

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Friends of Bennie Thompson

ADDRESS (number and street)

P.O. Box 100

Check if different than previously reported. (ACC)

Bolton

MS

39041

2. FEC IDENTIFICATION NUMBER ▼

C C00279851

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

MS

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on 03 / 13 / 2012 in the State of MS

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on 03 / 13 / 2012 in the State of MS

5. Covering Period

01 / 01 / 2012 through 02 / 22 / 2012

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

Type or Print Name of Treasurer Reuben V. Anderson

Signature of Treasurer Reuben V. Anderson

[Electronically Filed]

Date

05 / 18 / 2012

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of Bennie Thompson

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	48080.25	607612.24
(b) Total Contribution Refunds (from Line 20(d))	0.00	2500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	48080.25	605112.24
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	157768.50	621480.22
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2089.47
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	157768.50	619390.75
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1647631.84	
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	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of Bennie Thompson

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4950.00	119133.02
(ii) Unitemized.....	1150.00	5630.00
(iii) TOTAL of contributions from individuals ▶	6100.00	124763.02
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	41980.25	482849.22
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	48080.25	607612.24
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	2089.47
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	11.02	294.45
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	48091.27	609996.16

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	157768.50	621480.22
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2500.00
21. OTHER DISBURSEMENTS	450.00	154568.80
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	158218.50	778549.02

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1757759.07
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	48091.27
25. SUBTOTAL (add Line 23 and Line 24).....	1805850.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	158218.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1647631.84

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

A. Full Name (Last, First, Middle Initial)
Reuben Anderson

Mailing Address P.O. Box 290

City Jackson State MS Zip Code 39205

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

Name of Employer Phelps Dunbar Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 18 / 2012

Transaction ID : 20118.C13024

Amount of Each Receipt this Period
1200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Gene Barton

Mailing Address P.O. Box 147

City Okolona State MS Zip Code 38860

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

Name of Employer Self Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 22 / 2012

Transaction ID : 20227.C13037

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Wilbur Colom

Mailing Address P.O. Box 101

City Columbus State MS Zip Code 39703

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

Name of Employer Self Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 05 / 2012

Transaction ID : 20109.C13003

Amount of Each Receipt this Period
2500.00

Receipt

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

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

3950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

A. Full Name (Last, First, Middle Initial)
Billy Long

Mailing Address 110 Coachmans Road

City Madison State MS Zip Code 39110

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

Name of Employer GI Associates Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2012

Transaction ID : 20227.C13030

Amount of Each Receipt this Period
 Receipt 500.00

B. Full Name (Last, First, Middle Initial)
Marcus Mason

Mailing Address 412 Buchanan St., NW

City Washington State DC Zip Code 20011

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

Name of Employer Madison Group Occupation Partner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2012

Transaction ID : 20109.C13004

Amount of Each Receipt this Period
 Receipt 500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

4950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 65
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3842.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 18 / 2012

Transaction ID : 20118.C13025

Amount of Each Receipt this Period
480.25

Receipt

B. Full Name (Last, First, Middle Initial)
Aircraft Owners and Pilots Assoc. PAC

Mailing Address 421 Aviation Way

City State Zip Code
Frederick MD 21701

FEC ID number of contributing federal political committee. **C C00131185**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2012

Transaction ID : 20227.C13040

Amount of Each Receipt this Period
1500.00

Receipt

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

Mailing Address Government Employees PAC
80 F. Street, N.W.

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C C00009936**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2012

Transaction ID : 20227.C13038

Amount of Each Receipt this Period
1500.00

Receipt

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

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

3480.25

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 65
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

A. Black Rome PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 New Hampshire Avenue, N.W.
 City Washington State DC Zip Code 20037
 FEC ID number of contributing federal political committee. **C C00150797**
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012
Transaction ID : 20227.C13047
 Amount of Each Receipt this Period
 Receipt **1000.00**

B. BP Corporation America Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 Westlake Park Blvd.
 City Houston State TX Zip Code 77079
 FEC ID number of contributing federal political committee. **C C00060103**
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2012
Transaction ID : 20109.C13006
 Amount of Each Receipt this Period
 Receipt **2000.00**

C. Brotherhood of Railroad Signalmen PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 917 Shenandoah Shores Road
 City Front Royal State VA Zip Code 22630
 FEC ID number of contributing federal political committee. **C C00011262**
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012
Transaction ID : 20227.C13049
 Amount of Each Receipt this Period
 Receipt **500.00**

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 65
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

A. Full Name (Last, First, Middle Initial)
CULAC the PAC of Credit Union National

Mailing Address Association
601 Pennsylvania Ave., NW, South B

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012

Transaction ID : 20227.C13048

Amount of Each Receipt this Period
 Receipt 2000.00

B. Full Name (Last, First, Middle Initial)
Deloitte & Touche Federal PAC

Mailing Address P.O. Box 365

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C C00211318**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012

Transaction ID : 20227.C13051

Amount of Each Receipt this Period
 Receipt 1500.00

C. Full Name (Last, First, Middle Initial)
Delta Airlines PAC

Mailing Address 1212 New York Ave., NW, Suite 200

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00104802**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2012

Transaction ID : 20109.C13002

Amount of Each Receipt this Period
 Receipt 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 65
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

A. Full Name (Last, First, Middle Initial)
Donna Christensen Campaign

Mailing Address P.O. Box 5197

City State Zip Code
Christiansted VI 00823-5197

FEC ID number of contributing federal political committee. **C** C00320754

Name of Employer Occupation
U.S. House of Representatives Congresswoman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 11 / 2012

Transaction ID : 20118.C13015

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Eli Lilly and Company PAC

Mailing Address Lilly Corporate Center

City State Zip Code
Indianapolis IN 46285

FEC ID number of contributing federal political committee. **C** C00082792

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 05 / 2012

Transaction ID : 20109.C13010

Amount of Each Receipt this Period
1500.00

Receipt

C. Full Name (Last, First, Middle Initial)
General Dynamics Voluntary

Mailing Address Political Contribution Plan
2941 Fairview Park Dr., #100

City State Zip Code
Falls Church VA 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2012

Transaction ID : 20227.C13045

Amount of Each Receipt this Period
500.00

Receipt

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 65
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

A. Full Name (Last, First, Middle Initial)
General Dynamics Voluntary

Mailing Address Political Contribution Plan
2941 Fairview Park Dr., #100

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012

Transaction ID : 20227.C13044

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
General Electric Company PAC

Mailing Address 1299 Pennsylvania Ave., NW, Ste. 1

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2012

Transaction ID : 20109.C13007

Amount of Each Receipt this Period
2000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Honeywell International PAC

Mailing Address 101 Constitution Ave., NW., Ste. 5

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012

Transaction ID : 20227.C13039

Amount of Each Receipt this Period
500.00

Receipt

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 65
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

A. Full Name (Last, First, Middle Initial)
IBEW-COPE

Mailing Address 900 Seventh Street, N.W.

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00027342**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 11 / 2012

Transaction ID : 20118.C13014

Amount of Each Receipt this Period
5000.00

Receipt

B. Full Name (Last, First, Middle Initial)
International Organization of Masters,

Mailing Address Mates & Pilots PCF
700 Maritime Blvd.

City Linthicum Heights State MD Zip Code 21090

FEC ID number of contributing federal political committee. **C C00073056**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2012

Transaction ID : 20109.C13005

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 1750 New York Avenue, NW, Ste. 400

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00027359**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2012

Transaction ID : 20109.C13012

Amount of Each Receipt this Period
2500.00

Receipt

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 65
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

A. KPMG Partners/Principals & Employees PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1801 K Street, NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer	Occupation
------------------	------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2012

Transaction ID : 20109.C13009

Amount of Each Receipt this Period
 Receipt
 2500.00

B. Manufactured Housing Institute PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2101 Wilson Boulevard, Suite 610

City Arlington	State VA	Zip Code 22201
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00043463

Name of Employer	Occupation
------------------	------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2012

Transaction ID : 20109.C13011

Amount of Each Receipt this Period
 Receipt
 1000.00

C. Medco Health PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2350 Kerner Blvd., Suite 250

City San Rafael	State CA	Zip Code 94901
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00384362

Name of Employer	Occupation
------------------	------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012

Transaction ID : 20227.C13041

Amount of Each Receipt this Period
 Receipt
 1500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 65
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

A. National Association of Realtors PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 430 N. Michigan Ave.
 City Chicago State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C** C00030718
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 18 / 2012
Transaction ID : 20118.C13026
 Amount of Each Receipt this Period
 Receipt 1000.00

B. OSI Systems, Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1901 S. Bell Street, Suite 325
 City Arlington State VA Zip Code 22209
 FEC ID number of contributing federal political committee. **C** C00414896
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012
Transaction ID : 20227.C13050
 Amount of Each Receipt this Period
 Receipt 1500.00

C. PEOPLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1625 L Street, N.W.
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C00011114
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2012
Transaction ID : 20109.C13008
 Amount of Each Receipt this Period
 Receipt 1500.00

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 65
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

A. Planned Parenthood Action Fund, Inc. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

FEC ID number of contributing federal political committee. **C C00314617**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012

Transaction ID : 20227.C13042

Amount of Each Receipt this Period
 Receipt 1000.00

B. Raytheon PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1100 Wilson Blvd., Ste. 1500

City State Zip Code
Arlington VA 22209-2297

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2012

Transaction ID : 20227.C13032

Amount of Each Receipt this Period
 Receipt 1500.00

C. SAIC Voluntary PAC

Full Name (Last, First, Middle Initial)
Mailing Address 10260 Campus Point Drive, MS: F2

City State Zip Code
San Diego CA 92121

FEC ID number of contributing federal political committee. **C C00300418**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012

Transaction ID : 20227.C13046

Amount of Each Receipt this Period
 Receipt 2000.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 16 OF 65
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

A. Full Name (Last, First, Middle Initial)
Wine & Spirits Wholesalers

Mailing Address of America PAC
805 fifteenth St., NW, Suite 430

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2012

Transaction ID : 20109.C13013

Amount of Each Receipt this Period
 Receipt 2500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2500.00

41980.25

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 65
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

A. Full Name (Last, First, Middle Initial)
Trustmark National Bank

Mailing Address P.O. Box 291

City Jackson State MS Zip Code 39205-0291

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
294.45

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 31 / 2012

Transaction ID : 20227.C13052

Amount of Each Receipt this Period
11.02

Other Receipt

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

11.02

11.02

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Advanced Network Strategies, LLC		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 236 Massachusetts Ave., N.E. #603		Amount of Each Disbursement this Period \$ 5035.00
City Washington State DC Zip Code 20002-	Purpose of Disbursement Fundraising Expense	Transaction ID : 20227.E9177
Candidate Name	Category/Type	FUNDRAISING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period \$ 17280.60
City Dallas State TX Zip Code 75265-0448	Purpose of Disbursement CREDIT CARD: SEE BELOW	Transaction ID : 20118.E9041
Candidate Name	Category/Type	CREDIT CARD: SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Hilton Seattle		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address 1301 6th Avenue		Amount of Each Disbursement this Period \$ 210.37
City Seattle State WA Zip Code 98101-	Purpose of Disbursement Travel Expense	Transaction ID : 20118.E9042
Candidate Name	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	\$ 22315.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 65			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Verizon Center		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address 601 F Street, NW		Amount of Each Disbursement this Period 6000.00
City Washington	State DC Zip Code 20004-	
Purpose of Disbursement Fundraising Expense	Candidate Name	Transaction ID : 20118.E9043
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: FUNDRAISING EXPENSE

Full Name (Last, First, Middle Initial) B. Verizon Center		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address 601 F Street, NW		Amount of Each Disbursement this Period 5500.00
City Washington	State DC Zip Code 20004-	
Purpose of Disbursement Fundraising Expense	Candidate Name	Transaction ID : 20118.E9044
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: FUNDRAISING EXPENSE

Full Name (Last, First, Middle Initial) c. Courtyard Washington Capitol Hill		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address 140 L Street SE		Amount of Each Disbursement this Period 209.54
City Washington	State DC Zip Code 20003-	
Purpose of Disbursement Travel Expense	Candidate Name	Transaction ID : 20118.E9045
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Delta Airlines		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address Hartsfield Atlanta International Airport		Amount of Each Disbursement this Period 371.80
City Atlanta	State GA	
Zip Code 30309-	Purpose of Disbursement Travel Expense	Transaction ID : 20118.E9046
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TRAVEL EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address Hartsfield Atlanta International Airport		Amount of Each Disbursement this Period 495.80
City Atlanta	State GA	
Zip Code 30309-	Purpose of Disbursement Travel Expense	Transaction ID : 20118.E9047
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TRAVEL EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) c. Capital Grille		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address 601 Pennsylvania Ave., NW		Amount of Each Disbursement this Period 240.23
City Washington	State DC	
Zip Code 20004-	Purpose of Disbursement Fundraising Expense	Transaction ID : 20118.E9048
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: FUNDRAISING EXPENSE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Levy Restaurant MCI Center			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address 601 F Street			Amount of Each Disbursement this Period 569.05
City Washington	State DC	Zip Code 20004-	
Purpose of Disbursement Fundraising Expense		Category/ Type	Transaction ID : 20118.E9049
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] MEMO: FUNDRAISING EXPENSE
State: District:			

Full Name (Last, First, Middle Initial) B. Levy Restaurant MCI Center			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address 601 F Street			Amount of Each Disbursement this Period 388.10
City Washington	State DC	Zip Code 20004-	
Purpose of Disbursement Fundraising Expense		Category/ Type	Transaction ID : 20118.E9050
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] MEMO: FUNDRAISING EXPENSE
State: District:			

Full Name (Last, First, Middle Initial) c. Levy Restaurant MCI Center			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address 601 F Street			Amount of Each Disbursement this Period 809.17
City Washington	State DC	Zip Code 20004-	
Purpose of Disbursement Fundraising Expense		Category/ Type	Transaction ID : 20118.E9051
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] MEMO: FUNDRAISING EXPENSE
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address Hartsfield Atlanta International Airport		Amount of Each Disbursement this Period 926.80
City Atlanta	State GA Zip Code 30309-	
Purpose of Disbursement Travel Expense	Candidate Name	Transaction ID : 20118.E9052
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 3476.38
City Dallas	State TX Zip Code 75265-0448	
Purpose of Disbursement CREDIT CARD: SEE BELOW	Candidate Name	Transaction ID : 20227.E9117
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial) c. National Car Rental		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address Jackson International Airport		Amount of Each Disbursement this Period 421.80
City Jackson	State MS Zip Code 39209-	
Purpose of Disbursement Travel Expense	Candidate Name	Transaction ID : 20227.E9118
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE

SUBTOTAL of Disbursements This Page (optional).....	3476.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Southwest Airlines		Date of Disbursement MM / DD / YYYY 02 / 03 / 2012
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 346.70
City Dallas	State TX	Zip Code 75235-1647
Purpose of Disbursement Travel Expense	Category/Type	
Candidate Name	Transaction ID : 20227.E9119	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] MEMO: TRAVEL EXPENSE	

Full Name (Last, First, Middle Initial) B. National Car Rental		Date of Disbursement MM / DD / YYYY 02 / 03 / 2012
Mailing Address Jackson International Airport		Amount of Each Disbursement this Period 565.36
City Jackson	State MS	Zip Code 39209-
Purpose of Disbursement Travel Expense	Category/Type	
Candidate Name	Transaction ID : 20227.E9120	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] MEMO: TRAVEL EXPENSE	

Full Name (Last, First, Middle Initial) c. Capital Grille		Date of Disbursement MM / DD / YYYY 02 / 03 / 2012
Mailing Address 601 Pennsylvania Ave., NW		Amount of Each Disbursement this Period 246.53
City Washington	State DC	Zip Code 20004-
Purpose of Disbursement Fundraising Expense	Category/Type	
Candidate Name	Transaction ID : 20227.E9121	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] MEMO: FUNDRAISING EXPENSE	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 65			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Kroger		Date of Disbursement MM / DD / YYYY 02 / 03 / 2012
Mailing Address 1107 Hwy. 80		Amount of Each Disbursement this Period 556.16
City Clinton	State MS	Zip Code 39056-
Purpose of Disbursement Catering Cost	Transaction ID : 20227.E9122	
Candidate Name	[MEMO ITEM] MEMO: CATERING COST	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Delta Wings		Date of Disbursement MM / DD / YYYY 02 / 03 / 2012
Mailing Address 1001 Hampstead Blvd.		Amount of Each Disbursement this Period 217.89
City Clinton	State MS	Zip Code 39056-
Purpose of Disbursement Catering Cost	Transaction ID : 20227.E9123	
Candidate Name	[MEMO ITEM] MEMO: CATERING COST	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address P.O. Box 105262		Amount of Each Disbursement this Period 291.86
City Atlanta	State GA	Zip Code 30348-5262
Purpose of Disbursement Phone Services	Transaction ID : 20118.E9054	
Candidate Name	PHONE SERVICES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	291.86
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 65			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012
Mailing Address P.O. Box 105262		Amount of Each Disbursement this Period 636.37
City Atlanta	State GA	
Zip Code 30348-5262	Purpose of Disbursement Phone Services-Jackson Office	Transaction ID : 20126.E9078
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PHONE SERVICES-JACKSON OFFICE
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address P.O. Box 105262		Amount of Each Disbursement this Period 652.13
City Atlanta	State GA	
Zip Code 30348-5262	Purpose of Disbursement Phone Services-Bolton Office	Transaction ID : 20227.E9175
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PHONE SERVICES-BOLTON OFFICE
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address P.O. Box 105262		Amount of Each Disbursement this Period 219.06
City Atlanta	State GA	
Zip Code 30348-5262	Purpose of Disbursement Phone Services-Greenville Office	Transaction ID : 20227.E9174
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PHONE SERVICES-GREENVILLE OFFICE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1507.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 65			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 211.88
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Phone Services	Category/ Type PHONE SERVICES
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 207.76
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Phone Services	Category/ Type PHONE SERVICES
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) c. Atmos Energy		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address P.O. Box 790311		Amount of Each Disbursement this Period 29.60
City Saint Louis	State MO	
Zip Code 63179-0311	Purpose of Disbursement Utilities	Category/ Type UTILITIES
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	449.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Atmos Energy		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address P.O. Box 790311		Amount of Each Disbursement this Period 31.42
City Saint Louis	State MO	
Zip Code 63179-0311	Purpose of Disbursement Utilities	Transaction ID : 20227.E9098
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	UTILITIES
State: District:		

Full Name (Last, First, Middle Initial) B. Atmos Energy		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address P.O. Box 790311		Amount of Each Disbursement this Period 132.00
City Saint Louis	State MO	
Zip Code 63179-0311	Purpose of Disbursement Utilities-Clarksdale Office	Transaction ID : 20227.E9181
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	UTILITIES-CLARKSDALE OFFICE
State: District:		

Full Name (Last, First, Middle Initial) c. Beta Alpha Chapter of Omega Psi Phi		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2012
Mailing Address Fraternity, Inc. 1557 Reddix Street		Amount of Each Disbursement this Period 300.00
City Jackson	State MS	
Zip Code 39209-	Purpose of Disbursement Ad	Transaction ID : 20227.E9182
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	AD
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	463.42
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 65			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Stephanie Booker			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012		
Mailing Address 12 Pecan Street			Amount of Each Disbursement this Period 21.16		
City Rolling Fork	State MS	Zip Code 39159-	Transaction ID : 20118.E9029		
Purpose of Disbursement Travel Expense		Category/ Type	TRAVEL EXPENSE		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Ms. Stephanie Booker			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012		
Mailing Address 12 Pecan Street			Amount of Each Disbursement this Period 42.67		
City Rolling Fork	State MS	Zip Code 39159-	Transaction ID : 20126.E9083		
Purpose of Disbursement Travel Expense		Category/ Type	TRAVEL EXPENSE		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Mr. Ennie G. Brown			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012		
Mailing Address 830 Rose Hill Road			Amount of Each Disbursement this Period 240.00		
City Mendenhall	State MS	Zip Code 39114-	Transaction ID : 20109.E9010		
Purpose of Disbursement Salary		Category/ Type	SALARY		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	303.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Mr. Ennie G. Brown			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012		
Mailing Address 830 Rose Hill Road			Amount of Each Disbursement this Period 300.00		
City Mendenhall	State MS	Zip Code 39114-	Transaction ID : 20118.E9034		
Purpose of Disbursement Salary		Category/ Type	SALARY		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Mr. Ennie G. Brown			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012		
Mailing Address 830 Rose Hill Road			Amount of Each Disbursement this Period 300.00		
City Mendenhall	State MS	Zip Code 39114-	Transaction ID : 20126.E9075		
Purpose of Disbursement Salary		Category/ Type	SALARY		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Mr. Ennie G. Brown			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012		
Mailing Address 830 Rose Hill Road			Amount of Each Disbursement this Period 396.00		
City Mendenhall	State MS	Zip Code 39114-	Transaction ID : 20227.E9085		
Purpose of Disbursement SALARY AND TRAVEL: SEE BELOW		Category/ Type	SALARY AND TRAVEL: SEE BELOW		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	996.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Mr. Ennie G. Brown		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 830 Rose Hill Road		Amount of Each Disbursement this Period 300.00
City Mendenhall State MS Zip Code 39114-	Purpose of Disbursement Salary	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : 20227.E9086 [MEMO ITEM] MEMO: SALARY
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. Ennie G. Brown		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 830 Rose Hill Road		Amount of Each Disbursement this Period 96.00
City Mendenhall State MS Zip Code 39114-	Purpose of Disbursement Travel Expense	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : 20227.E9087 [MEMO ITEM] MEMO: TRAVEL EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) C. Mr. Ennie G. Brown		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address 830 Rose Hill Road		Amount of Each Disbursement this Period 396.00
City Mendenhall State MS Zip Code 39114-	Purpose of Disbursement SALARY AND TRAVEL: SEE BELOW	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : 20227.E9101 SALARY AND TRAVEL: SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	396.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Mr. Ennie G. Brown		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address 830 Rose Hill Road		Amount of Each Disbursement this Period 300.00
City Mendenhall	State MS	
Zip Code 39114-		Transaction ID : 20227.E9102
Purpose of Disbursement Salary	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. Ennie G. Brown		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address 830 Rose Hill Road		Amount of Each Disbursement this Period 96.00
City Mendenhall	State MS	
Zip Code 39114-		Transaction ID : 20227.E9103
Purpose of Disbursement Travel Expense	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: TRAVEL EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Mr. Ennie G. Brown		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2012
Mailing Address 830 Rose Hill Road		Amount of Each Disbursement this Period 396.00
City Mendenhall	State MS	
Zip Code 39114-		Transaction ID : 20227.E9128
Purpose of Disbursement SALARY AND TRAVEL: SEE BELOW	Category/Type	
Candidate Name		SALARY AND TRAVEL: SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	396.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Mr. Ennie G. Brown		Date of Disbursement MM / DD / YYYY 02 / 09 / 2012
Mailing Address 830 Rose Hill Road		Amount of Each Disbursement this Period 300.00
City Mendenhall	State MS	
Zip Code 39114-		Transaction ID : 20227.E9129
Purpose of Disbursement Salary	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: SALARY
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. Ennie G. Brown		Date of Disbursement MM / DD / YYYY 02 / 09 / 2012
Mailing Address 830 Rose Hill Road		Amount of Each Disbursement this Period 96.00
City Mendenhall	State MS	
Zip Code 39114-		Transaction ID : 20227.E9130
Purpose of Disbursement Travel Expense	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: TRAVEL EXPENSE
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Mr. Ennie G. Brown		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 830 Rose Hill Road		Amount of Each Disbursement this Period 396.00
City Mendenhall	State MS	
Zip Code 39114-		Transaction ID : 20227.E9167
Purpose of Disbursement SALARY AND TRAVEL: SEE BELOW	Category/Type	
Candidate Name		SALARY AND TRAVEL: SEE BELOW
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	396.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Mr. Ennie G. Brown		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address 830 Rose Hill Road		Amount of Each Disbursement this Period 300.00
City Mendenhall State MS Zip Code 39114-	Purpose of Disbursement Salary	Transaction ID : 20227.E9168
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: SALARY
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. Ennie G. Brown		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address 830 Rose Hill Road		Amount of Each Disbursement this Period 96.00
City Mendenhall State MS Zip Code 39114-	Purpose of Disbursement Travel Expense	Transaction ID : 20227.E9169
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TRAVEL EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) c. Classic Printing Company		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address P.O. Box 68696		Amount of Each Disbursement this Period 1931.48
City Jackson State MS Zip Code 39286-8696	Purpose of Disbursement Printing	Transaction ID : 20227.E9094
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PRINTING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1931.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Classic Printing Company			Date of Disbursement MM / DD / YYYY 02 / 06 / 2012
Mailing Address P.O. Box 68696			Amount of Each Disbursement this Period 19099.50
City Jackson	State MS	Zip Code 39286-8696	
Purpose of Disbursement Printing		Category/ Type	Transaction ID : 20227.E9125
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		PRINTING
State: District:			

Full Name (Last, First, Middle Initial) B. Comcast			Date of Disbursement MM / DD / YYYY 01 / 27 / 2012
Mailing Address P.O. Box 105184			Amount of Each Disbursement this Period 276.45
City Atlanta	State GA	Zip Code 30348-5184	
Purpose of Disbursement Utilities		Category/ Type	Transaction ID : 20227.E9096
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		UTILITIES
State: District:			

Full Name (Last, First, Middle Initial) c. Comcast			Date of Disbursement MM / DD / YYYY 02 / 03 / 2012
Mailing Address P.O. Box 105184			Amount of Each Disbursement this Period 51.28
City Atlanta	State GA	Zip Code 30348-5184	
Purpose of Disbursement Utilities		Category/ Type	Transaction ID : 20227.E9111
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		UTILITIES
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	19427.23
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Country Select		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address P.O. Box 271		Amount of Each Disbursement this Period 330.00
City Isola	State MS Zip Code 38754-	
Purpose of Disbursement Fundraising Expense	Candidate Name	Transaction ID : 20109.E9022
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	FUNDRAISING EXPENSE

Full Name (Last, First, Middle Initial) B. Ms. Tonia Cowan		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012
Mailing Address 211 Cedar Street		Amount of Each Disbursement this Period 150.00
City Flora	State MS Zip Code 39071-	
Purpose of Disbursement Travel Expense	Candidate Name	Transaction ID : 20126.E9081
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	TRAVEL EXPENSE

Full Name (Last, First, Middle Initial) c. Mr. Larry Cozart		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address P.O. Box 271		Amount of Each Disbursement this Period 300.00
City Lambert	State MS Zip Code 38643-	
Purpose of Disbursement Travel Express	Candidate Name	Transaction ID : 20227.E9093
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	TRAVEL EXPRESS

SUBTOTAL of Disbursements This Page (optional).....	780.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Mr. Larry Cozart		Date of Disbursement MM / DD / YYYY 02 / 03 / 2012
Mailing Address P.O. Box 271		Amount of Each Disbursement this Period 300.00 Transaction ID : 20227.E9109
City Lambert	State MS Zip Code 38643-	
Purpose of Disbursement Travel Expense	Category/Type	TRAVEL EXPENSE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. Larry Cozart		Date of Disbursement MM / DD / YYYY 02 / 09 / 2012
Mailing Address P.O. Box 271		Amount of Each Disbursement this Period 300.00 Transaction ID : 20227.E9136
City Lambert	State MS Zip Code 38643-	
Purpose of Disbursement Travel Express	Category/Type	TRAVEL EXPRESS
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Mr. Larry Cozart		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address P.O. Box 271		Amount of Each Disbursement this Period 300.00 Transaction ID : 20227.E9171
City Lambert	State MS Zip Code 38643-	
Purpose of Disbursement Travel Expense	Category/Type	TRAVEL EXPENSE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Temeka Davis		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address 4444 St. Thomas Rd.		Amount of Each Disbursement this Period 60.00
City Bolton	State MS	Zip Code 39041-
Purpose of Disbursement Salary	Category/Type	
Candidate Name	Transaction ID : 20109.E9012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	SALARY	

Full Name (Last, First, Middle Initial) B. Ms. Temeka Davis		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address 4444 St. Thomas Rd.		Amount of Each Disbursement this Period 300.00
City Bolton	State MS	Zip Code 39041-
Purpose of Disbursement Salary	Category/Type	
Candidate Name	Transaction ID : 20118.E9035	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	SALARY	

Full Name (Last, First, Middle Initial) C. Ms. Temeka Davis		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012
Mailing Address 4444 St. Thomas Rd.		Amount of Each Disbursement this Period 300.00
City Bolton	State MS	Zip Code 39041-
Purpose of Disbursement Salary	Category/Type	
Candidate Name	Transaction ID : 20126.E9076	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	SALARY	

SUBTOTAL of Disbursements This Page (optional).....	660.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 65			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Temeka Davis		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 4444 St. Thomas Rd.		Amount of Each Disbursement this Period 300.00 Transaction ID : 20227.E9091
City Bolton	State MS Zip Code 39041-	
Purpose of Disbursement Salary	Category/Type	SALARY
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ms. Temeka Davis		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address 4444 St. Thomas Rd.		Amount of Each Disbursement this Period 300.00 Transaction ID : 20227.E9107
City Bolton	State MS Zip Code 39041-	
Purpose of Disbursement Salary	Category/Type	SALARY
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Ms. Temeka Davis		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2012
Mailing Address 4444 St. Thomas Rd.		Amount of Each Disbursement this Period 300.00 Transaction ID : 20227.E9134
City Bolton	State MS Zip Code 39041-	
Purpose of Disbursement Salary	Category/Type	SALARY
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Temeka Davis		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 4444 St. Thomas Rd.		Amount of Each Disbursement this Period 300.00
City Bolton	State MS	
Zip Code 39041-		Transaction ID : 20227.E9166
Purpose of Disbursement Salary	Category/Type	
Candidate Name		SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Deluxe For Business		Date of Disbursement MM / DD / YYYY 01 / 06 / 2012
Mailing Address P.O. Box 742572		Amount of Each Disbursement this Period 502.02
City Cincinnati	State OH	
Zip Code 45274-2572		Transaction ID : 20109.E9016
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Democratic Properties Corporation		Date of Disbursement MM / DD / YYYY 02 / 17 / 2012
Mailing Address 430 South Capitol Street, SE		Amount of Each Disbursement this Period 300.00
City Washington	State DC	
Zip Code 20003-		Transaction ID : 20227.E9185
Purpose of Disbursement Fundraising Expense; Room Rental	Category/Type	
Candidate Name		FUNDRAISING EXPENSE; ROOM RENTAL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1102.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 65			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Sherrina Dixon			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012		
Mailing Address 111 B Woodstone Place			Amount of Each Disbursement this Period 12.24		
City Clinton	State MS	Zip Code 39056-	Transaction ID : 20118.E9057		
Purpose of Disbursement Travel Expense		Category/ Type			
Candidate Name		TRAVEL EXPENSE			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Entergy			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012		
Mailing Address P.O. Box 8105			Amount of Each Disbursement this Period 71.16		
City Baton Rouge	State LA	Zip Code 70891-	Transaction ID : 20118.E9038		
Purpose of Disbursement Utilities		Category/ Type			
Candidate Name		UTILITIES			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Entergy			Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2012		
Mailing Address P.O. Box 8105			Amount of Each Disbursement this Period 179.84		
City Baton Rouge	State LA	Zip Code 70891-	Transaction ID : 20227.E9139		
Purpose of Disbursement Utilities-Jackson Office		Category/ Type			
Candidate Name		UTILITIES-JACKSON OFFICE			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	263.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Entergy		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2012
Mailing Address P.O. Box 8105		Amount of Each Disbursement this Period 77.53
City Baton Rouge	State LA	Zip Code 70891-
Purpose of Disbursement Utilities	Transaction ID : 20227.E9144	
Candidate Name	Category/ Type UTILITIES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address P.O. Box 660481		Amount of Each Disbursement this Period 122.15
City Dallas	State TX	Zip Code 75266-0481
Purpose of Disbursement Overnight Delivery	Transaction ID : 20118.E9055	
Candidate Name	Category/ Type OVERNIGHT DELIVERY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2012
Mailing Address P.O. Box 660481		Amount of Each Disbursement this Period 61.64
City Dallas	State TX	Zip Code 75266-0481
Purpose of Disbursement Overnight Delivery	Transaction ID : 20227.E9138	
Candidate Name	Category/ Type OVERNIGHT DELIVERY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	261.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 65			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Flowers & Frames By Will, Inc.			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address P.O. Box 3036			Amount of Each Disbursement this Period 235.40
City Jackson	State MS	Zip Code 39207-	
Purpose of Disbursement Floral Arrangements	Candidate Name		Transaction ID : 20109.E9021
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		FLORAL ARRANGEMENTS

Full Name (Last, First, Middle Initial) B. Flowers & Frames By Will, Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address P.O. Box 3036			Amount of Each Disbursement this Period 64.20
City Jackson	State MS	Zip Code 39207-	
Purpose of Disbursement Floral Arrangement	Candidate Name		Transaction ID : 20227.E9112
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		FLORAL ARRANGEMENT

Full Name (Last, First, Middle Initial) C. Ms. Brenda Funches			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2012
Mailing Address 2750 HemingWay Circle			Amount of Each Disbursement this Period 350.00
City Jackson	State MS	Zip Code 39209-	
Purpose of Disbursement Candy for Parade	Candidate Name		Transaction ID : 20118.E9027
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		CANDY FOR PARADE

SUBTOTAL of Disbursements This Page (optional).....	649.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Brenda Funches		Date of Disbursement MM / DD / YYYY 01 / 18 / 2012
Mailing Address 2750 HemingWay Circle		Amount of Each Disbursement this Period \$ 76.50 Transaction ID : 20126.E9068
City Jackson	State MS Zip Code 39209-	
Purpose of Disbursement Travel Expense	Category/Type	TRAVEL EXPENSE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. Stephen Gavin		Date of Disbursement MM / DD / YYYY 01 / 06 / 2012
Mailing Address P.O. Box 351		Amount of Each Disbursement this Period \$ 23.46 Transaction ID : 20109.E9009
City Tougaloo	State MS Zip Code 39174-	
Purpose of Disbursement Travel Expense	Category/Type	TRAVEL EXPENSE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Mr. Stephen Gavin		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address P.O. Box 351		Amount of Each Disbursement this Period \$ 12.24 Transaction ID : 20118.E9028
City Tougaloo	State MS Zip Code 39174-	
Purpose of Disbursement Travel Expense	Category/Type	TRAVEL EXPENSE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	\$ 112.24
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Jackson Business Systems, Inc.			Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2012	
Mailing Address 445 West Amite Street			Amount of Each Disbursement this Period 499.00	
City Jackson	State MS	Zip Code 39203-	Transaction ID : 20126.E9071	
Purpose of Disbursement Equipment Rental		Category/ Type	EQUIPMENT RENTAL	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Jackson Business Systems, Inc.			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012	
Mailing Address 445 West Amite Street			Amount of Each Disbursement this Period 998.00	
City Jackson	State MS	Zip Code 39203-	Transaction ID : 20126.E9079	
Purpose of Disbursement Equipmen Rental		Category/ Type	EQUIPMEN RENTAL	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. KTJZ 97.5 FM			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2012	
Mailing Address 515 Pittman Ave.			Amount of Each Disbursement this Period 1768.00	
City Vicksburg	State MS	Zip Code 39182-	Transaction ID : 20227.E9186	
Purpose of Disbursement Radio Spot		Category/ Type	RADIO SPOT	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3265.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 65			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. LDs Kitchen		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 1111 Mulberry Street		Amount of Each Disbursement this Period 300.00
City Vicksburg	State MS	Zip Code 39183-
Purpose of Disbursement Food for Volunteers	Category/Type	
Candidate Name	Transaction ID : 20227.E9095	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FOOD FOR VOLUNTEERS
State: District:		

Full Name (Last, First, Middle Initial) B. Ms. Sandra McCall		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address 1368 Holloman Ave.		Amount of Each Disbursement this Period 240.00
City Jackson	State MS	Zip Code 39213-
Purpose of Disbursement Salary	Category/Type	
Candidate Name	Transaction ID : 20109.E9011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SALARY
State: District:		

Full Name (Last, First, Middle Initial) c. Ms. Sandra McCall		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address 1368 Holloman Ave.		Amount of Each Disbursement this Period 350.00
City Jackson	State MS	Zip Code 39213-
Purpose of Disbursement Food for Volunteers	Category/Type	
Candidate Name	Transaction ID : 20109.E9025	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FOOD FOR VOLUNTEERS
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	890.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 65			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Sandra McCall			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012	
Mailing Address 1368 Holloman Ave.			Amount of Each Disbursement this Period 200.00	
City Jackson	State MS	Zip Code 39213-	Transaction ID : 20118.E9033	
Purpose of Disbursement Food for Volunteers		Category/ Type	FOOD FOR VOLUNTEERS	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Ms. Sandra McCall			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012	
Mailing Address 1368 Holloman Ave.			Amount of Each Disbursement this Period 300.00	
City Jackson	State MS	Zip Code 39213-	Transaction ID : 20118.E9032	
Purpose of Disbursement Salary		Category/ Type	SALARY	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Ms. Sandra McCall			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012	
Mailing Address 1368 Holloman Ave.			Amount of Each Disbursement this Period 300.00	
City Jackson	State MS	Zip Code 39213-	Transaction ID : 20126.E9074	
Purpose of Disbursement Salary		Category/ Type	SALARY	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 65			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Sandra McCall			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012
Mailing Address 1368 Holloman Ave.			Amount of Each Disbursement this Period 351.99 Transaction ID : 20126.E9084
City Jackson	State MS	Zip Code 39213-	
Purpose of Disbursement Food for Volunteers		Candidate Name	Category/ Type FOOD FOR VOLUNTEERS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Ms. Sandra McCall			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 1368 Holloman Ave.			Amount of Each Disbursement this Period 300.00 Transaction ID : 20227.E9089
City Jackson	State MS	Zip Code 39213-	
Purpose of Disbursement Salary		Candidate Name	Category/ Type SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Ms. Sandra McCall			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 1368 Holloman Ave.			Amount of Each Disbursement this Period 243.00 Transaction ID : 20227.E9090
City Jackson	State MS	Zip Code 39213-	
Purpose of Disbursement Food for Volunteers		Candidate Name	Category/ Type FOOD FOR VOLUNTEERS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	894.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Sandra McCall			Date of Disbursement MM / DD / YYYY 02 / 03 / 2012
Mailing Address 1368 Holloman Ave.			Amount of Each Disbursement this Period 200.00
City Jackson	State MS	Zip Code 39213-	
Purpose of Disbursement Food for Volunteers		Category/ Type	Transaction ID : 20227.E9106
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		FOOD FOR VOLUNTEERS
State: District:			

Full Name (Last, First, Middle Initial) B. Ms. Sandra McCall			Date of Disbursement MM / DD / YYYY 02 / 03 / 2012
Mailing Address 1368 Holloman Ave.			Amount of Each Disbursement this Period 300.00
City Jackson	State MS	Zip Code 39213-	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : 20227.E9105
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		SALARY
State: District:			

Full Name (Last, First, Middle Initial) c. Ms. Sandra McCall			Date of Disbursement MM / DD / YYYY 02 / 09 / 2012
Mailing Address 1368 Holloman Ave.			Amount of Each Disbursement this Period 200.00
City Jackson	State MS	Zip Code 39213-	
Purpose of Disbursement Food for Volunteers		Category/ Type	Transaction ID : 20227.E9133
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		FOOD FOR VOLUNTEERS
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 65			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Sandra McCall		Date of Disbursement MM / DD / YYYY 02 / 09 / 2012
Mailing Address 1368 Holloman Ave.		Amount of Each Disbursement this Period \$ 55.00 Transaction ID : 20227.E9145
City Jackson State MS Zip Code 39213-	Purpose of Disbursement Food for Volunteers	
Candidate Name	Category/Type	FOOD FOR VOLUNTEERS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Ms. Sandra McCall		Date of Disbursement MM / DD / YYYY 02 / 09 / 2012
Mailing Address 1368 Holloman Ave.		Amount of Each Disbursement this Period \$ 300.00 Transaction ID : 20227.E9132
City Jackson State MS Zip Code 39213-	Purpose of Disbursement Salary	
Candidate Name	Category/Type	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Ms. Sandra McCall		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 1368 Holloman Ave.		Amount of Each Disbursement this Period \$ 300.00 Transaction ID : 20227.E9164
City Jackson State MS Zip Code 39213-	Purpose of Disbursement Salary	
Candidate Name	Category/Type	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	\$ 655.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 65			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Sandra McCall		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 1368 Holloman Ave.		Amount of Each Disbursement this Period 200.00
City Jackson	State MS	Zip Code 39213-
Purpose of Disbursement Food for Volunteers	Category/Type	
Candidate Name	Transaction ID : 20227.E9165	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FOOD FOR VOLUNTEERS
State: District:		

Full Name (Last, First, Middle Initial) B. National Democratic Club		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 190.75
City Washington	State DC	Zip Code 20003-4701
Purpose of Disbursement Club Charges	Category/Type	
Candidate Name	Transaction ID : 20118.E9037	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CLUB CHARGES
State: District:		

Full Name (Last, First, Middle Initial) c. National Democratic Club		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 84.00
City Washington	State DC	Zip Code 20003-4701
Purpose of Disbursement Club Charges	Category/Type	
Candidate Name	Transaction ID : 20227.E9176	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CLUB CHARGES
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	474.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Office Depot Credit Plan		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address P.O. Box 9020		Amount of Each Disbursement this Period 487.05
City Des Moines	State IA	
Zip Code 50368-9020	Purpose of Disbursement Office Supplies	Transaction ID : 20118.E9056
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	OFFICE SUPPLIES
State: District:		

Full Name (Last, First, Middle Initial) B. Patriot Signage, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address 1001 Second Ave.		Amount of Each Disbursement this Period 9307.00
City Dayton	State KY	
Zip Code 41074-	Purpose of Disbursement Signs	Transaction ID : 20109.E9015
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SIGNS
State: District:		

Full Name (Last, First, Middle Initial) c. Mr. C.W. Peeples		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 2423 Highway 82		Amount of Each Disbursement this Period 300.00
City Kilmichael	State MS	
Zip Code 39747-	Purpose of Disbursement Travel Expense	Transaction ID : 20227.E9092
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TRAVEL EXPENSE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10094.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Mr. C.W. Peeples			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012	
Mailing Address 2423 Highway 82			Amount of Each Disbursement this Period 300.00	
City Kilmichael	State MS	Zip Code 39747-	Transaction ID : 20227.E9108	
Purpose of Disbursement Travel Expense		Category/ Type	TRAVEL EXPENSE	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Mr. C.W. Peeples			Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2012	
Mailing Address 2423 Highway 82			Amount of Each Disbursement this Period 300.00	
City Kilmichael	State MS	Zip Code 39747-	Transaction ID : 20227.E9135	
Purpose of Disbursement Travel Expense		Category/ Type	TRAVEL EXPENSE	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Mr. C.W. Peeples			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012	
Mailing Address 2423 Highway 82			Amount of Each Disbursement this Period 300.00	
City Kilmichael	State MS	Zip Code 39747-	Transaction ID : 20227.E9170	
Purpose of Disbursement Travel Expense		Category/ Type	TRAVEL EXPENSE	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. RedLaser Technology, Inc.			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012	
Mailing Address 1230 Raymond Road, Box 600			Amount of Each Disbursement this Period 1900.00	
City Jackson	State MS	Zip Code 39204-	Transaction ID : 20118.E9039	
Purpose of Disbursement Website Development		Category/ Type		
Candidate Name			WEBSITE DEVELOPMENT	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. Sams Club			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012	
Mailing Address P.O. Box 659783			Amount of Each Disbursement this Period 105.00	
City San Antonio	State TX	Zip Code 78265-9783	Transaction ID : 20109.E9018	
Purpose of Disbursement Membership Renewal		Category/ Type		
Candidate Name			MEMBERSHIP RENEWAL	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) c. Signs by Haynes			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012	
Mailing Address 114 Belvedere Court			Amount of Each Disbursement this Period 2295.15	
City Cleveland	State MS	Zip Code 38732-	Transaction ID : 20227.E9099	
Purpose of Disbursement Signs		Category/ Type		
Candidate Name			SIGNS	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional)	4300.15
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. State-Wide General Insurance Agency			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2012
Mailing Address 3073 J. R. Lynch Street			Amount of Each Disbursement this Period 578.09
City Jackson	State MS	Zip Code 39209-	
Purpose of Disbursement Insurance		Category/ Type	Transaction ID : 20227.E9184
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		INSURANCE
State: District:			

Full Name (Last, First, Middle Initial) B. The Feldman Group, Inc.			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2012
Mailing Address 508-510 8th St., S.E.			Amount of Each Disbursement this Period 16839.37
City Washington	State DC	Zip Code 20003-	
Purpose of Disbursement Survey		Category/ Type	Transaction ID : 20118.E9026
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		SURVEY
State: District:			

Full Name (Last, First, Middle Initial) c. Town of Bolton Dev. Corp.			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address P.O. Box 300			Amount of Each Disbursement this Period 5000.00
City Bolton	State MS	Zip Code 39041-	
Purpose of Disbursement Headquartes - Rent		Category/ Type	Transaction ID : 20109.E9014
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		HEADQUARTES - RENT
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	22417.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Triple C T-Shirt/Williams Design			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012		
Mailing Address 306a E. Carpenter Street			Amount of Each Disbursement this Period 2752.75		
City Cleveland	State MS	Zip Code 38732-	Transaction ID : 20118.E9036		
Purpose of Disbursement T-Shirts Printing		Category/ Type			
Candidate Name		T-SHIRTS PRINTING			
Office Sought:	Disbursement For:				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) B. Triple C T-Shirt/Williams Design			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012		
Mailing Address 306a E. Carpenter Street			Amount of Each Disbursement this Period 2752.75		
City Cleveland	State MS	Zip Code 38732-	Transaction ID : 20227.E9172		
Purpose of Disbursement T-Shirt Printing		Category/ Type			
Candidate Name		T-SHIRT PRINTING			
Office Sought:	Disbursement For:				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) c. TruBlu Politics			Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2012		
Mailing Address 5570 Sterrett Place, Suite 300			Amount of Each Disbursement this Period 1200.00		
City Columbia	State MD	Zip Code 21044-	Transaction ID : 20227.E9146		
Purpose of Disbursement Printing		Category/ Type			
Candidate Name		PRINTING			
Office Sought:	Disbursement For:				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	6705.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Trustmark National Bank			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address P.O. Box 291			Amount of Each Disbursement this Period 2.50
City Jackson	State MS	Zip Code 39205-0291	
Purpose of Disbursement Service Charge		Candidate Name	Transaction ID : 20227.E9204
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	SERVICE CHARGE

Full Name (Last, First, Middle Initial) B. Trustmark National Bank			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address P.O. Box 291			Amount of Each Disbursement this Period 33.20
City Jackson	State MS	Zip Code 39205-0291	
Purpose of Disbursement Service Charge		Candidate Name	Transaction ID : 20227.E9206
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	SERVICE CHARGE

Full Name (Last, First, Middle Initial) c. Trustmark National Bank			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address P.O. Box 291			Amount of Each Disbursement this Period 34.00
City Jackson	State MS	Zip Code 39205-0291	
Purpose of Disbursement Service Charge		Candidate Name	Transaction ID : 20227.E9205
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	SERVICE CHARGE

SUBTOTAL of Disbursements This Page (optional).....	69.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 65			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Toni Turner		Date of Disbursement MM / DD / YYYY 01 / 06 / 2012
Mailing Address 6811 Old Canton Road #4103		Amount of Each Disbursement this Period 300.00
City Ridgeland	State MS	
Zip Code 39157-		Transaction ID : 20109.E9024
Purpose of Disbursement Salary	Category/ Type	
Candidate Name		SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ms. Toni Turner		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address 6811 Old Canton Road #4103		Amount of Each Disbursement this Period 375.00
City Ridgeland	State MS	
Zip Code 39157-		Transaction ID : 20118.E9031
Purpose of Disbursement Salary	Category/ Type	
Candidate Name		SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ms. Toni Turner		Date of Disbursement MM / DD / YYYY 01 / 20 / 2012
Mailing Address 6811 Old Canton Road #4103		Amount of Each Disbursement this Period 375.00
City Ridgeland	State MS	
Zip Code 39157-		Transaction ID : 20126.E9073
Purpose of Disbursement Salary	Category/ Type	
Candidate Name		SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 65			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Toni Turner		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 6811 Old Canton Road #4103		Amount of Each Disbursement this Period 375.00 Transaction ID : 20227.E9088
City Ridgeland	State MS	
Zip Code 39157-	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	SALARY

Full Name (Last, First, Middle Initial) B. Ms. Toni Turner		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address 6811 Old Canton Road #4103		Amount of Each Disbursement this Period 375.00 Transaction ID : 20227.E9104
City Ridgeland	State MS	
Zip Code 39157-	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	SALARY

Full Name (Last, First, Middle Initial) c. Ms. Toni Turner		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2012
Mailing Address 6811 Old Canton Road #4103		Amount of Each Disbursement this Period 375.00 Transaction ID : 20227.E9131
City Ridgeland	State MS	
Zip Code 39157-	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	SALARY

SUBTOTAL of Disbursements This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 65			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. Ms. Toni Turner			Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 6811 Old Canton Road #4103			Amount of Each Disbursement this Period 375.00
City Ridgeland	State MS	Zip Code 39157-	
Purpose of Disbursement Salary	Candidate Name		Transaction ID : 20227.E9163
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		SALARY

Full Name (Last, First, Middle Initial) B. Verizon Business			Date of Disbursement MM / DD / YYYY 01 / 06 / 2012
Mailing Address P.O. Box 371873			Amount of Each Disbursement this Period 26.05
City Pittsburgh	State PA	Zip Code 15250-7873	
Purpose of Disbursement Long Distance Service	Candidate Name		Transaction ID : 20109.E9019
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		LONG DISTANCE SERVICE

Full Name (Last, First, Middle Initial) c. Verizon Business			Date of Disbursement MM / DD / YYYY 02 / 03 / 2012
Mailing Address P.O. Box 371873			Amount of Each Disbursement this Period 27.71
City Pittsburgh	State PA	Zip Code 15250-7873	
Purpose of Disbursement Long Distance Service	Candidate Name		Transaction ID : 20227.E9110
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		LONG DISTANCE SERVICE

SUBTOTAL of Disbursements This Page (optional).....	428.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 65			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. WAID-FM		Date of Disbursement MM / DD / YYYY 02 / 15 / 2012
Mailing Address 911 South Davis St.		Amount of Each Disbursement this Period 1975.40
City Cleveland	State MS Zip Code 38732-	
Purpose of Disbursement Radio Spot	Category/Type	Transaction ID : 20227.E9151
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	RADIO SPOT
State: District:		

Full Name (Last, First, Middle Initial) B. Ms. Fannie L. Ware		Date of Disbursement MM / DD / YYYY 01 / 20 / 2012
Mailing Address 113 Choctaw Blvd.		Amount of Each Disbursement this Period 81.09
City Clinton	State MS Zip Code 39056-	
Purpose of Disbursement Travel Expense	Category/Type	Transaction ID : 20126.E9082
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TRAVEL EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) C. Ms. Fannie L. Ware		Date of Disbursement MM / DD / YYYY 02 / 03 / 2012
Mailing Address 113 Choctaw Blvd.		Amount of Each Disbursement this Period 90.06
City Clinton	State MS Zip Code 39056-	
Purpose of Disbursement Travel Expense	Category/Type	Transaction ID : 20227.E9116
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TRAVEL EXPENSE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2146.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. WBAD		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2012
Mailing Address 126 Seven Oaks Rd.		Amount of Each Disbursement this Period 650.00
City Greenville	State MS Zip Code 38701-	
Purpose of Disbursement Live Remote	Category/Type	Transaction ID : 20227.E9143
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	LIVE REMOTE
State: District:		

Full Name (Last, First, Middle Initial) B. WBAD		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 126 Seven Oaks Rd.		Amount of Each Disbursement this Period 2316.00
City Greenville	State MS Zip Code 38701-	
Purpose of Disbursement Radio Spot	Category/Type	Transaction ID : 20227.E9149
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	RADIO SPOT
State: District:		

Full Name (Last, First, Middle Initial) C. WCLD-FM		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address P.O. Box 780		Amount of Each Disbursement this Period 1975.40
City Cleveland	State MS Zip Code 38732-	
Purpose of Disbursement Radio Spot	Category/Type	Transaction ID : 20227.E9150
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	RADIO SPOT
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4941.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. WGNL Radio Station		Date of Disbursement MM / DD / YYYY 02 / 15 / 2012
Mailing Address P.O. Box 1801		Amount of Each Disbursement this Period 3286.10
City Greenwood	State MS	
Zip Code 38930-	Purpose of Disbursement Radio Spot	Transaction ID : 20227.E9148
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	RADIO SPOT
State: District:		

Full Name (Last, First, Middle Initial) B. WHLH		Date of Disbursement MM / DD / YYYY 02 / 15 / 2012
Mailing Address 1375 Beasley Road		Amount of Each Disbursement this Period 5166.30
City Jackson	State MS	
Zip Code 39206-	Purpose of Disbursement Radio Spot	Transaction ID : 20227.E9159
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	RADIO SPOT
State: District:		

Full Name (Last, First, Middle Initial) C. WIBT-FM		Date of Disbursement MM / DD / YYYY 02 / 15 / 2012
Mailing Address Delta Radio Network, LLC P.O. Box 667		Amount of Each Disbursement this Period 1553.00
City Indianola	State MS	
Zip Code 38751-	Purpose of Disbursement Radio Spot	Transaction ID : 20227.E9160
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	RADIO SPOT
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10005.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 65			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. WJIW-FM		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 830 Maine Street		Amount of Each Disbursement this Period 1618.50
City Greenville	State MS	
Zip Code 38702-		Transaction ID : 20227.E9154
Purpose of Disbursement Radio Spot	Category/Type	
Candidate Name		RADIO SPOT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. WJMI		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 731 S. Pear Orchard, Ste. 27		Amount of Each Disbursement this Period 6492.00
City Ridgeland	State MS	
Zip Code 39157-		Transaction ID : 20227.E9156
Purpose of Disbursement Radio Spot	Category/Type	
Candidate Name		RADIO SPOT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. WKOZ		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 1 Golfcourse Road		Amount of Each Disbursement this Period 1012.60
City Kosciusko	State MS	
Zip Code 39090-		Transaction ID : 20227.E9161
Purpose of Disbursement Radio Spot	Category/Type	
Candidate Name		RADIO SPOT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9123.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 65	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. WKXI FM Radio		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 731 So. Pear Orchard Ste. 27		Amount of Each Disbursement this Period 8218.00
City Ridgeland	State MS	
Zip Code 39157-	Purpose of Disbursement Radio Spot	Transaction ID : 20227.E9152
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	RADIO SPOT
State: District:		

Full Name (Last, First, Middle Initial) B. WOAD		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 731 S. Pear Orchard, Ste. 27		Amount of Each Disbursement this Period 1660.00
City Ridgeland	State MS	
Zip Code 39157-	Purpose of Disbursement Radio Spot	Transaction ID : 20227.E9155
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	RADIO SPOT
State: District:		

Full Name (Last, First, Middle Initial) C. WONG		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 126 E. Sowell		Amount of Each Disbursement this Period 1269.90
City Canton	State MS	
Zip Code 39046-	Purpose of Disbursement Radio Spot	Transaction ID : 20227.E9158
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	RADIO SPOT
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11147.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 65			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name (Last, First, Middle Initial) A. WRTM Radio Station		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address P.O. Box 9734		Amount of Each Disbursement this Period 2597.00
City Jackson	State MS	
Zip Code 39286-	Purpose of Disbursement Radio Spot	Transaction ID : 20227.E9153
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	RADIO SPOT
State: District:		

Full Name (Last, First, Middle Initial) B. WTYJ Radio		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address P.O. Box 1248		Amount of Each Disbursement this Period 2324.00
City Natchez	State MS	
Zip Code 39121-	Purpose of Disbursement Radio Spot	Transaction ID : 20227.E9157
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	RADIO SPOT
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4921.00
TOTAL This Period (last page this line number only).....	155034.69