

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

Office Use Only

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

Haley's PAC

ADDRESS (number and street)

P.O. Box 1186

☐Check if different
than previously
reported. (ACC)

Jackson

MS

39215

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00406314

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

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

2010

through

07

31

2010

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

Henry Barbour

Signature of Treasurer

Electronically Filed by Henry Barbour

Date

08

19

2010

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

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 25

Write or Type Committee Name
Haley's PAC

Report Covering the Period: From: M M
0 7 D D
0 1 Y Y Y Y
2 0 1 0 To: M M
0 7 D D
3 1 Y Y Y Y
2 0 1 0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2 0 1 0		116494.16
(b) Cash on Hand at Beginning of Reporting Period	414486.93	
(c) Total Receipts (from Line 19)	63597.35	479544.35
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	478084.28	596038.51
7. Total Disbursements (from Line 31)	19850.64	137804.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	458233.64	458233.64
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ 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)

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Write or Type Committee Name

Haley's PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	7	0	1	2	0	1	0

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	1	0

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	51250.00	369500.00
(i) Itemized (use Schedule A)	3847.35	30044.35
(ii) Unitemized	55097.35	399544.35
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	8500.00	80000.00
(c) Other Political Committees (such as PACs)	63597.35	479544.35
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
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 Transfer (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))	63597.35	479544.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	63597.35	479544.35

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared 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.....	9850.64	74804.87	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	9850.64	74804.87	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	58500.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (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	500.00	500.00	
(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))	500.00	500.00	
29. Other Disbursements.....	1500.00	4000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared 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))..	19850.64	137804.87	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19850.64	137804.87	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	63597.35	479544.35
34. Total Contribution Refunds (from Line 28(d))	500.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	63097.35	479044.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9850.64	74804.87
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9850.64	74804.87

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

PAGE 6 / 25

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. W. PRESTON BALDWIN, III

Mailing Address 6 WINDING LANE

City

GREENWICH

State

CT

Zip Code

06831-3733

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTUPOINT 360 LLC

Occupation

BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	6	/	2	0	1	0

Transaction ID: SA11.16515

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WM. KIRK BLALOCK

Mailing Address 609 WEST BRADDOCK ROAD

City

ALEXANDRIA

State

VA

Zip Code

22302-4104

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIERCE, ISAKOWITZ & BLALOCK

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	6	/	2	0	1	0

Transaction ID: SA11.16536

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WM. KIRK BLALOCK

Mailing Address 609 WEST BRADDOCK ROAD

City

ALEXANDRIA

State

VA

Zip Code

22302-4104

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIERCE, ISAKOWITZ & BLALOCK

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	9	/	2	0	1	0

Transaction ID: SA11.16609

Amount of Each Receipt this Period

100.00

CONTRIBUTION

IN-KIND: CONFERENCE ROOM

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. LARRY R. BONDS

Mailing Address 15 COUNTY ROAD 164

City

IUKA

State

MS

Zip Code

38852-6757

FEC ID number of contributing
federal political committee.

C

Name of Employer
BONDS CO. INC.

Occupation

CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	0

Transaction ID: SA11.16563

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MICHAEL F. CHAPPELL

Mailing Address 5400 MACOMB STREET N.W.

City

WASHINGTON

State

DC

Zip Code

20016-5307

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIERCE, ISAKOWITZ & BLALO-
CK

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	0

Transaction ID: SA11.16537

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. THOMAS J. COLLAMORE

Mailing Address 5206 NORWAY DRIVE

City

CHEVY CHASE

State

MD

Zip Code

20815-6672

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. CHAMBER OF COMMERCE

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	0

Transaction ID: SA11.16495

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS M. CURTISS

Mailing Address 80 JOHNSON'S POINT

City

BRANFORD

State

CT

Zip Code

06405-4925

FEC ID number of contributing
federal political committee.

C

Name of Employer
SONITROL SECURITY SYSTEMS

Occupation

PRESIDENT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	2	/	2	0	1	0

Transaction ID: SA11.16548

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES C. FELTUS

Mailing Address 22 HAWTHORNE PL

City

NATCHEZ

State

MS

Zip Code

39120-4430

FEC ID number of contributing
federal political committee.

C

Name of Employer
MOSSY OAK PROPERTIES

Occupation

APPRAISER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	9	/	2	0	1	0

Transaction ID: SA11.16569

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DONALD L. FIERCE

Mailing Address 1155 F STREET N.W.
SUITE 950

City

WASHINGTON

State

DC

Zip Code

20004-1336

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIERCE, ISAKOWITZ AND BLA-
LOCK

Occupation

LOBBYIST

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	6	/	2	0	1	0

Transaction ID: SA11.16535

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

JUDY FRASCOGNA

Mailing Address 2122 BRACKENSHIRE CIR

City

JACKSON

State

MS

Zip Code

39211-5836

FEC ID number of contributing
federal political committee.

C

Name of Employer
FRASCOGNA COURTNEYOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	0

Transaction ID: SA11.16572

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SPENCER C. FULLEN

Mailing Address 3119 HIGHGATE DR

City

GERMANTOWN

State

TN

Zip Code

38138-7730

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	0

Transaction ID: SA11.16606

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. AL A. GONSOULIN

Mailing Address 10 MUIRFIELD WAY

City

SUGAR LAND

State

TX

Zip Code

77479-3966

FEC ID number of contributing
federal political committee.

C

Name of Employer
PHI, INC.Occupation
CHAIRMAN/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	0

Transaction ID: SA11.16573

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. MARC A. HIMMELSTEIN

Mailing Address 2845 MCGILL TERRACE N.W.

City

WASHINGTON

State

DC

Zip Code

20008-2749

FEC ID number of contributing
federal political committee.

C

Name of Employer
NATIONAL ENVIRONMENTAL ST-
RATEGIES

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 2 / 2 0 1 0

Transaction ID: SA11.16496

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEPHEN H. HOLLEY

Mailing Address 1830 CRANE RIDGE DRIVE

City

JACKSON

State

MS

Zip Code

39216-4901

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOVERNMENT CONSULTANTS,
INC.

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 9 / 2 0 1 0

Transaction ID: SA11.16503

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARK W. ISAKOWITZ

Mailing Address 3198 POND MIST WAY

City

HERNDON

State

VA

Zip Code

20171-1905

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIERCE, ISAKOWITZ & BLALO-
CK

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 6 / 2 0 1 0

Transaction ID: SA11.16538

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MS. PAULA JINES

Mailing Address 1830 CRANE RIDGE DRIVE

City

JACKSON

State

MS

Zip Code

39216-4901

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	9	/	2	0	1	0

Transaction ID: SA11.16502

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

SEYMOUR B. JOHNSON

Mailing Address PO BOX 7

City

INDIANOLA

State

MS

Zip Code

38751-0007

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	9	/	2	0	1	0

Transaction ID: SA11.16575

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BRUCE D. LEFTWICH

Mailing Address 5402 BAYCHESTER CT

City

ALEXANDRIA

State

VA

Zip Code

22315-4201

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAREER COLLEGE ASSOCIATION

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	1	/	2	0	1	0

Transaction ID: SA11.16487

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

FRANK L. MASON

Mailing Address 400 UNIVERSITY PARK DR.
APT. 286

City State Zip Code
BIRMINGHAM AL 35209-8825

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 1 0

Transaction ID: SA11.16592

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MICHAEL MASSENGILL

Mailing Address 111 FOREST GATE CIR

City State Zip Code
RIPLEY MS 38663-9053

FEC ID number of contributing
federal political committee.

C

Name of Employer
BIG M

Occupation
TRANSPORTATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 1 0

Transaction ID: SA11.16580

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. E. JOHN NEUMANN

Mailing Address 1031 NORTHWOODS TRAIL

City State Zip Code
MC LEAN VA 22102-1320

FEC ID number of contributing
federal political committee.

C

Name of Employer
USEC, INC.

Occupation
BUSINESS EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 6 / 2 0 1 0

Transaction ID: SA11.16517

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. DAVID A. NORCROSS

Mailing Address 10 W. ROSEMONT AVENUE

City

ALEXANDRIA

State

VA

Zip Code

22301-2624

FEC ID number of contributing
federal political committee.

C

Name of Employer
BLANK ROME GOVERNMENT REL-
ATIONOccupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	0

Transaction ID: SA11.16514

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. JUNIUS K. OATES

Mailing Address 111 REYNOLDS CIR

City

OCEAN SPRINGS

State

MS

Zip Code

39564-9736

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED PHYSICAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	0

Transaction ID: SA11.16610

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. NICHOLAS N. OWENS

Mailing Address 701 PENNSYLVANIA AVENUE NW
SUITE 206

City

WASHINGTON

State

DC

Zip Code

20004-2608

FEC ID number of contributing
federal political committee.

C

Name of Employer
MAGNOLIA CONSULTINGOccupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	0

Transaction ID: SA11.16547

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

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

PAGE 14 / 25

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.Full Name (Last, First, Middle Initial)
MS. DEBORAH PHILLIPS

Mailing Address 1830 CRANE RIDGE DRIVE

City	State	Zip Code
JACKSON	MS	39216-4901

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOLLEY GRUBBS MITCHAM &
PHILLIOccupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	1	0

Transaction ID: SA11.16505

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.Full Name (Last, First, Middle Initial)
MR. STEVE PITTMAN

Mailing Address 5345 RUNNYMEDE RD.

City	State	Zip Code
JACKSON	MS	39211-4636

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOVERNMENT CONSULTANTS,
INC.Occupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	1	0

Transaction ID: SA11.16504

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

REFUNDED \$500 ON 7/13/2010

C.Full Name (Last, First, Middle Initial)
MR. STEVE PITTMAN

Mailing Address 5345 RUNNYMEDE RD.

City	State	Zip Code
JACKSON	MS	39211-4636

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOVERNMENT CONSULTANTS,
INC.Occupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	0

Transaction ID: SA11.16565

Amount of Each Receipt this Period

500.00

CONTRIBUTION

\$500 TRANSFERRED TO HALEY-
S PAC - MISSISSIPPI on
7/20/2010

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

LEIGH A. PUSEY

Mailing Address 1119 ALEXANDRIA AVENUE

City

ALEXANDRIA

State

VA

Zip Code

22308-1015

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN INSURANCE ASSOCI-
ATION

Occupation

PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 13 / 2010

Transaction ID: SA11.16508

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DAVID M. RATCLIFF

Mailing Address PO BOX 706

City

LAUREL

State

MS

Zip Code

39441-0706

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 19 / 2010

Transaction ID: SA11.16584

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. KATHLEEN SHANAHAN

Mailing Address 2625 WEST SUNSET DRIVE

City

TAMPA

State

FL

Zip Code

33629-5340

FEC ID number of contributing
federal political committee.

C

Name of Employer
WRS COMPASS

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2010

Transaction ID: SA11.16516

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. LAWRENCE E. SPIVEY

Mailing Address 424 ARGYLE DRIVE

City

ALEXANDRIA

State

VA

Zip Code

22305-1603

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE ALPINE GROUP

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 12 / 2010

Transaction ID: SA11.16497

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

HALL W. THOMPSON

Mailing Address 7 GLENEAGLES DRIVE

City

SHOAL CREEK

State

AL

Zip Code

35242-5913

FEC ID number of contributing
federal political committee.

C

Name of Employer
THOMPSON REALTY

Occupation

BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 19 / 2010

Transaction ID: SA11.16560

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

LEE G. TURNAGE

Mailing Address 1316 FATHER RYAN AVENUE

City

BILOXI

State

MS

Zip Code

39530-3517

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 19 / 2010

Transaction ID: SA11.16589

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

MR. BARRY WAX

Mailing Address P.O. BOX 60

City

AMORY

State

MS

Zip Code

38821-0060

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE WAX COMPANY

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	0

Transaction ID: SA11.16244

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

TOWANA G. WILLIAMS

Mailing Address PO BOX 2398

City

PASCAGOULA

State

MS

Zip Code

39569-2398

FEC ID number of contributing
federal political committee.

C

Name of Employer
HAZMAT SERVICES INC.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	0

Transaction ID: SA11.16552

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

EMIL FRANCIS WRIGHT

Mailing Address 500 BROOKWOOD DRIVE

City

AUBURN

State

AL

Zip Code

36830-6052

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	0

Transaction ID: SA11.16543

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

51250.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 25

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

GENERAL ELECTRIC PAC

Mailing Address 1299 PENNSYLVANIA AVENUE N.W.

City

WASHINGTON

State

DC

Zip Code

20004-2400

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

C00024869

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	6	/	2	0	1	0

Transaction ID: SA11.16540

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MISSISSIPPI PHYSICIANS PAC

Mailing Address 404 WEST PARKWAY PLACE

City

RIDGELAND

State

MS

Zip Code

39157-6010

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	0

Transaction ID: SA11.16555

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

TRANSFERRED TO HALEY'S PAC
- MISSISSIPPI ON 7/29/2010**C.**

Full Name (Last, First, Middle Initial)

SENATE VICTORY FUND

Mailing Address P.O. BOX 7274

City

TUPELO

State

MS

Zip Code

38802-7274

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

C00202861

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	1	/	2	0	1	0

Transaction ID: SA11.16523

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

8500.00

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

PAGE 19 / 25

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

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NAME OF COMMITTEE (In Full)
Haley's PAC**A.**Full Name (Last, First, Middle Initial)
MR. WM. KIRK BLALOCK

Mailing Address 609 WEST BRADDOCK ROAD

City ALEXANDRIA State VA Zip Code 22302-4104

Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.16609

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	0

Amount of Each Disbursement this Period

100.00

IN-KIND: CONFERENCE ROOM

B.Full Name (Last, First, Middle Initial)
American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-003

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	0

Amount of Each Disbursement this Period

5000.00

C.Full Name (Last, First, Middle Initial)
American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-011

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	0

Amount of Each Disbursement this Period

4.95

SUBTOTAL of Disbursements This Page (optional)

5104.95

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)

PAGE 20 / 25

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Haley's PAC

A. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 53852	Transaction ID: SB21-012 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 1 0</div> </div>
City Phoenix State AZ Zip Code 85072 Purpose of Disbursement Credit Card Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>322.87</div>
B. Full Name (Last, First, Middle Initial) Breazeale, Saunders & O'Neill Mailing Address 120 N Congress Street, Ste 300 City Jackson State MS Zip Code 39205 Purpose of Disbursement Accounting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-006 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 8 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>850.00</div>
C. Full Name (Last, First, Middle Initial) Bryan Cave LLP Mailing Address 1155 F Street, NW City Washington State DC Zip Code 20043 Purpose of Disbursement Legal Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21-009 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>472.50</div>

SUBTOTAL of Disbursements This Page (optional)

1645.37

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)

PAGE 21 / 25

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

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NAME OF COMMITTEE (In Full)
Haley's PAC

A.	<p>Full Name (Last, First, Middle Initial) CMDI</p> <p>Mailing Address 7704 Leesburg Pike</p> <p>City Falls Church State VA Zip Code 22043</p> <p>Purpose of Disbursement Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-010</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 2012.80</p>
B.	<p>Full Name (Last, First, Middle Initial) CTS Holdings, LLC</p> <p>Mailing Address 6855 Pacific Street Ak-310</p> <p>City Omaha State NE Zip Code 68106</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-005</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 10.00</p>
C.	<p>Full Name (Last, First, Middle Initial) Elavon Merchant Services</p> <p>Mailing Address 7300 Chapman Highway</p> <p>City Knoxville State TN Zip Code 37920</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-001</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 150.00</p>

SUBTOTAL of Disbursements This Page (optional)

2172.80

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)

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

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NAME OF COMMITTEE (In Full)
Haley's PAC

A.

Full Name (Last, First, Middle Initial)
Elavon Merchant Services

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920

Purpose of Disbursement
Credit Card Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-002

Date of Disbursement

/ /

Amount of Each Disbursement this Period

304.25

B.

Full Name (Last, First, Middle Initial)
The Larrison Group

Mailing Address PO Box 33045

City Washington State DC Zip Code 20033

Purpose of Disbursement
Consulting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-007

Date of Disbursement

/ /

Amount of Each Disbursement this Period

623.27

SUBTOTAL of Disbursements This Page (optional)

927.52

TOTAL This Period (last page this line number only)

9850.64

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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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Haley's PAC

A.

Full Name (Last, First, Middle Initial)
Friends of Roy Blunt

Mailing Address 1736 E Sunshine Ste 819

City Springfield State MO Zip Code 65804

Purpose of Disbursement
General

Candidate Name
Roy Blunt

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: MO District:

Transaction ID: SB21-004

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Friends Of Twinkle Andress Cavanaugh

Mailing Address PO Box 1112

City Montgomery State AL Zip Code 36111

Purpose of Disbursement
General - AL State Committee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-014

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Robert Beltley for Governor

Mailing Address PO Box 2276

City Tuscaloosa State AL Zip Code 35403

Purpose of Disbursement
General - AL State Committee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-013

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

8000.00

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)

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

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NAME OF COMMITTEE (In Full)

Haley's PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Steve Pittman

Mailing Address 1830 Crane Ridge Drive

City
Jackson

State
MS

Zip Code
39216

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-008

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00

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)

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<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)
Haley's PAC

A.

Full Name (Last, First, Middle Initial)
Haley's PAC - Mississippi

Mailing Address PO Box 1186

City Jackson State MS Zip Code 39215

Purpose of Disbursement
Transfer to State Account

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-015

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Haley's PAC - Mississippi

Mailing Address PO Box 1186

City Jackson State MS Zip Code 39215

Purpose of Disbursement
Transfer to State Account

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-016

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

1500.00