REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full): Bank of Mississippi Officers' Voluntary Political Committee

ADDRESS (number and street) ☐ Check if different than previously reported: One Mississippi Plaza

CITY, STATE and ZIP CODE: Tupelo, MS 38801

JUL 11 10 46 AM '95

2. FEC IDENTIFICATION NUMBER: C00183962

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☒ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☐ March 20	☐ July 20	☐ November 20
☐ April 20	☐ August 20	☐ December 20
☐ May 20	☐ September 20	☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____.

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 1-1-95 through 6-30-95		
6. (a) Cash on Hand January 1, 19____		$ 19,073.58
(b) Cash on Hand at Beginning of Reporting Period	$ 19,073.58	
(c) Total Receipts (from Line 19)	$ 7,462.79	$ 7,462.79
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 26,536.37	$ 26,536.37
7. Total Disbursements (from Line 30)	$ 7,500.00	$ 7,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 19,036.37	$ 19,036.37
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ NONE	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ NONE	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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: L. NASH ALLEN JR.

Signature of Treasurer: L. Nash Allen Jr.

Date: 7-9-95

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

FEC FORM 3X (revised 8/93)

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DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE: BANK of MISSISSIPPI OFFICERS' VOLUNTARY POLITICAL COMMITTEE

REPORT COVERING PERIOD FROM 1-1-95 TO 6-30-95

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	NONE	NONE	11(a)(i)
ii. Unitemized	7,462.79	7,462.79	11(a)(ii)
iii. Total (add i and ii) ➤	7,462.79	7,462.79	11(a)(iii)
b. Political Party Committees	NONE	NONE	11(b)
c. Other Political Committees (such as PACs)	NONE	NONE	11(c)
d. Total Contributions (add a iii, b and c) ➤	7,462.79	7,462.79	11(d)
12. Transfers From Affiliated/Other Party Committees	NONE	NONE	12
13. All Loans Received	NONE	NONE	13
14. Loan Repayments Received	NONE	NONE	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	NONE	NONE	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	NONE	NONE	16
17. Other Federal Receipts (Dividends, Interest, etc.)	NONE	NONE	17
18. Transfers from Nonfederal Account for Joint Activity	NONE	NONE	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	7,462.79	7,462.79	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	7,462.79	7,462.79	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	NONE	NONE	21(a)(i)
ii. Non-Federal Share	NONE	NONE	21(a)(ii)
b. Other Federal Operating Expenditures	NONE	NONE	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	NONE	NONE	21(c)
22. Transfers to Affiliated/Other Party Committees	NONE	NONE	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	500.00	500.00	23
24. Independent Expenditures (use Schedule E)	NONE	NONE	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	NONE	NONE	25
26. Loan Repayments Made	NONE	NONE	26
27. Loans Made	NONE	NONE	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	NONE	NONE	28(a)
b. Political Party Committees	NONE	NONE	28(b)
c. Other Political Committees (such as PACs)	NONE	NONE	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	NONE	NONE	28(d)
29. Other Disbursements	7,000.00	7,000.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	7,500.00	7,500.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	7,500.00	7,500.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	7,462.79	7,462.79	32
33. Total Contribution Refunds (from line 28d)	NONE	NONE	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	7,462.79	7,462.79	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	NONE	NONE	35
36. Offsets to Operating Expenditures (from line 15)	NONE	NONE	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	NONE	NONE	37

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 11.9.1.

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

NAME OF COMMITTEE (In Full)
BANK of MISSISSIPPI OFFICERS' VOLUNTARY POLITICAL COMMITTEE

A. Full Name, Mailing Address and ZIP Code NONE Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
B. Full Name, Mailing Address and ZIP Code NO CONTRIBUTIONS Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code IN EXCESS OF $100.00 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code PER YEAR FROM ANY Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code INDIVIDUAL Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 23

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

NAME OF COMMITTEE (in Full)
BANK of Mississippi Officers' Voluntary Political Committee

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code MISS BANK PAC - FEDERAL FUND P.O. BOX 1091 JACKSON, MS 39215-1091	Support the Funds operations Disbursement for: ☐ Primary ☐ General ☒ Other (specify) ANNUAL Contribution	1-4-95	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	500.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 29

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

NAME OF COMMITTEE (in Full)
BANK of Mississippi Officers' Voluntary Political Committee

A. Full Name, Mailing Address and ZIP Code EDDIE BRIGGS CAMPAIGN P.O. BOX 2090 MERIDIAN MS 39302	Purpose of Disbursement CAMPAIGN FOR LT. GOV. of MISSISSIPPI Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 2-3-95	Amount of Each Disbursement This Period 7,000.00
B. Full Name, Mailing Address and ZIP Code FRIENDS of FORDICE P.O. BOX 3458 JACKSON, MS 39207	Purpose of Disbursement CAMPAIGN FOR GOVERNOR of MISSISSIPPI Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 5-8-95	Amount of Each Disbursement This Period 5,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	7,000.00
TOTAL This Period (last page this line number only)	7,000.00

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☑	Hand Delivered	DATE OF RECEIPT 7-11-95
☐	First Class Mail	POSTMARKED
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SLB. 7-11-95

PREPARER DATE PREPARED

FEC FORM 70-2 (12/92)

9 5 0 3 9 1 4 9 0 3