIRFAX CONNECTION**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**DAVID BULOVA**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2015			

Transaction ID : **SB29.15507**

Amount of Each Disbursement this Period

148.76
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1148.76
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**TOTAL** This Period (last page this line number only)..... ▶

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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. FAIRFAX CONNECTION**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**DAVID BULOVA**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15524

Amount of Each Disbursement this Period

148.76

Full Name (Last, First, Middle Initial)

**B. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

Candidate Name  
**SHARON BULOVA**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15379

Amount of Each Disbursement this Period

71.43

Full Name (Last, First, Middle Initial)

**C. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

011

Candidate Name  
**JOHN GUEVARA**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15383

Amount of Each Disbursement this Period

71.43

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

291.62

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**DAN STORCK**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15384**

Amount of Each Disbursement this Period

71.43

Full Name (Last, First, Middle Initial)

**B. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**MOLLIE LOEFFLER**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15386**

Amount of Each Disbursement this Period

71.43

Full Name (Last, First, Middle Initial)

**C. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**JEFFREY C MCKAY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15388**

Amount of Each Disbursement this Period

71.43

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

214.29

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**PATRICK S HERRITY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15390

Amount of Each Disbursement this Period

71.43

Full Name (Last, First, Middle Initial)

**B. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**DAVID BULOVA**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15392

Amount of Each Disbursement this Period

71.43

Full Name (Last, First, Middle Initial)

**C. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TIMOTHY HUGO**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15393

Amount of Each Disbursement this Period

71.43

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

214.29

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**MARK SICKLES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : **SB29.15394**

Amount of Each Disbursement this Period

71.43

Full Name (Last, First, Middle Initial)

**B. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**JENNIFER B BOYSKO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : **SB29.15395**

Amount of Each Disbursement this Period

71.43

Full Name (Last, First, Middle Initial)

**C. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**BARBARA FAVOLA**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : **SB29.15396**

Amount of Each Disbursement this Period

71.43

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

214.29

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**RICHARD SASLAW**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15398**

Amount of Each Disbursement this Period

71.43

Full Name (Last, First, Middle Initial)

**B. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**SCOTT A SUROVELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15400**

Amount of Each Disbursement this Period

71.42

Full Name (Last, First, Middle Initial)

**C. FAIRFAX COUNTY TIMES**

Mailing Address 1920 ASSOCIATION DR  
SUITE 500

City RESTON State VA Zip Code 20191

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**GEORGE BARKER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15401**

Amount of Each Disbursement this Period

71.42

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

214.27

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. FAIRFAX STATION-CLIFTON-LORTON CONNECTION**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2015

Mailing Address 1606 KING ST

**Transaction ID : SB29.15508**

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

49.58
-------

Purpose of Disbursement  
ADVERTISEMENT

004
Category/ Type

Candidate Name

**PATRICK S HERRITY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Full Name (Last, First, Middle Initial)

**B. FAIRFAX STATION-CLIFTON-LORTON CONNECTION**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2015

Mailing Address 1606 KING ST

**Transaction ID : SB29.15509**

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

49.58
-------

Purpose of Disbursement  
ADVERTISEMENT

004
Category/ Type

Candidate Name

**TIMOTHY HUGO**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Full Name (Last, First, Middle Initial)

**C. FAIRFAX STATION-CLIFTON-LORTON CONNECTION**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2015

Mailing Address 1606 KING ST

**Transaction ID : SB29.15510**

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

49.59
-------

Purpose of Disbursement  
ADVERTISEMENT

004
Category/ Type

Candidate Name

**GEORGE BARKER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

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

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

148.75
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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. FAIRFAX STATION-CLIFTON-LORTON CONNECTION**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2015

Mailing Address 1606 KING ST

**Transaction ID : SB29.15568**

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

49.58
-------

Purpose of Disbursement  
ADVERTISEMENT

004
Category/ Type

Candidate Name

**PATRICK S HERRITY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Full Name (Last, First, Middle Initial)

**B. FAIRFAX STATION-CLIFTON-LORTON CONNECTION**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2015

Mailing Address 1606 KING ST

**Transaction ID : SB29.15569**

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

49.58
-------

Purpose of Disbursement  
ADVERTISEMENT

004
Category/ Type

Candidate Name

**TIMOTHY HUGO**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Full Name (Last, First, Middle Initial)

**C. FAIRFAX STATION-CLIFTON-LORTON CONNECTION**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2015

Mailing Address 1606 KING ST

**Transaction ID : SB29.15570**

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

49.59
-------

Purpose of Disbursement  
ADVERTISEMENT

004
Category/ Type

Candidate Name

**GEORGE BARKER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

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

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

148.75
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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. FEDERAL EXPRESS**

Mailing Address P.O. BOX 1140

City MEMPHIS State TN Zip Code 38101

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2015

Transaction ID : SB29.15555

Amount of Each Disbursement this Period

16.71

Full Name (Last, First, Middle Initial)

**B. FEDERAL EXPRESS**

Mailing Address P.O. BOX 1140

City MEMPHIS State TN Zip Code 38101

Purpose of Disbursement

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : SB29.15556

Amount of Each Disbursement this Period

423.03

Full Name (Last, First, Middle Initial)

**C. FEDERAL EXPRESS**

Mailing Address P.O. BOX 1140

City MEMPHIS State TN Zip Code 38101

Purpose of Disbursement

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 03 / 2015

Transaction ID : SB29.15558

Amount of Each Disbursement this Period

254.11

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

693.85

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. BRIAN FOSTER**

Mailing Address 305 E CHARLTON STREET

City SAVANNAH State GA Zip Code 31401

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**BRIAN FOSTER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2015

**Transaction ID : SB29.15405**

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**B. BRIAN FOSTER**

Mailing Address 305 E CHARLTON STREET

City SAVANNAH State GA Zip Code 31401

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**BRIAN FOSTER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼ Runoff

State: GA District:

Date of Disbursement

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

**Transaction ID : SB29.15492**

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**C. FRANTZ FOR COUNCIL**

Mailing Address 410 W CHATHAM STREET

City CARY State NC Zip Code 27511

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**DONALD FRANZ**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 25 / 2015

**Transaction ID : SB29.15250**

Amount of Each Disbursement this Period

1000.00

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

2500.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. FREE LANCE STAR**

Mailing Address 616 AMELLA ST

City State Zip Code  
FREDERICKSBURG VA 22401

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TRAVIS BIRD**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : SB29.15363

Amount of Each Disbursement this Period

327.97

Full Name (Last, First, Middle Initial)

**B. FREE LANCE STAR**

Mailing Address 616 AMELLA ST

City State Zip Code  
FREDERICKSBURG VA 22401

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TIM MCLAUGHLIN**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : SB29.15365

Amount of Each Disbursement this Period

327.97

Full Name (Last, First, Middle Initial)

**C. FREE LANCE STAR**

Mailing Address 616 AMELLA ST

City State Zip Code  
FREDERICKSBURG VA 22401

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**JOSEPH KINGMAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : SB29.15367

Amount of Each Disbursement this Period

327.96

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

983.90

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF MAUREEN CADDIGAN**

Mailing Address 16010 EDGEWOOD DRIVE

City MONTCLAIR State VA Zip Code 22025

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**MAUREEN CADDIGAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	29	/	2015

Transaction ID : **SB29.15369**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF PAUL B EBERT**

Mailing Address PO BOX 509

City MANASSAS State VA Zip Code 20108

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**PAUL EBERT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	27	/	2015

Transaction ID : **SB29.15353**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF TONY BUFFINGTON**

Mailing Address P O BOX 4268

City ASHBURN State VA Zip Code 20148

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**TONY BUFFINGTON**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	01	/	2015

Transaction ID : **SB29.15269**

Amount of Each Disbursement this Period

500.00
--------

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

1500.00
---------

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

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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. GRENADA DAILY STAR**

Mailing Address 50 CORPORATE ROW

City GRENAIDA State MS Zip Code 38901

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**THOMAS REYNOLDS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15176

Amount of Each Disbursement this Period

62.00

Full Name (Last, First, Middle Initial)

**B. GRENADA DAILY STAR**

Mailing Address 50 CORPORATE ROW

City GRENAIDA State MS Zip Code 38901

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15177

Amount of Each Disbursement this Period

62.00

Full Name (Last, First, Middle Initial)

**C. GRENADA DAILY STAR**

Mailing Address 50 CORPORATE ROW

City GRENAIDA State MS Zip Code 38901

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15178

Amount of Each Disbursement this Period

62.00

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

186.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. JOHN GUEVARA**

Mailing Address 3180 WHEATLAND FARMS DRIVE

City OAKTON State VA Zip Code 22124

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2015

Transaction ID : SB29.15332

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. JOHN HALL**

Mailing Address 3301 HAZEL STREET

City SAVANNAH State GA Zip Code 31404

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**JOHN HALL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : SB29.15407

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. HANK PARTIN FOR SHERIFF**

Mailing Address 70 COPPER BEECH COURT

City CHRISTIANSBURG State VA Zip Code 24073

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**HANK PARTIN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2015

Transaction ID : SB29.15324

Amount of Each Disbursement this Period

500.00

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

2000.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. SUE HANSOHN**

Mailing Address 12310 ROSE COTTAGE LANE

City State Zip Code  
CULPEPER VA 22701

Purpose of Disbursement  
POLITICAL WORK/FLYERS

Candidate Name  
**SUE HANSOHN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2015

**Transaction ID : SB29.15595**

Amount of Each Disbursement this Period

1.35
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. HATTIESBURG AMERICAN**

Mailing Address 825 N MAIN

City State Zip Code  
HATTIESBURG MS 39401

Purpose of Disbursement  
ADVERTISEMENT

Candidate Name  
**PHIL BRYANT**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : SB29.15179**

Amount of Each Disbursement this Period

213.75
--------

Full Name (Last, First, Middle Initial)

**C. HATTIESBURG AMERICAN**

Mailing Address 825 N MAIN

City State Zip Code  
HATTIESBURG MS 39401

Purpose of Disbursement  
ADVERTISEMENT

Candidate Name  
**TATE REEVES**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : SB29.15180**

Amount of Each Disbursement this Period

213.75
--------

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

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

427.50
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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. HERALD WEEKLY**

Mailing Address 209 DELBURG STREET SUITE 209

City State Zip Code  
DAVIDSON NC 28036

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**JILL SWAIN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15459

Amount of Each Disbursement this Period

73.80

Full Name (Last, First, Middle Initial)

**B. HERALD WEEKLY**

Mailing Address 209 DELBURG STREET SUITE 209

City State Zip Code  
DAVIDSON NC 28036

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**MELINDA BALES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15461

Amount of Each Disbursement this Period

73.80

Full Name (Last, First, Middle Initial)

**C. HERALD WEEKLY**

Mailing Address 209 DELBURG STREET SUITE 209

City State Zip Code  
DAVIDSON NC 28036

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**DAN BOONE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15462

Amount of Each Disbursement this Period

73.80

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

221.40

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. HERALD WEEKLY**

Mailing Address 209 DELBURG STREET SUITE 209

City State Zip Code  
DAVIDSON NC 28036

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**SHARON ESKRIDGE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15463

Amount of Each Disbursement this Period

73.80

Full Name (Last, First, Middle Initial)

**B. HERALD WEEKLY**

Mailing Address 209 DELBURG STREET SUITE 209

City State Zip Code  
DAVIDSON NC 28036

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**ROD KIDWELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15464

Amount of Each Disbursement this Period

73.80

Full Name (Last, First, Middle Initial)

**C. HERALD WEEKLY**

Mailing Address 209 DELBURG STREET SUITE 209

City State Zip Code  
DAVIDSON NC 28036

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**SARAH MCAULAY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15465

Amount of Each Disbursement this Period

73.80

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

221.40

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. HERALD WEEKLY**

Mailing Address 209 DELBURG STREET SUITE 209

City State Zip Code  
DAVIDSON NC 28036

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**DAVID GILROY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15466**

Amount of Each Disbursement this Period

73.80

Full Name (Last, First, Middle Initial)

**B. HERALD WEEKLY**

Mailing Address 209 DELBURG STREET SUITE 209

City State Zip Code  
DAVIDSON NC 28036

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**JEFF NEELY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15467**

Amount of Each Disbursement this Period

73.80

Full Name (Last, First, Middle Initial)

**C. HERALD WEEKLY**

Mailing Address 209 DELBURG STREET SUITE 209

City State Zip Code  
DAVIDSON NC 28036

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**STACEY ANDERSON**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15468**

Amount of Each Disbursement this Period

73.80

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

221.40

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. HERALD WEEKLY**

Mailing Address 209 DELBURG STREET SUITE 209

City State Zip Code  
DAVIDSON NC 28036

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**BETH CASHION**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15469**

Amount of Each Disbursement this Period

73.80

Full Name (Last, First, Middle Initial)

**B. JOHN BELL FOR DELEGATE**

Mailing Address PO BOX 223822

City State Zip Code  
CHANTILLY VA 20153

Purpose of Disbursement  
CONTRIBUTION

010

Candidate Name

**JOHN BELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2015

Transaction ID : **SB29.15318**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. VAN JOHNSON**

Mailing Address PO BOX 9141

City State Zip Code  
SAVANNAH GA 31412

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**VAN JOHNSON**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : **SB29.15426**

Amount of Each Disbursement this Period

500.00

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

1573.80

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. KORAN FOR STERLING**

Mailing Address PO BOX 44

City STERLING State VA Zip Code 20167

Purpose of Disbursement  
CONTRIBUTION

011

Category/  
Type

Candidate Name

**KORAN SAINES**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2015

Transaction ID : **SB29.15489**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. LAKE NORMAN CITIZEN**

Mailing Address 307 GILEAD RD

City HUNTERSVILLE State NC Zip Code 28070

Purpose of Disbursement  
ADVERTISEMENT

004

Category/  
Type

Candidate Name

**JILL SWAIN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : **SB29.15470**

Amount of Each Disbursement this Period

57.00

Full Name (Last, First, Middle Initial)

**C. LAKE NORMAN CITIZEN**

Mailing Address 307 GILEAD RD

City HUNTERSVILLE State NC Zip Code 28070

Purpose of Disbursement  
ADVERTISEMENT

004

Category/  
Type

Candidate Name

**MELINDA BALES**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : **SB29.15471**

Amount of Each Disbursement this Period

57.00

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

614.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. LAKE NORMAN CITIZEN**

Mailing Address 307 GILEAD RD

City HUNTERSVILLE State NC Zip Code 28070

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**DAN BOONE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NC District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15472

Amount of Each Disbursement this Period

57.00

Full Name (Last, First, Middle Initial)

**B. LAKE NORMAN CITIZEN**

Mailing Address 307 GILEAD RD

City HUNTERSVILLE State NC Zip Code 28070

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**SHARON ESKRIDGE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NC District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15473

Amount of Each Disbursement this Period

57.00

Full Name (Last, First, Middle Initial)

**C. LAKE NORMAN CITIZEN**

Mailing Address 307 GILEAD RD

City HUNTERSVILLE State NC Zip Code 28070

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**ROD KIDWELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NC District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15474

Amount of Each Disbursement this Period

57.00

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

171.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. LAKE NORMAN CITIZEN**

Mailing Address 307 GILEAD RD

City HUNTERSVILLE State NC Zip Code 28070

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**SARAH MCAULAY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15475

Amount of Each Disbursement this Period

57.00

Full Name (Last, First, Middle Initial)

**B. LAKE NORMAN CITIZEN**

Mailing Address 307 GILEAD RD

City HUNTERSVILLE State NC Zip Code 28070

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**DAVID GILROY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15476

Amount of Each Disbursement this Period

57.00

Full Name (Last, First, Middle Initial)

**C. LAKE NORMAN CITIZEN**

Mailing Address 307 GILEAD RD

City HUNTERSVILLE State NC Zip Code 28070

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**JEFF NEELY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NC District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15477

Amount of Each Disbursement this Period

57.00

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

171.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. LAKE NORMAN CITIZEN**

Mailing Address 307 GILEAD RD

City HUNTERSVILLE State NC Zip Code 28070

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**STACEY ANDERSON**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NC District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15478**

Amount of Each Disbursement this Period

57.00

Full Name (Last, First, Middle Initial)

**B. LAKE NORMAN CITIZEN**

Mailing Address 307 GILEAD RD

City HUNTERSVILLE State NC Zip Code 28070

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**BETH CASHION**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NC District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15479**

Amount of Each Disbursement this Period

57.00

Full Name (Last, First, Middle Initial)

**C. DAVID B LOCHRIDGE**

Mailing Address 1013 RIDGEMERE LANE

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement  
POLITICAL WORK/FLYERS

Category/  
Type

Candidate Name  
**DAVID B LOCHRIDGE**

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2015

Transaction ID : **SB29.15611**

Amount of Each Disbursement this Period

1.35

[MEMO ITEM]

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

114.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. MARK LEVINE FOR DELEGATE**

Mailing Address 805 RIVERGATE PLACE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CONTRIBUTION

011

Category/Type

Candidate Name

**MARK LEVINE**

Office Sought:  House  Senate  President

Disbursement For: 2015  Primary  General  Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : SB29.15375

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. SHAUNDRA MCKEITHEN**

Mailing Address 1914 CHAMPION STREET

City SAVANNAH State GA Zip Code 31405

Purpose of Disbursement CONTRIBUTION

011

Category/Type

Candidate Name

**SHAUNDRA MCKEITHEN**

Office Sought:  House  Senate  President

Disbursement For: 2015  Primary  General  Other (specify) ▼

State: GA District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : SB29.15427

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MERIDIAN STAR**

Mailing Address 814 22ND AVENUE

City MERIDIAN State MS Zip Code 39301

Purpose of Disbursement ADVERTISEMENT

004

Category/Type

Candidate Name

**PHIL BRYANT**

Office Sought:  House  Senate  President

Disbursement For: 2015  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : SB29.15181

Amount of Each Disbursement this Period

136.80

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

1136.80

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. MERIDIAN STAR**

Mailing Address 814 22ND AVENUE

City MERIDIAN State MS Zip Code 39301

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MS District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : **SB29.15182**

Amount of Each Disbursement this Period

136.80

Full Name (Last, First, Middle Initial)

**B. JOHN MIALL**

Mailing Address 18 NORTHWOOD ROAD

City ASHEVILLE State NC Zip Code 28804

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**JOHN MIALL**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NC District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 21 / 2015

Transaction ID : **SB29.15254**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MIKE TURNER FOR ASHBURN**

Mailing Address 19365 CYPRESS RIDGE TERRACE 605

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**MIKE TURNER**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : **SB29.15360**

Amount of Each Disbursement this Period

500.00

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

1136.80

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. JULIAN MILLER**

Mailing Address 516 E 44TH STREET

City SAVANNAH State GA Zip Code 31405

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**JULIAN MILLER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2015

**Transaction ID : SB29.15428**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. MT VERNON GAZETTE**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**DAN STORCK**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

**Transaction ID : SB29.15522**

Amount of Each Disbursement this Period

74.38

Full Name (Last, First, Middle Initial)

**C. MT VERNON GAZETTE**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**SCOTT A SUROVELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

**Transaction ID : SB29.15523**

Amount of Each Disbursement this Period

74.38

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

648.76

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. MT VERNON GAZETTE**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**DAN STORCK**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15565

Amount of Each Disbursement this Period

74.38

Full Name (Last, First, Middle Initial)

**B. MT VERNON GAZETTE**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**SCOTT A SUROVELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15566

Amount of Each Disbursement this Period

74.38

Full Name (Last, First, Middle Initial)

**C. NATCHEZ DEMOCRAT**

Mailing Address 503 NORTH CANAL ST

City NATCHEZ State MS Zip Code 39120

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15183

Amount of Each Disbursement this Period

146.25

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

295.01

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. NATCHEZ DEMOCRAT**

Mailing Address 503 NORTH CANAL ST

City Natchez State MS Zip Code 39120

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

**Transaction ID : SB29.15184**

Amount of Each Disbursement this Period

146.25

Full Name (Last, First, Middle Initial)

**B. NEW ALBANY GAZETTE**

Mailing Address 713 CARTER AVE

City New Albany State MS Zip Code 30652

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

**Transaction ID : SB29.15185**

Amount of Each Disbursement this Period

47.25

Full Name (Last, First, Middle Initial)

**C. NEW ALBANY GAZETTE**

Mailing Address 713 CARTER AVE

City New Albany State MS Zip Code 30652

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

**Transaction ID : SB29.15186**

Amount of Each Disbursement this Period

47.25

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

240.75

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. NEW ALBANY GAZETTE**

Mailing Address 713 CARTER AVE

City NEW ALBANY State MS Zip Code 30652

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**JUSTIN CLUCK**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MS District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15187

Amount of Each Disbursement this Period

47.25

Full Name (Last, First, Middle Initial)

**B. NEWTON RECORD**

Mailing Address 105 MAIN STREET

City NEWTON State MS Zip Code 39345

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15189

Amount of Each Disbursement this Period

45.00

Full Name (Last, First, Middle Initial)

**C. NEWTON RECORD**

Mailing Address 105 MAIN STREET

City NEWTON State MS Zip Code 39345

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MS District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15190

Amount of Each Disbursement this Period

45.00

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

137.25

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. NEWTON RECORD**

Mailing Address 105 MAIN STREET

City NEWTON State MS Zip Code 39345

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**RANDY RUSHING**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : SB29.15191

Amount of Each Disbursement this Period

45.00

Full Name (Last, First, Middle Initial)

**B. NORTH MISSISSIPPI HERALD**

Mailing Address 416 NORTH MAIN ST

City WATER VALLEY State MS Zip Code 38965

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**THOMAS REYNOLDS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : SB29.15193

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**C. NORTH MISSISSIPPI HERALD**

Mailing Address 416 NORTH MAIN ST

City WATER VALLEY State MS Zip Code 38965

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : SB29.15194

Amount of Each Disbursement this Period

25.00

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

95.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. NORTH MISSISSIPPI HERALD**

Mailing Address 416 NORTH MAIN ST

City WATER VALLEY State MS Zip Code 38965

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

**Transaction ID : SB29.15195**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**B. OAK HILL/HERNDON CONNECTION**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**JENNIFER B BOYSKO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

**Transaction ID : SB29.15502**

Amount of Each Disbursement this Period

148.76

Full Name (Last, First, Middle Initial)

**C. OAK HILL/HERNDON CONNECTION**

Mailing Address 1606 KING ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ADVERTISEMENT

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Candidate Name

**JENNIFER B BOYSKO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

**Transaction ID : SB29.15521**

Amount of Each Disbursement this Period

148.76

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

322.52

**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)

<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. OXFORD CITIZEN**

Mailing Address 9 INDUSTRIAL PARK DRIVE SUITE 106

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**THOMAS REYNOLDS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	5

**Transaction ID : SB29.15209**

Amount of Each Disbursement this Period

5	3	.	3	4
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. OXFORD CITIZEN**

Mailing Address 9 INDUSTRIAL PARK DRIVE SUITE 106

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
ADVERTISEMENT

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Candidate Name  
**BRAD MAYO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	5

**Transaction ID : SB29.15211**

Amount of Each Disbursement this Period

5	3	.	3	4
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. OXFORD CITIZEN**

Mailing Address 9 INDUSTRIAL PARK DRIVE SUITE 106

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
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Candidate Name  
**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	5

**Transaction ID : SB29.15212**

Amount of Each Disbursement this Period

5	3	.	3	3
---	---	---	---	---

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

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

1	6	0	.	0	1
---	---	---	---	---	---

5	3	.	3	3
---	---	---	---	---

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. OXFORD CITIZEN**

Mailing Address 9 INDUSTRIAL PARK DRIVE SUITE 106

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
ADVERTISEMENT

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Candidate Name

**JUSTIN CLUCK**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

**Transaction ID : SB29.15213**

Amount of Each Disbursement this Period

53.33

Full Name (Last, First, Middle Initial)

**B. OXFORD CITIZEN**

Mailing Address 9 INDUSTRIAL PARK DRIVE SUITE 106

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
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Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

**Transaction ID : SB29.15214**

Amount of Each Disbursement this Period

53.33

Full Name (Last, First, Middle Initial)

**C. OXFORD CITIZEN**

Mailing Address 9 INDUSTRIAL PARK DRIVE SUITE 106

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
ADVERTISEMENT

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Candidate Name

**GRAY TOLLISON**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District: 09

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

**Transaction ID : SB29.15215**

Amount of Each Disbursement this Period

53.33

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

159.99

**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)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. OXFORD EAGLE**

Mailing Address 916 JACKSON AVENUE

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**THOMAS REYNOLDS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : SB29.15196

Amount of Each Disbursement this Period

41.50

Full Name (Last, First, Middle Initial)

**B. OXFORD EAGLE**

Mailing Address 916 JACKSON AVENUE

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
ADVERTISEMENT

Category/  
Type

Candidate Name

**JAMES MAYO**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : SB29.15198

Amount of Each Disbursement this Period

41.50

Full Name (Last, First, Middle Initial)

**C. OXFORD EAGLE**

Mailing Address 916 JACKSON AVENUE

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
ADVERTISEMENT

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Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : SB29.15201

Amount of Each Disbursement this Period

41.50

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

124.50

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. OXFORD EAGLE**

Mailing Address 916 JACKSON AVENUE

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**JUSTIN CLUCK**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : SB29.15205**

Amount of Each Disbursement this Period

41.50
-------

Full Name (Last, First, Middle Initial)

**B. OXFORD EAGLE**

Mailing Address 916 JACKSON AVENUE

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
ADVERTISEMENT

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Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : SB29.15206**

Amount of Each Disbursement this Period

41.50
-------

Full Name (Last, First, Middle Initial)

**C. OXFORD EAGLE**

Mailing Address 916 JACKSON AVENUE

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
ADVERTISEMENT

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Candidate Name

**GRAY TOLLISON**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : SB29.15207**

Amount of Each Disbursement this Period

41.50
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

124.50
--------

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

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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. PLANCK LLC-PRINCE WILLIAM PATCH**

Mailing Address PO BOX 28762

City NEW YORK State NY Zip Code 10087-8762

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PAUL EBERT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15336

Amount of Each Disbursement this Period

393.75

Full Name (Last, First, Middle Initial)

**B. PLANCK LLC-PRINCE WILLIAM PATCH**

Mailing Address PO BOX 28762

City NEW YORK State NY Zip Code 10087-8762

Purpose of Disbursement  
ADVERTISEMENT

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Candidate Name

**MAUREEN CADDIGAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15342

Amount of Each Disbursement this Period

393.75

Full Name (Last, First, Middle Initial)

**C. PLANCK LLC-PRINCE WILLIAM PATCH**

Mailing Address PO BOX 28762

City NEW YORK State NY Zip Code 10087-8762

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**EARNEST PORTA Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SB29.15344

Amount of Each Disbursement this Period

393.75

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

1181.25

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. PLANCK LLC-PRINCE WILLIAM PATCH**

Mailing Address PO BOX 28762

City NEW YORK State NY Zip Code 10087-8762

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**FRANK PRINCIPI**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : **SB29.15346**

Amount of Each Disbursement this Period

393.75

Full Name (Last, First, Middle Initial)

**B. PRENTISS COUNTY PROGRESS**

Mailing Address 1619 W CHAMBERS DR

City BOONEVILLE State MS Zip Code 38829

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15216**

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**C. PRENTISS COUNTY PROGRESS**

Mailing Address 1619 W CHAMBERS DR

City BOONEVILLE State MS Zip Code 38829

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15217**

Amount of Each Disbursement this Period

30.00

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

453.75

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. PRENTISS COUNTY PROGRESS**

Mailing Address 1619 W CHAMBERS DR

City BOONEVILLE State MS Zip Code 38829

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**LAUREN CHILDERS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MS District: 03

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : SB29.15218

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**B. PRINCE WILLIAM TODAY**

Mailing Address 19 N KING ST

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**PAUL EBERT**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : SB29.15348

Amount of Each Disbursement this Period

138.75

Full Name (Last, First, Middle Initial)

**C. PRINCE WILLIAM TODAY**

Mailing Address 19 N KING ST

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**MAUREEN CADDIGAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : SB29.15350

Amount of Each Disbursement this Period

138.75

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

307.50

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. PRINCE WILLIAM TODAY**

Mailing Address 19 N KING ST

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**EARNEST PORTA Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15351**

Amount of Each Disbursement this Period

138.75

Full Name (Last, First, Middle Initial)

**B. PRINCE WILLIAM TODAY**

Mailing Address 19 N KING ST

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**FRANK PRINCIPI**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15352**

Amount of Each Disbursement this Period

138.75

Full Name (Last, First, Middle Initial)

**C. RANDALL FOR CHAIR**

Mailing Address PO BOX 6272

City LEESBURG State VA Zip Code 20178

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**PHYLLIS RANDALL**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2015

Transaction ID : **SB29.15374**

Amount of Each Disbursement this Period

1000.00

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

1277.50

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. RANKIN RECORD**

Mailing Address 644 LAKELAND E DR SUITE F

City State Zip Code  
FLOWOOD MS 39232

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

**Transaction ID : SB29.15583**

Amount of Each Disbursement this Period

52.50

Full Name (Last, First, Middle Initial)

**B. RANKIN RECORD**

Mailing Address 644 LAKELAND E DR SUITE F

City State Zip Code  
FLOWOOD MS 39232

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

**Transaction ID : SB29.15585**

Amount of Each Disbursement this Period

52.50

Full Name (Last, First, Middle Initial)

**C. RANKIN RECORD**

Mailing Address 644 LAKELAND E DR SUITE F

City State Zip Code  
FLOWOOD MS 39232

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TOME MILES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

**Transaction ID : SB29.15586**

Amount of Each Disbursement this Period

52.50

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

157.50

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. RANKIN TIMES**

Mailing Address 207 E GOVERNMENT ST

City BRANDON State MS Zip Code 39042

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2015

Transaction ID : **SB29.15578**

Amount of Each Disbursement this Period

50.00
-------

Full Name (Last, First, Middle Initial)

**B. RANKIN TIMES**

Mailing Address 207 E GOVERNMENT ST

City BRANDON State MS Zip Code 39042

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2015

Transaction ID : **SB29.15580**

Amount of Each Disbursement this Period

50.00
-------

Full Name (Last, First, Middle Initial)

**C. RANKIN TIMES**

Mailing Address 207 E GOVERNMENT ST

City BRANDON State MS Zip Code 39042

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TOME MILES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2015

Transaction ID : **SB29.15581**

Amount of Each Disbursement this Period

50.00
-------

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

150.00
--------

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

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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. FRANK REAVES Jr.**

Mailing Address 1035 SPERRYVILLE PIKE

City State Zip Code  
CULPEPER VA 22701

Purpose of Disbursement  
POLITICAL WORK/FLYERS

Candidate Name  
**FRANK REAVES Jr.**

Office Sought:  House  Senate  President  
State: VA District:   
Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

Transaction ID : **SB29.15610**

Amount of Each Disbursement this Period

1.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. BRYCE E REEVES**

Mailing Address PO BOX 7022

City State Zip Code  
FREDERICKSBURG VA 22404

Purpose of Disbursement  
POLITICAL WORK/FLYERS

Candidate Name  
**BRYCE E REEVES**

Office Sought:  House  Senate  President  
State: VA District:   
Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

Transaction ID : **SB29.15592**

Amount of Each Disbursement this Period

1.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. ROBERT RUCKER FOR CLERK OF THE COURT OF PULASKI COUNTY**

Mailing Address 523 CARRIAGE HILL DRIVE

City State Zip Code  
PULASKI VA 24301

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**ROBERT RUCKER**

Office Sought:  House  Senate  President  
State: VA District:   
Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15255**

Amount of Each Disbursement this Period

250.00

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

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

250.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. SAVANNAH MORNING NEWS**

Mailing Address 1375 CHATHAM PKWY

City SAVANNAH State GA Zip Code 31405

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**VAN JOHNSON**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : **SB29.15415**

Amount of Each Disbursement this Period

151.43

Full Name (Last, First, Middle Initial)

**B. SAVANNAH MORNING NEWS**

Mailing Address 1375 CHATHAM PKWY

City SAVANNAH State GA Zip Code 31405

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**BILL DURRENCE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : **SB29.15418**

Amount of Each Disbursement this Period

151.43

Full Name (Last, First, Middle Initial)

**C. SAVANNAH MORNING NEWS**

Mailing Address 1375 CHATHAM PKWY

City SAVANNAH State GA Zip Code 31405

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**JOHN HALL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : **SB29.15419**

Amount of Each Disbursement this Period

151.43

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

454.29

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. SAVANNAH MORNING NEWS**

Mailing Address 1375 CHATHAM PKWY

City SAVANNAH State GA Zip Code 31405

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**JULIAN MILLER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : **SB29.15420**

Amount of Each Disbursement this Period

151.43

Full Name (Last, First, Middle Initial)

**B. SAVANNAH MORNING NEWS**

Mailing Address 1375 CHATHAM PKWY

City SAVANNAH State GA Zip Code 31405

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**SHAUNDRA MCKEITHEN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : **SB29.15422**

Amount of Each Disbursement this Period

151.43

Full Name (Last, First, Middle Initial)

**C. SAVANNAH MORNING NEWS**

Mailing Address 1375 CHATHAM PKWY

City SAVANNAH State GA Zip Code 31405

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**CAROL BELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : **SB29.15424**

Amount of Each Disbursement this Period

151.43

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

454.29

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. SAVANNAH MORNING NEWS**

Mailing Address 1375 CHATHAM PKWY

City SAVANNAH State GA Zip Code 31405

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**BRIAN FOSTER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

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

Transaction ID : **SB29.15425**

Amount of Each Disbursement this Period

1	5	1	4	2	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. SAVANNAH MORNING NEWS**

Mailing Address 1375 CHATHAM PKWY

City SAVANNAH State GA Zip Code 31405

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**EDDIE DELOACH**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

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

Transaction ID : **SB29.15533**

Amount of Each Disbursement this Period

2	1	1	3	4
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. SAVANNAH MORNING NEWS**

Mailing Address 1375 CHATHAM PKWY

City SAVANNAH State GA Zip Code 31405

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**BILL DURRENCE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

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

Transaction ID : **SB29.15534**

Amount of Each Disbursement this Period

2	1	1	3	3
---	---	---	---	---

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

5	7	4	0	9
---	---	---	---	---

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

5	7	4	0	9
---	---	---	---	---

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. SAVANNAH MORNING NEWS**

Mailing Address 1375 CHATHAM PKWY

City SAVANNAH State GA Zip Code 31405

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**BRIAN FOSTER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
Runoff

State: GA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2015

Transaction ID : **SB29.15535**

Amount of Each Disbursement this Period

211.33

Full Name (Last, First, Middle Initial)

**B. SCOTT COUNTY TIMES**

Mailing Address 311 SMITH STREET

City FORREST State MS Zip Code 39074

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : **SB29.15219**

Amount of Each Disbursement this Period

55.00

Full Name (Last, First, Middle Initial)

**C. SCOTT COUNTY TIMES**

Mailing Address 311 SMITH STREET

City FORREST State MS Zip Code 39074

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : **SB29.15220**

Amount of Each Disbursement this Period

55.00

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

321.33

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. SCOTT COUNTY TIMES**

Mailing Address 311 SMITH STREET

City FORREST State MS Zip Code 39074

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**RANDY RUSHING**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15221

Amount of Each Disbursement this Period

55.00

Full Name (Last, First, Middle Initial)

**B. SECURE AUGUSTA'S FUTURE**

Mailing Address 4858 WHITEHALL DR

City EVANS State GA Zip Code 30809

Purpose of Disbursement  
CONTRIBUTION FOR SPLOST REFERENDUM

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB29.15150

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. SOUTHERN ADVOCATE**

Mailing Address 1701 CITY AVENUE NOTH

City RIPLEY State MS Zip Code 38663

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**JUSTIN CLUCK**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15225

Amount of Each Disbursement this Period

15.44

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

1070.44

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

### A. SOUTHERN ADVOCATE

Mailing Address 1701 CITY AVENUE NOTH

City State Zip Code  
RIPLEY MS 38663

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		06		2015

Transaction ID : SB29.15227

Amount of Each Disbursement this Period

15.43
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Full Name (Last, First, Middle Initial)

### B. SOUTHERN ADVOCATE

Mailing Address 1701 CITY AVENUE NOTH

City State Zip Code  
RIPLEY MS 38663

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		06		2015

Transaction ID : SB29.15228

Amount of Each Disbursement this Period

15.44
-------

Full Name (Last, First, Middle Initial)

### C. SOUTHERN SENTINEL

Mailing Address 1701 CITY AVE NORTH

City State Zip Code  
RIPLEY MS 38663

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		06		2015

Transaction ID : SB29.15222

Amount of Each Disbursement this Period

35.39
-------

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

66.26
-------

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

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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. SOUTHERN SENTINEL**

Mailing Address 1701 CITY AVE NORTH

City State Zip Code  
RIPLEY MS 38663

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**ERIC POWELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15223**

Amount of Each Disbursement this Period

35.38

Full Name (Last, First, Middle Initial)

**B. SOUTHERN SENTINEL**

Mailing Address 1701 CITY AVE NORTH

City State Zip Code  
RIPLEY MS 38663

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15224**

Amount of Each Disbursement this Period

35.39

Full Name (Last, First, Middle Initial)

**C. SOUTH REPORTER**

Mailing Address 157 SOUTH CENTER

City State Zip Code  
HOLLY SPRINGS MS 38635

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**JUSTIN CLUCK**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15229**

Amount of Each Disbursement this Period

30.00

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

100.77

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. SOUTH REPORTER**

Mailing Address 157 SOUTH CENTER

City HOLLY SPRINGS State MS Zip Code 38635

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	5

Transaction ID : **SB29.15230**

Amount of Each Disbursement this Period

3	0	.	0	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. SOUTH REPORTER**

Mailing Address 157 SOUTH CENTER

City HOLLY SPRINGS State MS Zip Code 38635

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	5

Transaction ID : **SB29.15231**

Amount of Each Disbursement this Period

3	0	.	0	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. SPIRIT OF MORTON**

Mailing Address 32 WEST 2ND AVE

City MORTON State MS Zip Code 39117

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : **SB29.15587**

Amount of Each Disbursement this Period

2	7	.	5	0
---	---	---	---	---

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

8	7	.	5	0
---	---	---	---	---

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

8	7	.	5	0
---	---	---	---	---

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. SPIRIT OF MORTON**

Mailing Address 32 WEST 2ND AVE

City MORTON State MS Zip Code 39117

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15588**

Amount of Each Disbursement this Period

27.50

Full Name (Last, First, Middle Initial)

**B. SPIRIT OF MORTON**

Mailing Address 32 WEST 2ND AVE

City MORTON State MS Zip Code 39117

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TOME MILES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : **SB29.15589**

Amount of Each Disbursement this Period

27.50

Full Name (Last, First, Middle Initial)

**C. DAN STORCK**

Mailing Address 8512 STABLE DRIVE

City FORT HUNT State VA Zip Code 22308

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 11 / 2015

Transaction ID : **SB29.15333**

Amount of Each Disbursement this Period

1000.00

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

1055.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. SUN HERALD**

Mailing Address 205 DEBUYS

City GULFPORT State MS Zip Code 39507

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : **SB29.15233**

Amount of Each Disbursement this Period

350.04

Full Name (Last, First, Middle Initial)

**B. SUN HERALD**

Mailing Address 205 DEBUYS

City GULFPORT State MS Zip Code 39507

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : **SB29.15234**

Amount of Each Disbursement this Period

350.04

Full Name (Last, First, Middle Initial)

**C. SUN HERALD**

Mailing Address 205 DEBUYS

City GULFPORT State MS Zip Code 39507

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2015

Transaction ID : **SB29.15429**

Amount of Each Disbursement this Period

3.96

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

704.04

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)  
**A. SUN HERALD**

Mailing Address 205 DEBUYS

City GULFPORT State MS Zip Code 39507

Purpose of Disbursement  
ADVERTISEMENT

Candidate Name  
**TATE REEVES**

Office Sought:  House  Senate  President  
Disbursement For: 2015  Primary  General  Other (specify) ▼

State: MS District:

Date of Disbursement  
MM / DD / YYYY  
10 / 26 / 2015

Transaction ID : **SB29.15430**

Amount of Each Disbursement this Period  
3.96

Category/Type  
004

Full Name (Last, First, Middle Initial)  
**B. SUN SENTINEL**

Mailing Address 16 SOUTH COURT SQUARE

City CHARLESTON State MS Zip Code 38921

Purpose of Disbursement  
ADVERTISEMENT

Candidate Name  
**THOMAS REYNOLDS**

Office Sought:  House  Senate  President  
Disbursement For: 2015  Primary  General  Other (specify) ▼

State: MS District:

Date of Disbursement  
MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15235**

Amount of Each Disbursement this Period  
37.50

Category/Type  
004

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

Mailing Address 16 SOUTH COURT SQUARE

City CHARLESTON State MS Zip Code 38921

Purpose of Disbursement  
ADVERTISEMENT

Candidate Name  
**PHIL BRYANT**

Office Sought:  House  Senate  President  
Disbursement For: 2015  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15236**

Amount of Each Disbursement this Period  
37.50

Category/Type  
004

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 78.96

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. SUN SENTINEL**

Mailing Address 16 SOUTH COURT SQUARE

City CHARLESTON State MS Zip Code 38921

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15237

Amount of Each Disbursement this Period

37.50

Full Name (Last, First, Middle Initial)

**B. MEAGHAN TAYLOR**

Mailing Address 206 E PIEDMONT STREET

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement  
POLITICAL WORK/FLYERS

Category/  
Type

Candidate Name  
**MEAGHAN TAYLOR**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB29.15602

Amount of Each Disbursement this Period

1.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE PANOLIAN**

Mailing Address 363 HWY 51 NORTH

City BATESVILLE State MS Zip Code 38606

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name  
**GRAY TOLLISON**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District: 09

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB29.15238

Amount of Each Disbursement this Period

40.00

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

77.50

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. THE PANOLIAN**

Mailing Address 363 HWY 51 NORTH

City BATESVILLE State MS Zip Code 38606

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : SB29.15239

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

**B. THE PANOLIAN**

Mailing Address 363 HWY 51 NORTH

City BATESVILLE State MS Zip Code 38606

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : SB29.15240

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

**C. TISHOMINGO COUNTY NEWS**

Mailing Address 120 W FRONT STREET

City IUKA State MS Zip Code 38852

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : SB29.15241

Amount of Each Disbursement this Period

25.00

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

105.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. TISHOMINGO COUNTY NEWS**

Mailing Address 120 W FRONT STREET

City IUKA State MS Zip Code 38852

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15242**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**B. TISHOMINGO COUNTY NEWS**

Mailing Address 120 W FRONT STREET

City IUKA State MS Zip Code 38852

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**LESTER 'BUBBA' CARPENTER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15243**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**C. VICKSBURG POST**

Mailing Address 1601-F N FRONTAGE ROAD

City VICKSBRUG State MS Zip Code 39182

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**PHIL BRYANT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : **SB29.15244**

Amount of Each Disbursement this Period

109.72

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

159.72

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND**

Full Name (Last, First, Middle Initial)

**A. VICKSBURG POST**

Mailing Address 1601-F N FRONTAGE ROAD

City VICKSBURG State MS Zip Code 39182

Purpose of Disbursement  
ADVERTISEMENT

004

Candidate Name

**TATE REEVES**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

**Transaction ID : SB29.15245**

Amount of Each Disbursement this Period

109.73

Full Name (Last, First, Middle Initial)

**B. PAUL R WALTHER**

Mailing Address PO BOX 225

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement  
POLITICAL WORK/FLYERS

Category/  
Type

Candidate Name

**PAUL R WALTHER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB29.15613**

Amount of Each Disbursement this Period

1.35

**[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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

109.73

48820.63